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Medication	Adult Dosing	Pediatric Dosing
Acetaminophen (Tylenol) NCCEP Protocol: * 7-Pain Control-Adult * 46-Pain Control-Pediatric * 72-Fever	• 1000 mg po	 See Color Coded List 15 mg/kg po
Indications/Contraindications: Indicated for pain and fever control Avoid in patients with severe liver disease		
Adenosine (Adenocard) NCCEP Protocol: * 16-Adult Tachycardia Narrow Complex * 17-Adult Tachycardia Wide Complex * 52-Pediatric Tachycardia Indications/Contraindications: • Specifically for treatment or diagnosis of Supraventricular Tachycardia	 6 mg IV push over 1-3 seconds. If no effect after 1-2 minutes, Repeat with 12 mg IV push over 1-3 seconds. Repeat once if necessary (use stopcock and 20 ml Normal Saline flush with each dose) 	 0.1 mg/kg IV (Max 6 mg) push over 1-3 seconds. If no effect after 1-2 minutes, Repeat with 0.2 mg/kg IV (Max 12 mg) push over 1-3 seconds. Repeat once if necessary (use stopcock and Normal Saline flush with each dose)
Albuterol Beta-Agonist NCCEP Protocol: * 24-Allergic Reaction Anaphylaxis * 26-COPD Asthma * 56-Pediatic Allergic Reaction * 61-Pediatric Respiratory Distress Indications/Contraindications: • Beta-Agonist nebulized treatment for use in respiratory distress with bronchospasm	2.5-5.0 mg (3cc) in nebulizer continuously x 3 doses. See local protocol for relative contraindications and/or indications to contact medical control for use of this drug.	See Color Coded List 2.5mg (3cc) in nebulizer continuously x 3 doses. See local protocol for relative contraindications and/or indications to contact medical control for use of this drug.

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Pediatric Color Coded Drug List for pediatric dosages		
Medication	Adult Dosing	Pediatric Dosing
Amiodarone (Cordarone) NCCEP Protocol: * 17-Adult Tachycardia Wide Complex * 18-VF Pulseless VT * 52-Pediatric Tachycardia * 53-Pediatric VF Pulseless VT * 54-Pediatric Post Resuscitation Indications/Contraindications: • Antiarrhythmic used mainly in wide complex tachycardia and ventricular fibrillation. • Avoid in patients with heart block or profound bradycardia. • Contraindicated in patients with iodine hypersensitivity	V-fib / pulseless V-tach 300 mg IV push Repeat dose of 150 mg IV push for recurrent episodes V-tach with a pulse 150 mg in 100cc D5W over 10 min	V-fib / pulseless V-tach The standard of the
Aspirin NCCEP Protocol: * 7-Pain Control Adult * 14-Chest Pain and STEMI Indications/Contraindications: • An antiplatelet drug for use in cardiac chest pain	81 mg chewable (baby) Aspirin Give 4 tablets to equal usual adult dose.	Ø
Atropine NCCEP Protocol: * 12-Bradycardia Pulse Present * 49-Pediatric Bradycardia * 84-WMD Nerve Agent Indications/Contraindications: • Anticholinergic drug used in bradycardias. • (For Endotracheal Tube use of this drug, double the dose) • In Organophosphate toxicity, large	Bradycardia 0.5 - 1.0 mg IV every 3 – 5 minutes up to 3 mg. (If endotracheal max 6 mg) Organophosphate 1-2 mg IM or IV otherwise as per medical control	Bradycardia 0.02 mg/kg IV, IO (Max 0.5 mg per dose, Max total dose 1mg IV) (Min 0.1 mg) per dose May repeat in 3 - 5 minutes Organophosphate 0.05 mg/kg IV or IO otherwise as per medical control

Drug List A (Page 2 of 17)

doses may be required (>10 mg)

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Medication	Adult Dosing	Pediatric Dosing
Atropine and Pralidoxime Auto- Injector Nerve Agent Kit NCCEP Protocol: * 84-WMD Nerve Agent Indications/Contraindications:	One auto-injector then per medical control	See Color Coded List One pediatric auto-injector then as per medical control
 Antidote for Nerve Agents or Organophosphate Overdose 		
Calcium Chloride NCCEP Protocol: * 28-Dialysis Renal Failure * 31-Overdose Toxic Ingestion * 60-Ped OD Toxic Ingestion * 83-Marine Envenomations * 88-Crush Syndrome Indications/Contraindications: Indicated for severe hyperkalemia	 1 gm IV / IO Avoid use if pt is taking digoxin 	 See Color Coded List 20 mg/kg IV or IO slowly
Dextrose 5%, 10%, 25%, & 50% Glucose solutions NCCEP Protocol: * Multiple Indications/Contraindications: • Use in altered mental status or hypoglycemic states	See local protocol for concentration and dosing	See Color Coded List See local protocol for concentration and dosing

