

Amiodarone

McHenry Western Lake County
EMS



Objectives

- During this session we will discuss:
- Class
- Actions
- Indications
- Contraindications
- Dosing/Routes
- How supplied
- Precautions
- Side effects



Class:

- Antidysrhythmic



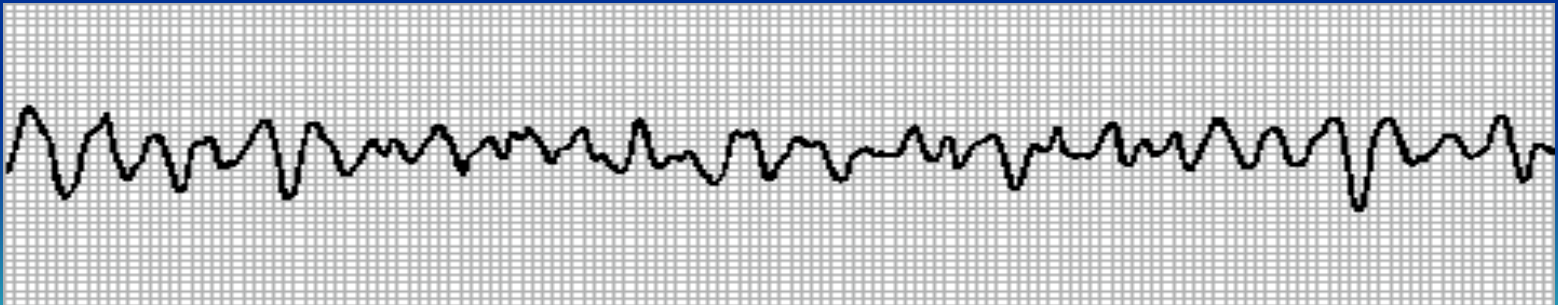
Actions:

- Class III antidysrhythmic: (potassium channel blockers) has a property of all 4 VW classes. Lengthens cardiac action potential; slows AV conduction; prolongs QT intervals, blocks Sodium, Potassium, and Calcium channels, and alpha and beta receptors.
- Has a negative chronotropic and dromotropic effects. (chronotropic = relates to the heart)
(dromotropic = relates to conduction)
- Vasodilates = decreases cardiac workload and myocardial O₂ consumption



Indications:

- Ventricular Tachycardia and Ventricular Fibrillation.



Dosing/Routes:

- Adult VT: 150 mg mixed with 50 ml of NS IVP over 10 minutes.
- Adult VF: 300 mg IVP/IO. 2nd dose 150 mg IVP/IO
- Onset is 1-30 minutes and duration is 1-3 hours.
- Peds VT: 5mg/kg (max 150mg) mixed with NS (to total volume of 20 ml) slow IV/IO over 20 minutes.
- Peds VT: 5 mg/kg IVP: Max single dose of 300mg

How supplied:

- 150mg in 10ml



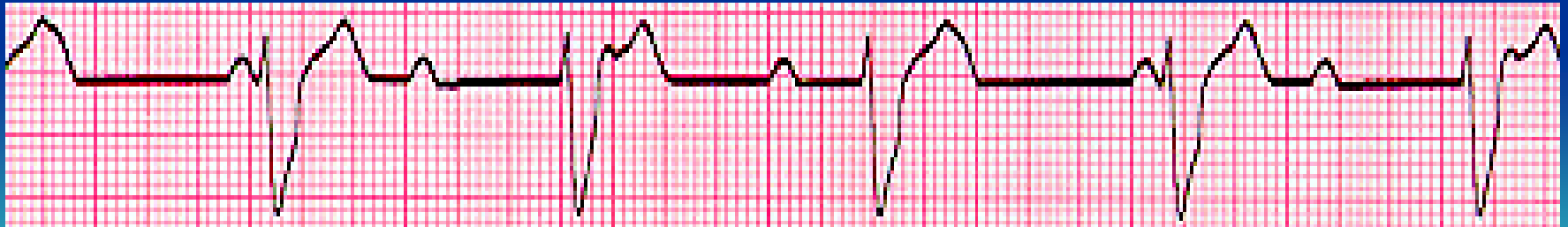
Important!

- Hold ampule at a slight angle, insert needle into deepest level of ampule to withdraw the solution. Do not use filter needle or invert ampule to withdraw solution.



Contraindications:

- Known allergies
- Allergy, severe bradycardia, 2^o or 3^o AV blocks, Torsades de Pointes.
- Stop if QRS widens to >50% of baseline.
- Breast feeding



Precautions:

- Incompatible with Sodium Bicarbonate.
- Use with caution in patients with liver failure.
- VT: If B/P falls slow the rate of administration
- VF: Post resuscitation, if B/P falls treat with fluids and or Dopamine.
- May prolong QT interval-don't use for Torsades.



Side effects/adverse reactions:

- Monitor BP and ECG when given to patient w/ perfusing rhythm.
- CNS: Headache and dizziness
- GI: Nausea (4%)
- CV: Hypotension (16%) Bradycardia (5%), sinus arrest, CHF, dysrhythmias

DO NOT SHAKE!!
Bubbles will form in the vial



Case Study

- You have been called to the scene of a Man Down. CPR has been started and Defibrillation has been performed. You and your crew are continuing CPR. What would be the correct dose of Amiodarone that would give your patient.



Answer:

- 300 mg IVP/IO.

- You have decided to give a second dose of Amiodarone. What would be the correct dose for this administration.



- 2nd dose of Amiodarone would be 150 mg IVP/IO.

