

Memorial Regional Medical Center

Adult IV Push List -- THIS LIST IS NOT ALL INCLUSIVE									
Drug	RN	LPN	Med/Surg	Telemetry	PCU/PSU	Critical Care/ED/PACU	Usual dose	Rate of Administration	Monitoring Parameters
Acetazolamide (Diamox)	Y	Y	Y	Y	Y	Y	200 mg.-500 mg.	Reconstitute w/5ml sterile water.	Obtain documented ABG, assess for allergy to sulfonamides, observe for signs of hypokalemia (muscle weakness, malaise, fatigue, EKG changes, vomiting).
Adenosine (Adenocard)	Y	N	N	ambu/lifepac in room	Y	Y	6 mg.,12mg.,12 mg.	Sequenced in a rapid bolus in seconds. Flush line with NS.	Rhythm changes, frequent vital signs
Alteplase (TPA)	Y	N	N	N	N	Y	Over 65 kg: 100 mg over 3 hours.	Bolus followed by infusion, reconstitute w/diluent provided by manufacturer . Weight determined. Pharmacy directed.	Bleeding, change in LOC, atrial or ventricular arrhythmias.
Atropine	Y	N	N	Y	Y	Y	0.5mg-1.0 mg.	0.4-0.6 mg/min. Rapid push.	Heart rate, BP, bradycardia.
Bumetanide (Bumex)	Y	Y	Y	Y	Y	Y	0.5-1.0 mg.	0.5-1.0 mg over 1-2 mins.	Fluid/electrolyte balance.
Butorphanol (Stadol)	Y	Y	Y	Y	Y	Y	0.5-2 mg.	Over 2-3 min - Narcan on unit.	BP and respirations.
Calcium chloride	Y	N	Code Only	Code Only	Code Only	Y	1 amp. or as specified by MD.	During codes only: rapid push :Do not give if on digoxin.	Heart rate, blood pressure, arrhythmia's.
Calcium gluconate	Y	N	Code Only	Code Only	Code Only	Y	1-10 ml. vial or as specified by MD.	During codes only: rapid push: Do not give if on digoxin.	Heart rate, blood pressure, arrhythmia's.
Dantrolene (Dantrium)	Y	N	N	N	N	Y	1 mg. per kg.	Rapid push - Acute management malignant hyperthermia crisis only.	Temperature, confusion, tachycardia, urine retention.
Dexamethasone (Decadron)	Y	Y	Y	Y	Y	Y	4-10 mg.	Give over 30 seconds.	Fluid overload.
Dextrose 50%	Y	Y	Y	Y	Y	Y	0.5-1 amp	Give 12.5 mg./min. Do not give > 50 ml/2 min	Document blood glucose. Patient may complain of burning if given through a smaller vein.
Diazepam (Valium), (Sedation)	Y	N	N	N	Competency required	Competency required	1-5 mg./min.	2-5 mg/min	Respirations and BP.
Diazepam (Seizure/Anxiety)	Y	N	Y	Y	Y	Y	1-5 mg/min.	5 mg/min- May give up to 10 mg. for seizures in 5 min.	Respirations and BP.
Digoxin	Y	Y	Y	Y	Y	Y	0.25 mg.	Dilute in 10 ml. of NS and push slowly over 2-5 minutes depending on the dosage.	Document apical pulse, hold for HR<60 & notify MD, check dig. Level, yellow vision, vomiting.
Diltiazem (Cardizem)	Y	N	N	Y	Y	Y	10 mg. loading	Over 2 min.	Must be on cardiac monitor, BP, HR.
Diphenhydramine (Benadryl)	Y	Y	Y	Y	Y	Y	12.5-25 mg.	25 mg/min - large doses may result in sedation.	O ₂ sat, respiratory depression.
Droperidol (Inapsine)	Y	Y	Y	Y	Y	Y	0.5-1.0 mg.	1-5 mg over 1-2 min.	Respirations, sedation, BP, EPS (extrapyramidal symptoms), monitor for prolonged QT in cardiac patients.