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Medication	Adult Dosing	Pediatric Dosing
Diazepam (Valium) Benzodiazepene NCCEP Protocol: * 32-Seizure * 39-Obstetrical Emergency * 62-Pediatric Seizure Indications/Contraindications: Seizure control	 4 mg IV / IO initially then 2 mg IV / IO every 3 - 5 minutes up to 10 mg max unless med control dictates Do not administer IM. The drug is not absorbed. 10 mg Rectally if unable to obtain an IV. 	 See Color Coded List 0.1 - 0.3 mg/kg IV/IO (Max dose 4 mg IV, IO) 0.5 mg/kg rectally (Dia-Stat) (Max dose 10 mg rectally) Repeat as directed by local protocol
Mild Sedation Diltiazem		
(Cardizem) Calcium Channel Blocker	See local protocol for dosing	Ø
NCCEP Protocol: ★ 16-Adult Tachycardia Narrow Complex		
 Indications/Contraindications: Calcium channel blocker used to treat narrow complex SVT Contraindicated in patients with heart block, ventricular tachycardia, and/or acute MI 		
Diphenhydramine (Benadryl) NCCEP Protocol: * 24-Allergic Reaction Anaphylaxis * 56-Pediatic Allergic Reaction Indications/Contraindications: • Antihistamine for control of allergic reactions	• 25-50 mg IV/IO/IM/PO	 See Color Coded List 1 mg/kg IV/IO/IM/PO Do not give in infants < 3 mo

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Medication	Adult Dosing	Pediatric Dosing
Dopamine NCCEP Protocol: ★ Multiple Indications/Contraindications: • A vasopressor used in shock or hypotensive states	2 - 20 micrograms/kg/min IV or IO, titrate to BP systolic of 90 mmHg	See Color Coded List 2 - 20 micrograms/kg/min IV or IO, titrate to BP systolic appropriate for age
Epinephrine 1:1,000 NCCEP Protocol: * Multiple Indications/Contraindications: • Vasopressor used in allergic reactions or anaphylaxis	 0.3 mg IM See local protocol for relative contraindications and/or indications to contact medical control for use of this drug. Nebulized Epinephrine 1 mg mixed with 2 ml of Normal Saline 	See Color Coded List 0.01 mg/kg IM (Max dose 0.3 mg) Nebulized Epinephrine 1 mg mixed with 2 ml of Normal Saline
Epinephrine 1:10,000 NCCEP Protocol: ★ Multiple Indications/Contraindications: • Vasopressor used in cardiac arrest.	 1.0 mg IV / IO Repeat every 3 - 5 minutes until observe response (May be given by Endotracheal tube in double the IV dose) 	 See Color Coded List 0.01 mg/kg IV or IO (Max dose 1 mg) Repeat every 3 - 5 minutes per protocol (May be given by Endotracheal tube in double the IV dose)
Etomidate (Amidate) NCCEP Protocol: * 4-Airway Rapid Sequence Intubation * 20-Induced Hypothermia Indications/Contraindications: • Sedative used in Drug Assisted Intubation	 0.3 mg/kg IV / IO Usual adult dose = 20 mg 	Ø

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Medication	Adult Dosing	Pediatric Dosing
Fentanyl (Sublimaze) Narcotic Analgesic NCCEP Protocol: * Multiple	50-75 mcg IM/IV/IO bolus then 25 mcg IM/IV/IO every 20 minutes until a maximum of 200 mcg or clinical improvement	See Color Coded List 1 mcg/kg IM/IN/IV/IO May repeat 0.5 mcg/kg every 5 minutes Maximum dose 2 mcg/kg
 Indications/Contraindications: Narcotic pain relief Possible beneficial effect in pulmonary edema Avoid use if BP < 110 		
Furosemide (Lasix)	See local protocol for dosing guidelines	See local protocol for dosing guidelines
 NCCEP Protocol: * 15-CHF Pulmonary Edema * 50-Pediatric CHF Pulmonary Edema Indications/Contraindications: Diuretic for pulmonary edema or CHF but no proven benefit in prehospital care 		
Glucagon NCCEP Protocol: * 27-Diabetic; Adult * 31-Overdose Toxic Ingestion * 58-Pediatric Diabetic * 60-Ped OD Toxic Ingestion Indications/Contraindications: • Drug acting to release glucose into blood stream by glycogen breakdown • Use in patients with no IV access	 1 - 2 mg IM Repeat blood glucose measurement in 15 minutes, if ≤ 69 mg / dl repeat dose. 	 See Color Coded List 0.1 mg/kg IM, Maximum 1 mg Repeat blood glucose measurement in 15 minutes, if ≤ 69 mg / dl repeat dose.

