

SCOPE: ALS, CCT,	
MEDICATION:	ATROPINE
INTERVENTION:	<p><u>Classification:</u> Anticholinergic Agent</p> <p><u>Actions:</u> Blocks the action of acetylcholine at parasympathetic sites in smooth muscle, secretory glands, and the CNS; increases cardiac output, dries secretions; reverses the muscarinic effects of cholinergic poisoning due to agents with acetylcholinesterase inhibitor activity by acting as a competitive antagonist of acetylcholine at muscarinic receptors</p> <p><u>Contraindications:</u></p> <ul style="list-style-type: none"> • None <p><u>Precautions:</u></p> <ul style="list-style-type: none"> • Hyperthermia • Psychosis • Urinary retention • Use with caution in patients w/myocardial ischemia, heart failure, tachyarrhythmia's and/or HTN • PREGNANCY RISK FACTOR: B/C (manufacturer specific) <p><u>Dosage:</u></p> <ol style="list-style-type: none"> I. <u>Premedication for RSI:</u> <ol style="list-style-type: none"> a. Pediatric: (29 days of age to 1 year old): <ol style="list-style-type: none"> i. IV/IO: 0.02 mg/kg , minimum dose 0.1mg, maximum dose 0.5mg II. <u>Organophosphate Poisoning:</u> <ol style="list-style-type: none"> a. Adult: <ol style="list-style-type: none"> i. IV/IO/IM: 1-2 mg, slow IV push every 3-5 minutes up to 40 mg or until symptoms reverse b. Pediatric: <ol style="list-style-type: none"> i. IV/IO/IM: 0.05-0.1 mg/kg initially <ol style="list-style-type: none"> 1. Repeat every 5-10 min, doubling the dose if need; titrating to pulmonary status (decreased broncho-secretions) <p><u>Onset of Action:</u> IM: 15-30 mins; IV: immediate</p> <p><u>Duration:</u> <4 hours</p> <p><u>Adverse Effects:</u> Cardiac arrhythmia or arrest, ECG changes, CNS changes including agitation, amnesia, anxiety, ataxia, lethargy, delirium, dizziness, etc., visual changes including blurred vision, blindness, abnormal eye movements, respiratory depression, pulmonary edema, tachypnea, inspiratory stridor, laryngospasm, muscle twitching, weakness, electrolyte imbalances</p> <p><u>Special Considerations:</u></p> <ol style="list-style-type: none"> I. Anticholinergic agents are generally not well tolerated in the elderly and their use should be avoided when possible II. Administer undiluted by rapid IV injection; slow injection may result in paradoxical bradycardia

If this is a patient care policy, the information contained herein is used to provide guidance in the care of patients, but should not, and does not replace or preclude the use of clinical judgment.

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