

**MIDAZOLAM /VERSED®**

4/14/2020

[PARAMEDIC]

<b>ACTIONS</b>	CNS depressant with amnesic effect.
<b>INDICATIONS</b>	<ol style="list-style-type: none"><li>1. Active seizure activity, status epilepticus.</li><li>2. For amnesic effect during uncomfortable external pacing.</li><li>3. Sedation of an awake patient prior to cardioversion.</li><li>4. Sedation after Rapid Sequence Intubation (RSI).</li><li>5. Chemical restraint of combative patient.</li><li>6. Acute alcohol withdrawal</li><li>7. Severe pain associated with isolated orthopedic injury give with analgesic.</li><li>8. Agitated patients undergoing noninvasive ventilatory support, i.e. nebulizer mask or CPAP</li></ol>
<b>PRECAUTIONS</b>	<ol style="list-style-type: none"><li>1. Can cause marked respiratory depression.</li><li>2. Use with caution in patients who have ingested alcohol or other depressant medications.</li><li>3. Use with caution in patients that are hypotensive.</li></ol>
<b>SIDE EFFECTS</b>	<ol style="list-style-type: none"><li>1. Respiratory depression.</li><li>2. Fluctuations in vital signs, nausea, vomiting, ventricular ectopy, arrhythmias, and bronchospasm.</li><li>3. Excitement or stimulation may occur and may be manifested as agitation, involuntary movements, hyperactivity or combativeness.</li></ol>
<b>ADULT</b>	<p><b>Generalized Seizures/Status Seizures:</b> 2 mg IV/IO/IN or 4 mg IM</p> <ul style="list-style-type: none"><li>• Repeat 2 mg. IV/IO/IN after 2 min as needed x 1</li><li>• Additional doses if seizure activity continues. <b>MD order</b></li></ul> <p><b>Sedation for Cardioversion or Pacing:</b> 2 mg IV/IO/IN or 4 mg IM</p> <ul style="list-style-type: none"><li>• Repeat 2 mg. IV/IO/IN after 2 min as needed x 1</li><li>• Additional doses if needed. <b>MD order</b></li></ul> <p><b>Post RSI Sedation:</b> 0.1 mg/kg IV/IO to a Max dose of 6 mg.</p> <p><b>Agitated with no perceived threat:</b> 2 mg IV/IO/IN or 4 mg IM</p> <ul style="list-style-type: none"><li>• Repeat after 10 minutes as needed x 1.</li></ul>

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## Physical Restraint/Chemical Sedation:

Threat to self or others (2<sup>nd</sup> line after ketamine as needed) by MD Order:

2 mg IV/IO/IN/IM

Repeat after 5 minutes as needed x 1

## Severe Pain Management:

Used in isolated orthopedic injuries with analgesic

0.5 -1 mg IV/IN/IM may repeat every 5 min as needed up to 2 mg total dose.



## Acute Alcohol Withdrawal:

2 mg IV/IN/IM depending on severity of symptoms

- Additional doses by **MD order**



**Agitated/Claustrophobic patients undergoing noninvasive ventilatory support: (I.E nebulizer mask, CPAP)**

0.5-1 mg IV/IN/IM may repeat in 5 min as needed up to 1mg total dose.

- Additional doses by **MD order**

## PEDIATRIC



## Generalized Seizures/Status Seizures:

0.1 mg/kg up to 2 mg IV/IO/IM

- Repeat in 1 min for continued seizure activity.
- Additional doses if seizure activity continues. **MD order**

## Post RSI Sedation:

0.1 mg/kg up to 2 mg IV/IO

## KEY POINTS

1. Dosage should be reduced in elderly or debilitated patients.
2. Most likely to produce respiratory depression in elderly or young patients and in patients who have taken other depressant drugs, especially alcohol and barbiturates.
  - Midazolam can mask signs of impending respiratory failure, pts need careful monitoring.
3. Once a patient is in the process of being chemically sedated, the medics must continually monitor the patient for respiratory depression. Pulse oximeter and ETCO<sub>2</sub> monitoring should be done along with vitals, including level of consciousness every 5 minutes.
4. Intra-nasal dosing of medication 0is not recommended for pediatric patient due to the concentration that is carried.