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Medication	Adult Dosing	Pediatric Dosing
Glucose Oral Glucose Solutions NCCEP Protocol: * 27-Diabetic; Adult * 58-Pediatric Diabetic Indications/Contraindications: • Use in conscious hypoglycemic states	One tube or packet Repeat based on blood glucose results, per protocol	 See Color Coded List One Tube or packet Repeat based on blood glucose results, per protocol Consider patient's ability to swallow and follow directions based on age
Haloperidol (Haldol) Phenothiazine Preperation NCCEP Protocol: * 6-Behavioral Indications/Contraindications: • Medication to assist with sedation of agitated patients	2.5-10 mg IV/IM, per local protocol See local protocol for relative contraindications and/or indications to contact medical control for use of this drug.	Ø
Hydromorphone (Dilaudid) NCCEP Protocol: * Multiple Indications/Contraindications: • Narcotic pain relief • Avoid use if BP < 110	 1 – 2 mg IV / IO / IM Repeat as necessary every 20-30 min until clinical improvement Maximum dose - 5 mg 	Ø

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Medication	Adult Dosing	Pediatric Dosing
Ibuprofen (Motrin)	• 400-800 mg po	See Color Coded List 10 mg/kg po Do not use in patients 6 months of age or younger
 Avoid in patients currently taking anticoagulants, such as coumadin. 		
Ipratropium (Atrovent) NCCEP Protocol: * 24-Allergic Reaction Anaphylaxis * 26-COPD Asthma * 56-Pediatic Allergic Reaction * 61-Pediatric Respiratory Distress Indications/Contraindications: • Medication used in addition to albuterol to assist in patients with asthma and COPD	2 puffs per dose of MDI (18 mcg/spray) OR 0.5 mg per nebulizer treatment	 Use in Pediatrics as a combined Therapy with a Beta Agonist such as Albuterol 2 puffs per dose of MDI (18 mcg/spray)

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Medication	Adult Dosing	Pediatric Dosing
<u>Ketamine</u>	• 1.5 – 2 mg/kg IV / IO	CX
NCCEP Protocol: ★ 4-Airway Rapid Sequence Intubation		
 Indications/Contraindications: Dissocitive anesthetic used in Drug Assisted Intubation Avoid use in CVA and severe hyperstensive patients 		
<u>Ketorolac</u> (Toradol)	• 30 mg IV / IO or 60 mg IM	0.5 mg/kg IV / IO / IM Maximum 30 mg
Non-steroidal Anti-		maximum 55 mg
inflammatory Drug		
NCCEP Protocol: ★ 7-Pain Control Adult ★ 46-Pediatric Pain Control Indications/Contraindications: ■ Avoid NSAIDS in women who are pregnant or could be pregnant ■ A nonsteroidal anti-inflammatory drug used for pain control.		
 Not to be used in patients with history of GI bleeding (ulcers), renal insufficiency, or in patients who may need immediate surgical intervention (i.e. obvious fractures). 		
 Not to be used in patients with allergies to aspirin or other NSAID drugs such as motrin 		
Avoid in patients currently taking anticoagulants such as coumadin		

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Adult Dosing

Medication

Indications/Contraindications:

trimester of pregnancy.

 Elemental electrolyte used to treat eclampsia during the third

A smooth muscle relaxor used in

refractory respiratory distress resistent to beta-agonists

Lactated Ringer's Dosing per protocol, similar to Dosing per protocol, similar to Solution Normal Saline Normal Saline **NCCEP Protocol:** * 40-Adult Thermal Burn * 67-Pediatric Thermal Burn Indications/Contraindications: Crystalloid solution preferred for fluid rescuscitation and preferred in burn care. Lidocaine 1.5 mg/kg IV / IO bolus (ETT dose **See Color Coded List** = 2 x IV dose) up to 3mg/kg max 1 mg/kg IV / IO NCCEP Protocol: bolus dose Maximum 100 mg * 4-Airway Rapid Sequence See local protocol for specific Repeat 0.5 mg/kg Intubation dosing algorithm Maximum 3 mg/kg total * 18-VF Pulseless VT \$\blue{\pi}\$ 53-Pediatric VF Pulseless VT **Indications/Contraindications:** Antiarrhythmic used for control of ventricular dysrrythmias Anesthetic used during intubation to prevent elevated intracranial pressures during intubation **Magnesium Sulfate Respiriatory Distress:** 40 mg/kg IV / IO over 20 minutes (Max 2 gms) **NCCEP Protocol:** 2 g IV / IO over 10 minutes Repeat dosing per local protocol Multiple Repeat dosing per local protocol

