AMIODARONE

1.0 Classification
   • Class III anti-arrhythmic

2.0 Mechanism of Action
   • Suppresses automaticity, reduces speed of conduction, and increases AV node refractory period.

3.0 Indications
   • VF/VT cardiac arrest unresponsive to CPR, defibrillation and epinephrine
   • VT with a pulse
   • Runs of VT post cardiac arrest

4.0 Contraindications
   • Known hypersensitivity
   • Bradycardia (HR less than 60)
   • Idioventricular rhythm
   • 2° or 3° heart blocks

5.0 Precautions
   • Rapid infusion may lead to hypotension.
   • Amiodarone should not be administered with other drugs that prolong the QT interval (e.g. lidocaine or procainamide).
   • Caution should be used in treating patients with amiodarone who have known hyperkalemia or prolonged QT syndrome. Contact OLMC first prior to administration if time allows.

6.0 Route
   • May be given IV/IO

7.0 Dosage

   Adult
   VF/VT Cardiac Arrest
   • 300 mg IV push then 150 mg after 10 minutes if required.

   VT with a pulse/runs of VT post cardiac arrest
   • 150 mg IV over 10 minutes (15mg/min), repeated q 10 minutes as required.

   Pediatric
   VF/VT Cardiac Arrest
   • 5 mg/kg IV push (maximum dose 300 mg), repeated after 10 minutes if required.

   VT with a pulse/runs of VT post cardiac arrest
   • 5 mg/kg IV over 20 minutes (maximum dose 300 mg), repeated q 10 minutes as required (maximum total dose of 15 mg/kg).

8.0 Supplied
• 3 mL or 6 mL vials of 50 mg/mL

9.0 May Be Given By
• ACP/CCP

10.0 Adverse Effects
• Dyspnea
• Bradycardia
• Hypotension
• Arrhythmia
• Prolonged QT interval

11.0 Special Notes
• Pregnancy category D [potential benefits may warrant use of the drug in pregnant women despite potential risks (e.g. if it is required in a life-threatening situation)]

12.0 References
• Out-of-Hospital Cardiac Arrest Clinical Practice Guideline
• Adult Arrhythmia Clinical Practice Guideline
• Compendium of Pharmaceuticals and Specialties (CPS)

*Electronically Signed
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