Enalaprilat (Vasotec)	Y	N	N	Y	Y	Y	1.25 mg.	Up to 1.25 mg over at least 5 min, or slow IV infusion in 50ml NS or D5W	Document BP, peak effect may not be seen until 4hrs after dose
Ephedrine	Y	N	Y	Y	Y	Y	12.5-25 mg.	Over 3-5 min	Mainly blood pressure.
Epinephrine	Y	N	Code Only	Code only	Code Only	Y	0.5-1.0 mg.	1 mg/min up to 3 mg	Inactivated by sodium bicarbonate.
Epoetin alfa (Epoen)	Y	N	Dialysis nurse only	Dialysis nurse only	Y	Y	2,000-4,000 units.	IV bolus, DO NOT SHAKE VIAL . Dosed by weight.	BP, hematocrit, seizures (rare).
Esmolol (Brevibloc)	Y	N	N	Ambu/lifepac in room	Ambu/lifepac in room	Y	500 mcg/kg.	Up to 500 mcg/kg over 1 min.	BP and HR.
Famotidine (Pepcid)	Y	Y	Y	Y	Y	Y	20 mg.	Over minimum 2 min -- DILUTE w/5-10 ml NS.	Rapid admission may cause hypotension, decrease doses in renal impaired-renal disease patients.
Fentanyl--pain control	Y	N	Y	N	N	Y	1-2 mcg./kg.	Max dose of 2 mcg/kg--w/narcan available.	O ₂ sat, VS, respirations.
Fentanyl--sedation/analgesia	Y	N	N	N	Competency required	Competency required	1-2 mcg./kg.	With narcan available.	O ₂ sat, VS and respirations q15 min.
Flumazenil (Romazicon)	Y	N	Y	Y	Y	Y	1 amp.	Over 15-30 sec.	Document response.
Fosphenytoin (Cerebyx)	Y	N	Y	Y	Y	Y	150 mg./min.	Dilute to 25 mg/ml w/NS.	BP, respirations.

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Furosemide (Lasix)	Y	Y	Y	Y	Y	Y	20-100 mg.	<100mg over 1-2 min. If dose >100 mg give 4mg/min.	Hearing loss can occur if pushed too rapidly.
Glucagon	Y	Y	Y	Y	Y	Y	1 mg.-3 mg.	1 amp rapid-flush line w/sterile water before & after dosing.	Blood glucose monitoring.
Haloperidol (Haldol)	Y	Y	Y	Y	Y	Y	0.5-1.0 mg.	Over 1-2 min.	BP, HR, sedation levels, EPS (extrapyramidal symptoms).
Heparin	Y	Y	Competency required	Competency required	Competency required	Competency required	10,000 units/ loading or per MD.	Rapid push - protamine on unit . Usual dose is 60-80 units/kg.	Bleeding, 2 nurse check.
Hydromorphone (Dilaudid)	Y	N	Y	Y	Y	Y	0.5-1.0 mg.	Slowly over 2-3 min, with narcan available on unit.	BP, respirations, sedation level.
Insulin (Regular)	Y	N	Y	Y	Y	Y	As ordered by protocol/ MD.	Regular insulin only - rapid push.	Document serum glucose, 2 nurse check, frequent accucheck glucose monitoring.
Ketorolac (Toradol)	Y	Y	Y	Y	Y	Y	15-30 mg.	15-30 mg over minimum of 15 seconds.	Bleeding, call MD, BUN↑, Creatinine↑. Do not give in patients with history of GERD.
Labetolol (Normodyne)	Y	N	N	Y	Y	Y	20 mg. initial dose	Max. 300 mg over 2 min, must be in supine position x3 hrs after administration.	BP every 5 min x30 min then every 30 min x2 hrs then every 1hr x6 hrs
Levothyroxine (Synthroid)	Y	Y	Y	Y	Y	Y	50-100 mcg.	Rapid push, reconstitute w/5 ml NS.	Document serum thyroid level.
Lidocaine	Y	N	N	Y	Y	Y	50-100 mg.	Loading dose 1 mg/kg every 8-10 min .	Must be on cardiac monitor , BP, HR.