Dose may be repeated once, or as

Pediatric Dosing

2 g IV / IO over 2-3 minutes

Obstetrical Seizure:

per local protocol

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Medication	IC C	Adult Dosing	iosa	ages Pediatric Dosing
Methylprednisolone (Solu-medrol) Steroid Preparation NCCEP Protocol: * 24-Allergic Reaction Anaphylaxis * 26-COPD Asthma * 56-Pediatic Allergic Reaction * 61-Pediatric Respiratory Distress Indications/Contraindications: • Steroid used in respiratory distress to reverse inflammatory and allergic reactions	•	125 mg IV / IO IM dosing only if indicated by local protocol	•	See Color Coded List 2 mg/kg IV / IO (Max 125 mg) IM dosing only if indicated by local protocol
Midazolam (Versed) Benzodiazepine NCCEP Protocol: * Multiple Indications/Contraindications: • Benzodiazepine used to control seizures and sedation • Quick acting Benzodiazepine • Preferred over Valium for IM use • Use with caution if BP < 110	•	See individual protocols for dosing Usual total dose: 2.5-5 mg IV / IO / IM	•	See Color Coded List See individual protocols for dosing Usual total dose 0.1-0.2 mg/kg IV / IO / IM / IN
Morphine Sulfate Narcotic Analgesic NCCEP Protocol: * Multiple Indications/Contraindications: • Narcotic pain relief • Possible beneficial effect in pulmonary edema • Avoid use if BP < 110	•	4 mg IM/IV/IO bolus then 2 mg IM/IV/IO every 5-10 minutes until a maximum of 10 mg or clinical improvement	•	See Color Coded List 0.1 mg/kg IV / IO / IM May repeat every 5 minutes Maximum single dose 5 mg Maximum dose 10 mg

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Medication Adult Dosina **Pediatric Dosing Naloxone** 0.4 - 2 mg IV / IO / IM / IN / ETT **See Color Coded List** (Narcan) bolus titrated to patient's 0.1 mg/kg IV / IO / IN / IM / ETT respiratory response **Narcotic Antagonoist** (Max 2 mg) Repeat as per protocol **NCCEP Protocol:** * 31-Overdose Toxic Ingestion * 60-Ped OD Toxic Ingestion Indications/Contraindications: Narcotic antagonist **Normal Saline** See individual protocol for bolus **See Color Coded List Crystalloid Solutions** dosing and/or infusion rate See individual protocol for bolus dosing and/or infusion rate **NCCEP Protocol:** Usual initial bolus 20 mL / kg IV / Multiple Indications/Contraindications: IV fluid for IV access or volume infusion **Nitroglycerin** 0.3 / 0.4 mg SL every 5 minutes until painfree NCCEP Protocol: See Chest Pain Protocol for paste * 14-Chest Pain and STEMI dosina * 15-CHF Pulmonary Edema **Indications/Contraindications:** Vasodilator used in anginal syndromes and CHF. **Nitrous Oxide** Inhaled gas to effect per local Inhaled gas to effect per local protocol protocol NCCEP Protocol: * 7-Pain Control Adult Indications/Contraindications: · Medication used to assist with control of pain

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Medication	Adult Dosing	Pediatric Dosing
Ondansetron (Zofran) Anti-emetic NCCEP Protocol: * 23-Abdominal Pain Protocol * 35-Vomiting and Diarrhea * 63-Pediatric Vomiting and Diarrhea Indications/Contraindications: • Anti-Emetic used to control Nausea and/or Vomiting • Ondansetron (Zofran) is the recommended Anti-emetic for EMS use since it is associated with significantly less side effects and sedation.	4 mg IV / IO / IM / PO / ODT Repeat only as per local protocol	0.15 mg/kg IV / IO / IM (Max 4 mg) 0.2 mg/kg PO / ODT (Max 4 mg) Repeat only as per local protocol
NCCEP Protocol: ★ Multiple Indications/Contraindications: Indicated in any condition with increased cardiac work load, respiratory distress, or illness or injury resulting in altered ventilation and/or perfusion. Goal oxygen saturation 94-99%. Indicated for pre-oxygenation whenever possible prior to endotracheal intubation. Goal oxygen saturation 100%.	 1-4 liters/min via nasal cannula 6-15 liters/min via NRB mask 15 liters via BVM / ETT / BIAD 	 1-4 liters/min via nasal cannula 6-15 liters/min via NRB mask 15 liters via BVM / ETT / BIAD

