

ILLINOIS REGION 3 PROTOCOLS

| VERAPAMIL (CALAN) | |
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| CLASS | Calcium channel blocker |
| ACTION | <ul style="list-style-type: none"> ▪ Blocks the entry of calcium into the cell ▪ Slows conduction through the AV node ▪ Negative chronotrope (slows heart rate) ▪ Negative inotrope (decreased force of cardiac contraction) |
| INDICATIONS | To control the rate in hemodynamically stable atrial fibrillation or atrial flutter with rapid ventricular response. |
| CONTRAINDICATIONS | <ul style="list-style-type: none"> ▪ Hypotension ▪ Cardiogenic shock ▪ Myocardial infarction ▪ Wide complex tachycardias ▪ WPW syndrome ▪ Patients taking beta blockers |
| PRECAUTIONS | <ul style="list-style-type: none"> ▪ Vital signs should be monitored closely. ▪ May induce or exacerbate CHF/pulmonary edema |
| SIDE EFFECTS | <ul style="list-style-type: none"> ▪ Headache ▪ Dizziness ▪ Sweating ▪ Seizures ▪ Bradycardia ▪ Heart blocks ▪ Hypotension ▪ Asystole ▪ Ventricular fibrillation |
| ROUTE | IV |
| DOSE | <ul style="list-style-type: none"> ▪ 2.5-5 mg slow IVP over 2-3 minutes. ▪ May repeat at 5-10 mg in 15-30 minutes if rhythm persists with no adverse effects after initial dose. ▪ Total dose should not exceed 30 mg in 30 minutes. |
| PEDIATRIC DOSE | <ul style="list-style-type: none"> ▪ Verapamil is not recommended in the pediatric population in the absence of Medical Direction. ▪ Reference policy PED-5 |
| ONSET | 3 to 5 minutes |
| DURATION | 2 hours |
| STOCK | (2) 5 mg/2 mL vials |