Lorazepam (Ativan)--seizure/DT/anxiety	Y	Y	Y	Y	Y	Y	0.5-1.0 mg.	2 mg/min - Romazicon available on unit.	BP and respirations.. Document seizure activity.
Lorazepam (Ativan)--sedation/analgesia	Y	N	N	N	N	Competency required	0.5-1.0 mg.	2mg/min - Romazicon available on unit.	BP and respirations. Document sedation level.
Mannitol	Y	Y	Y	Y	Y	Y	12.5 grams	12.5 grams over 3-5 min up to 100 grams. USE FILTER	Check for crystals before administration.
Meperidine (Demerol)	Y	Y	Y	Y	Y	Y	25-50 mg.	25-50mg over 2-3 min, with narcan available on unit.	BP and respirations.
Methylprednisolone	Y	Y	Y	Y	Y	Y	10-20 mg.	20 mg/min, life threatening 80 mg/min.	Blood glucose in diabetic patients.
Metoclopramide (Reglan)	Y	Y	Y	Y	Y	Y	10 mg.	Max 10 mg over 1-2 min.	Closely monitor BP.
Metoprolol (Lopressor)	Y	N	N	Y	Y	Y	1-5 mg.	5 mg bolus at 2 min intervals for MI, non-MI infuse over 1-2 min.	Hold for HR <60 & notify MD, Document BP
Midazolam (Versed)	Y	N	N	N	Competency required	Competency required	1-2 mg.	Over at least 2 min, with romazicon available on unit.	BP and respirations.
Morphine	Y	Y	Y	Y	Y	Y	2-5 mg.	Over 4-5 min, with narcan available on unit.	BP and respirations.
Naibuphine (Nubain)	Y	Y	Y	Y	Y	Y	2-5 mg.	Over 2-3 min, with narcan available on unit.	BP and respirations.
Naloxone (Narcan)	Y	N	Y	Y	Y	Y	1 amp.	0.1-2 mg rapid push	Acute withdrawal symptoms can occur.
Ondansetron (Zofran)	Y	Y	Y	Y	Y	Y	2-4 mg.	4 mg over 2-5 min	HR and BP. Report any rash or diarrhea.
Pancuronium (Pavulon)	Y	N	N	N	N	Y	As ordered	Up to 0.1 mg/kg	BP, pulse ox, MUST BE INTUBATED , continuous pt. monitoring.
Phenytoin (Dilantin)	Y	N	Y	Y	Y	Y	150-250 mg.	Max 50 mg/min -- flush line w/saline before and after dose.	Inject into large vein, (avoid wrist, hand, foot veins).
Prochlorperazine (Compazine)	Y	Y	Y	Y	Y	Y	5.0 mg.	5 mg/min	BP, sedation, and EPS.
Promethazine (Phenergan)	Y	Y	Y	Y	Y	Y	25 mg.	25 mg/min	Assure venous access before giving, drowsiness (document LOC).
Propranolol (Inderal)	Y	N	N	Y	Y	Y	1.0 mg.	1 mg/min up to 3 mg.	BP and HR, Hold for HR< 60 & notify MD.
Sodium Bicarbonate	Y	Y	Y	Y	Y	Y	1 amp	Flush line w/saline before and after dose.	Monitor blood gases, serum ph, and electrolyte levels, and HR (bradycardia).
Succinylcholine	Y	N	N	N	N	Y	20 mg.	Up to 1.1 mg/kg over 10-30 seconds.	BP, pulse ox, MUST BE INTUBATED , continuous pt. monitoring
Tenecteplase (TNKase)	Y	N	N	N	N	Y	As ordered	Bolus over 5 seconds. Reconstitute w/10 ml sterile water - flush line w/saline before and after dose.	Bleeding, change in LOC, arrhythmias
Vercuronium	Y	N	N	N	N	Y	Per anesthesia	0.1-0.2 mg/kg, dilute to 1mg/ml w/sterile water.	BP, pulse ox, MUST BE INTUBATED , continuous pt. monitoring.