

Medication: Salbutamol	PDN: 6975.02	Last Updated: May 9, 2013	PMD: Andrew Travers*	PDC: Steven Carrigan*	Page 1 of 2
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SALBUTAMOL (Ventolin)

1.0 Classification

- B₂ agonist

2.0 Mechanism of Action

- Beta₂ stimulation (and slight Beta₁ stimulation) causing bronchodilation

3.0 Indications

- Shortness of breath with signs of bronchospasm (e.g. wheezes)

4.0 Contraindications

- Accompanying chest pain of possibly ischemic origin
- Allergy to salbutamol

5.0 Precautions

- Should be given with caution to patients with cardiovascular disease or hypertension

6.0 Routes

- May be given by MDI or nebulizer
- Can be provided through CPAP or BVM via MDI using the MDI adapter

7.0 Dosage

Adult (greater than 30 kg or 66 lbs)

- 5.0 mg nebulized OR 4-6 puffs with MDI as needed

Pediatric (10-30 kg / 22-66 lbs)

- 2.5 mg nebulized OR 2 - 3 puffs with MDI as needed

Infant (less than 10 kg / 22 lbs)

- 1.25 mg nebulized as needed

8.0 Supplied

- Metered Dose Inhaler (each puff = 90-100 mcg of salbutamol)
- 5.0 mg/2.5 mL polyamps

9.0 May Be Given By

- PCP/ICP/ACP/CCP

10.0 Adverse Effects

- Tachycardia, palpitations
- Arrhythmia
- Hypertension
- Tremor
- Headache
- Muscle cramps

12.0 Special Notes

- Salbutamol works to reduce bronchoconstriction in the lower airways; it is not indicated for patients with stridor, which is a sign of upper airway pathology
- When a patient has severe shortness of breath with wheezing, there is no maximum dose of salbutamol
- 1 nebuler (5 mg) provides the same amount of drug as 6 puffs from the MDI
- Pregnancy category C [if the patient will benefit from a Category C drug, it is generally used]

13.0 References

- Adult Respiratory Distress Clinical Practice Guideline
- Compendium of Pharmaceuticals and Specialties (CPS)

*Electronically Signed

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