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Medication	Adult Dosing	Pediatric Dosing
Oxymetazoline (Afrin or Otrivin) Nasal Decongestant Spray NCCEP Protocol: * 71-Epistaxis Indications/Contraindications: • Vasoconstrictor used with nasal intubation and epistaxis • Relative Contraindication is significant hypertension	 2 sprays in affected nostril Usual concentration is 0.05% by volume 	 See Color Coded List 1-2 sprays in affected nostril Usual concentration is 0.05% by volume
Pralidoxime (2-PAM) NCCEP Protocol: * 84-WMD Nerve Agent Indications/Contraindications: • Antidote for Nerve Agents or Organophosphate Overdose • Administered with Atropine	 600 mg IV / IO / IM over 30 minutes for minor symptoms 1800 mg IV / IO / IM over 30 minutes for major symptoms See local protocol for minor versus major indications 	 15 – 25 mg/kg IV / IM / IO over 30 minutes See local protocol for specific pediatric dosing recommendations

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Medication	Adult Dosing	Pediatric Dosing
Promethazine (Phenergan) Anti-emetic NCCEP Protocol: * 23-Abdominal Pain * 35-Vomiting and Diarrhea Indications/Contraindications: IV Promethazine (Phenergan) should be given IV only with great caution. Extravasation of this drug can result in significant local tissue damage. Anti-Emetic used to control Nausea and/or Vomiting Ondansetron (Zofran) is the recommended Anti-emetic for EMS use since it is associated with significantly less side effects and sedation.	 12.5 mg IV / IO / IM May repeat as per local protocol 	Ø
Rocuronium NCCEP Protocol: ★ 4-Airway Rapid Sequence Intubation Indications/Contraindications: • Non-depolarizing paralytic agent used as a component of drug assisted intubation (Rapid Sequence Intubation), when succinylcholine is contraindicated. • Onset of action is longer than succinylcholine, up to 3 minutes, patient will NOT defasciculate.	1 mg / kg IV / IO Only may repeat x1 per RSI protocol	Ø

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Medication **Adult Dosing Pediatric Dosing** Sodium Bicarbonate Initial bolus 50 mEq IV / IO **See Color Coded List** See individual protocol for specific Initial bolus 1 mEq / kg IV / IO **NCCEP Protocol:** dosing algorithm. Maximum 50 mEq * 28-Dialysis Renal Failure * 31-Overdose Toxic Ingestion See individual protocol for * 60-Ped OD Toxic Ingestion specific dosing algorithm. * 88-Crush Syndrome Indications/Contraindications: A buffer used in acidosis to increase the pH in Cardiac Arrest, Hyperkalemia or Tricyclic Overdose. Succinylcholine 1.5 mg/kg IV / IO **Paralytic Agent** Only may repeat x1 per RSI protocol **NCCEP Protocol:** * 4-Airway Rapid Sequence Intubation Indications/Contraindications: Paralytic Agent used as a component of Drug Assisted Intubation (Rapid Sequence Intubation) Avoid in patients with burns >24 hours old, chronic neuromuscular disease (e.g., muscular dystrophy), ESRD, or other situation in which hyperkalemia is likely.

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Medication	Adult Dosing	Pediatric Dosing
Tranexamic Acid (TXA) NCCEP Protocol: * 30-Hypotension / Shock * 42-Multiple Trauma Indications/Contraindications: • Anti-fibrinolytic used for trauma patients needing massive blood transfusion from uncontrolled hemorrhage	1 gm / 100 ml over 10 min Mix with NaCl or D5W	Ø
Must be given within 3 hrs of injury		
Vasopressin (Pitressin) NCCEP Protocol: * 11-Asystole Pulseless Electrical Activity * 18-VF Pulseless VT Indications/Contraindications:	40 units IV / IO, may replace first or second dose of epinephrine	Ø
Medication used in place of and/or in addition to epinephrine in the setting of cardiac arrest		
Vecuronium Paralytic Agent NCCEP Protocol: ★ 4-Airway Rapid Sequence Intubation ★ 19-Post Resuscitation ★ 20-Induced Hypothermia Indications/Contraindications: • Long-acting non-depolarizing paralytic agent	 0.1 mg/kg IV / IO or 10 mg IV / IO, as per individual protocol Only may repeat dosing as per individual protocol 	Ø
Avoid in patients with chronic neuromuscular disease (e.g., muscular dystrophy).		