

ILLINOIS REGION 3 PROTOCOLS

ATROPINE SULFATE	
CLASS	Parasympathetic blocker; anti-cholinergic
ACTION	<ul style="list-style-type: none"> ▪ Increases the heart rate (positive chronotrope) by binding to muscarinic receptor sites to block the action of acetylcholine. ▪ Enhances both sinus node automaticity and atrioventricular conduction.
INDICATIONS	<ul style="list-style-type: none"> ▪ Symptomatic bradycardia ▪ Asystole ▪ Pulseless Electrical activity (PEA) with rate less than 60 ▪ Organophosphate poisoning
CONTRAINDICATIONS	<ul style="list-style-type: none"> ▪ Use with caution in high degree heart blocks with wide QRS ▪ Use with caution in the patient with MI as an increase in heart rate could increase cardiac workload
PRECAUTIONS	A dose less than 0.5 mg in the adult could result in paradoxical slowing of the heart rate.
SIDE EFFECTS	<ul style="list-style-type: none"> ▪ Tachycardia ▪ Hypertension ▪ Palpitations ▪ Headache ▪ Blurred vision ▪ Dilated pupils ▪ Dry mouth ▪ Confusion ▪ Drowsiness
ROUTE	<ul style="list-style-type: none"> ▪ IV push ▪ Endotracheal
DOSE	<ul style="list-style-type: none"> ▪ Symptomatic bradycardia: 0.5 mg every 5 minutes to maximum dose of 3 mg. ▪ Asystole/PEA: 1 mg every 3-5 minutes to maximum dose of 3 mg. ▪ Organophosphate poisoning: 2-5 mg IVP
PEDIATRIC DOSE	<ul style="list-style-type: none"> ▪ 0.02 mg/kg ▪ Minimum single dose is 0.1 mg. ▪ Maximum single dose 0.5 mg ▪ May repeat once ▪ Use Broselow tape or pediatric weight based dosing chart to confirm dose. ▪ Reference policy PED-3.2
ONSET	2 to 5 minutes
DURATION	20 minutes
STOCK	(5) 1 mg/10 mL Abbojects