



# Epinephrine 1:1,000 Multidose Vial

<b>CLASS:</b>	Sympathomimetic or Catecholamine
<b>ACTIONS:</b>	Positive inotrope (force of contraction) Positive chronotrope (heart rate) Causes bronchodilation
<b>INDICATIONS:</b>	Acute Allergic Reaction Adult Cardiac Dysrhythmia Bradycardia Cardiac Arrest Shockable Cardiac Arrest Non-Shockable Respiratory Distress Obstetrical Emergencies Post Delivery and Neonatal Resuscitation Post Resuscitative Care
<b>CONTRAINDICATIONS:</b>	None when used in the emergency setting
<b>PRECAUTIONS:</b>	Should be protected from light Blood pressure, pulse, and ECG must be constantly monitored Use caution with the elderly and those with pre-existing cardiovascular disease
<b>SIDE EFFECTS:</b>	Tachydysrhythmias Anxiety
<b>ADULT DOSAGE:</b>	<b>Acute Allergic Reaction/Anaphylaxis:</b> Administer <i>Epinephrine 1:1,000 0.3 mg IM (0.3mL)</i> <b>Cardiac Dysrhythmia Bradycardia/Unstable Bradycardia:</b> <b>Impending cardiac arrest –Epinephrine infusion 2-10 mcg/min (1 mg of 1:1,000 in 250 mL 0.9% Normal Saline)</b> titrated to effect <b>Cardiac Arrest Shockable:</b> For Return Of Spontaneous Circulation (ROSC) consider <i>Epinephrine IV Infusion 0.1 mcg/kg/min IV/IO (1 mg of 1:1,000 in 250 mL 0.9% Normal Saline)</i> <b>Cardiac Arrest Non-Shockable:</b> For Return Of Spontaneous Circulation (ROSC) consider <i>Epinephrine IV Infusion 0.1 mcg/kg/min IV/IO (1 mg of 1:1,000 in 0.9% Normal Saline 250 mL)</i> ; titrate to Mean Arterial Pressure of 90-100 mmHg <b>Respiratory Distress/Status Asthmaticus:</b> Administer <i>Epinephrine 1:1,000 0.3mg IM (0.3 mL)</i> <b>Respiratory Distress/Stridor:</b> If no improvement after administration of Inhalation Saline, administer <i>3cc of Epinephrine 1:1,000</i> in nebulizer



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## Obstetrical Emergencies:

Newborn Respiratory Distress - If there is no *Epinephrine 1:10,000 preloaded syringe*, combine in a *10 mL syringe: 1mg (1mL) of Epinephrine 1:1,000 with 9 mL 0.9% Normal Saline*; this creates the same as an *Epinephrine 1:10,000 preloaded syringe*

## Post Resuscitation Care:

For Return Of Spontaneous Circulation (ROSC) consider *Epinephrine IV Infusion 0.1 mcg/kg/min IV/IO (1 mg of 1:1,000 in 250 mL 0.9% Normal Saline)*

## PEDIATRIC DOSAGE:

### Acute Allergic Reaction/Anaphylaxis:

Administer *Epinephrine 1:1,000 0.01 mg/kg IM up to a maximum of 0.3 mg*

### Cardiac Arrest Shockable and Non-Shockable:

If there is no *Epinephrine 1:10,000 preloaded syringe*, combine in a *10 mL syringe: 1mg (1mL) of Epinephrine 1:1,000 with 9 mL 0.9% Normal Saline*; this creates the same as an *Epinephrine 1:10,000 preloaded syringe*

### Respiratory Distress/Asthma Bronchospasm over 2 years of age:

Consider *Epinephrine: Greater than 30 kg: 1:1,000 0.3 mg IM Less than 30 kg: 1:1,000 0.01 mg/kg IM*

### Respiratory Distress/Status Asthmaticus:

Administer *Epinephrine:*  
*Greater than 30 kg: 1:1,000 0.3 mg IM*  
*Less than 30 kg: 1:1,000 0.01 mg/kg IM*

### Post Delivery and Neonatal Resuscitation:

If there is no *Epinephrine 1:10,000 preloaded syringe*, combine in a *10 mL syringe: 1mg (1mL) of Epinephrine 1:1,000 with 9 mL 0.9% Normal Saline*; this creates the same as an *Epinephrine 1:10,000 preloaded syringe*