

	EMT-I Drugs	Type of Drug	Route + Dosage
Cardiac Stimulator/Vasoconstrictor	Epinephrine 1:10,000 Sympathetic nervous system drug	- Bronchodilator non-specific adrenergic agonist - Vasopressor	IV -1:10,000 Cardiac Arrest: 1mg q 3-5 min Bradycardia: 2-10 mcg/min
	Vasopressin Drug that maintains mineral + fluid balance	Pituitary hormone (Antidiuretic hormone: <i>drug used to reduce the formation of urine => conserve fluid</i>)	IV / IO 40 units one time only, after 10 min if no response, epi 1 mg q 3-5 min
Cardiac Antiarrhythmic	Atropine Atropine Sulfate Anti-cholinergic (=> speed thing up)	- Antidysrhythmic, - Anticholinergic (parasympatholytic)	IV / IO Asystole/PEA: 1mg q 3-5 min max 3 mg Bradycardia: 0.5-1mg q 3-5 min max 3 mg Poisoning: 1-2 mg q 5-60 min
	Amiodarone Sympathetic nervous system drug	Antidysrhythmic	IV / IO Cardiac Arrest: 300 mg IV bolus, repeat 150 mg in 3-5 min If converted: 1 mg/min drip Tachycardia: 150 mg drip over 10 min, repeat 10 min prn
	Lidocaine 2% / 20% Affects action potential	Antidysrhythmic	IV / IO Pulseless V-tack/V-fib: 1-1.5 mg/kg q 5-8 min, max 3 mg/kg V-tach w/pulse/PVC's: : 1-1.5 mg/kg q 5-8 min, max 3 mg/kg [If pt. > 70 w/CHF or hepatic failure, ↓ 2 nd dose to ¼ of 1 st dose] Post conversion: 1-4 mg/min drip
Vasodilator	Nitroglycerine Affects calcium, phosphorus, and the completion of the action potential	- Coronary vasodilator - Antianginal	SL: 0.4 q 5 min max 3 does Ointment: ½ - 1 ½ inches on skin IV / IO: 5 mcg titrated q 5 min
Antihistamine	Benadryl Diphenhydramine Antihistamine, H ₁ and H ₂ blocker	Antihistamine	IV / IO 10-50 mg
Diuretic	Lasix Furosemide Maintains mineral and fluid balance	Loop diuretic (<i>increases the amount of urine passed=>body loses water and salt</i>)	IV / IO 20-80 mg (40 mg in Oregon)
Antidote	Activated Charcoal Drug works at the intestinal lumen.	- Antidote - Adsorbant	PO / NG Adult/Child 30-100g or 1g/kg
	Narcan Naloxone	- Antidote - Opioid antagonist (<i>blocks opioid receptors</i>)	IV / IO / SQ / IM / IN 0.4-2mg q 2-3 min
Analgesic	Aspirin Acetylsalicylic acid NSAID	- Non-opioid analgesic - Non-steroidal anti-inflammatory (NSAID) - Antipyretic (<i>to reduce fever</i>) - Antiplatelet	PO MI / Angina: 81-625 mg/day
	Toradol Ketalorec NSAID	- Non-opioid analgesic - Non-steroidal anti-inflammatory (NSAID) - Antipyretic (<i>to reduce fever</i>)	IM (single dose): 30-60 mg IV / IO (single dose): 15-30 mg IV / IO: 15 mg q 6 hours – max dose 60 mg
	Nubain Nalbuphine HCl	Synthetic opioid agonist + antagonist	IV / IO / SQ / IM 5-20 mg q 3-6 hours, max dose 160 mg/day
	Morphine Morphine sulfate Controlled substance, schedule II	Opioid analgesic	IV / IO / SQ / IM 2-10 mg, titrated to relief
Bronchodilator	Epinephrine 1:1,000 Sympathetic nervous system drug	- Bronchodilator non-specific adrenergic agonist - Vasopressor	SQ / IM Adult 0.1-0.5 mg q 10-15 min, max 1 mg
	Atrovent Ipratropium	- Parasympatholytic (<i>Like Atropine</i>) - Bronchodilator	NEBULAZED 0.5 mg in 2.5 mL saline
	Albuterol Proventil / Ventolin	- Adrenergic β ₂ agonist (<i>it causes bronchodilation</i>) - Bronchodilator - Sympathomimetic	NEBULAZED Inhaler 2.5 mg, may repeat q 15-20 min
	Combi-vent Ipratropium bromide 18 mcg Albuterol 103 mcg/actuation	Bronchodilator	NEBULAZED Ipratropium (Atrovent) 18 mcg Albuterol 103 mcg in 3 mL saline
Antihypoglycemic	Glucagon Treats disorders of the Islets of Langerhans	- Hormone - Antihypoglycemic	IM / SQ / Slow IV 1 mg, repeat in 20 min as needed
	D50 50% Dextrose Treats disorders of the Islets of Langerhans	- Caloric - Antihypoglycemic	IV / IO 25 g slow IV push Repeat 25 g IVP is needed
	Oral Glucose Glucose	- Caloric - Antihypoglycemic	Oral 10 g q 10 min, max dose 30 g

Agonist: drug that interact w/receptor to **stimulate a response**.

- **Epinephrine:** non-specific adrenergic agonist, interact w/Alpha 1 & Beta 1 & 2 receptors
- **Albuterol:** adrenergic Beta 2 agonist
- **Morphine:** depresses pain impulses transmission by interacting w/opioids receptors
- **Fentanyl:** depresses pain impulses transmission by interacting w/opioids receptors

ANTAGONIST: drug that interact w/receptor to **prevent a response**

- **Narcan:** opioid antagonist that competes w/opioids at opioids receptor sites
- **Benadryl:** competes w/histamine for H1 and H2 receptor sites
- **Atropine:** blocks acetylcholine at postganglionic receptor sites
- **Atrovent:** inhibits interaction of acetylcholine at receptor sites
- **Amiodarone:** non competitive Alpha and Beta adrenergic blocker

Partial agonist: drugs that interact w/receptor to **stimulate** a response **but inhibit** other responses.

- **Nubain:** synthetic opioid agonist + antagonist. Depresses pain impulse transmission by interacting w/opioid receptors. It has antagonist effects similar to those of Narcan.

Anticholinergic = Parasympatholytics

Atropine
Atrovent

Sympathetic

Epinephrine

Sympathomimetic

Albuterol

Sympatholytic

Amiodarone

BRONCHODILATORS

- Epinephrine 1:1,000
- Atrovent
- Albuterol
- Combi-vent

ANALGESICS

NSAID:

- Aspirin
- Toradol

Opioids: (for respiratory depression induced by opioids use Narcan)

- Nubain (synthetic opioid)
- Morphine (opioid analgesic)
- Fentanyl (very potent opioid analgesic)

CARDIAC

Cardiac stimulator / Vasoconstrictor:

- Epinephrine 1:10,000
- Vasopressin

Antiarrhythmics:

- Atropine
- Amiodarone
- Lidocaine

ANTIHYPOGLYCEMIC

- Glucagon (hormone)
- D50 (caloric)
- Oral glucose (caloric)

ANTIDOTES

Activated Charcoal
Narcan

Diuretic

Lasix

Antidiuretic

Vasopressin

Vasodilator

Nitroglycerine

Antihistamine

Benadryl