

ILLINOIS REGION 3 PROTOCOLS

DOPAMINE (INTROPIN)	
CLASS	Vasopressor; Adrenergic; Catecholamine
ACTION	<ul style="list-style-type: none"> ▪ Acts on alpha and beta 1 receptor sites to vasoconstrict and increase heart rate. ▪ Positive chronotrope (increases heart rate) ▪ Positive inotrope (increases force of cardiac contraction) ▪ Vasopressor at higher doses (increases BP)
INDICATIONS	<ul style="list-style-type: none"> ▪ Symptomatic bradycardia refractory to atropine ▪ Cardiogenic shock with hypotension
CONTRAINDICATIONS	<ul style="list-style-type: none"> ▪ Hypersensitivity to the drug ▪ Hypovolemic shock ▪ Tachydysrhythmias ▪ Ventricular dysrhythmias (V-tach / V-fib)
PRECAUTIONS	<ul style="list-style-type: none"> ▪ Dopamine is not a substitute for fluid or blood volume deficits ▪ Extravasation (infiltration) can cause necrosis with tissue sloughing ▪ Monitor vital signs every 5 minutes during administration ▪ Monitor cardiac rhythm closely.
SIDE EFFECTS	<ul style="list-style-type: none"> ▪ Tachycardia ▪ Ectopic beats ▪ Angina ▪ Palpitations ▪ Headache ▪ Nausea; vomiting ▪ Hypertension
ROUTE	IV infusion (The infusion rate must be monitored precisely – preferred to use with an IV pump)
DOSE	<ul style="list-style-type: none"> ▪ Symptomatic bradycardia: 5-10 mcg/kg/minute ▪ Cardiogenic shock: 5-20 mcg/kg/minute
PEDIATRIC DOSE	<ul style="list-style-type: none"> ▪ Per Medical Control 5-20 mcg/kg/minute infusion ▪ Utilize Broselow tape or pediatric weight based dosing chart to confirm dose ▪ Reference policy PED-9.2
ONSET	5 minutes
DURATION	5 to 10 minutes
STOCK	(1) 1600 mcg/mL premix solution (800 mg/500 mL)