

# CRITICAL CARE INTRAVENOUS MEDICATIONS CHART

DRUG NAME	ONSET	CONCENTRATION	UNIT OF MEASUREMENT	DRUG CLASS	HOW TO TITRATE
Amiodarone	Non-specific	450mg / 250ml <b>D5W only</b> <b>Can not mix in NS</b>	Continuous Infusion - $\mu\text{g}/\text{min}$ Common dose: 1mg / min for 6 hrs, then 0.5 mg /min infusion	Antiarrhythmic	
Bumex (Bumetanide)	2-3 min	10mg / 100ml NS <b>Can Mix in D5W</b>	IV Bolus Dose - $\text{mg}/\text{hr}$ Dose: 0.5 – 1 mg slow IV/P over 1-2 min or Continuous Infusion - $\text{mg}/\text{hour}$ Usual Dose: 1 mg/hr or (MD preference)	Loop Diuretic	Dose ordered per MD based on UOP or PCWP
Cardiaram (Diltiazem)	minutes	100mg / 100 ml <b>Can mix in NS and D5W</b>	Continuous Infusion - $\text{mg}/\text{hour}$ Dose: 5 – 15 $\text{mg}/\text{hr}$ Titrate 5 $\text{mg}/\text{hr}$ increments to desired effect	Ca Channel Blocker	Increase rate 5 $\text{mg}/\text{hr}$ Q 15 min to desired Heart Rate
Cardene (Nicardipine)	10 min	20mg / 200ml 40mg / 200ml <b>Can mix in NS and D5W</b>	Continuous Infusion - $\text{mg}/\text{hour}$ Dose: 2.5 – 15 $\text{mg}/\text{hour}$ Titrate 2.5 $\text{mg}/\text{hr}$ increments Q 15 min <b>Rotate IV infusion site Q 12 hr if given in periph. IV. If disabled need Central Line</b>	Ca Channel Blocker	Start @ 3 $\text{mg}/\text{hr}$ then/increase rate 2.5 $\text{mg}/\text{hr}$ Q 15 min, attempt to decrease to 3 $\text{mg}/\text{hr}$ once BP controlled
Chloracurium (Nimbex)	2-3 min	200mg / 200ml NS <b>Can mix in D5W</b>	Continuous Infusion - $\text{mcg}/\text{kg}/\text{min}$ May give IV loading dose: 0.1 $\text{mcg}/\text{kg}$ Usual Range: 1 – 10 $\text{mcg}/\text{kg}/\text{min}$ Titrate 2 $\text{mcg}/\text{kg}/\text{min}$ increments	Neuromuscular Blockade (Paralytic)	Titrate to 2 – 4 twitches on Peripheral Nerve Stimulator (TOW) or per MD orders.
Corlopam (Fenoldopam)	10 min	20mg/500ml <b>Can mix in NS and D5W</b>	Continuous Infusion - $\text{mcg}/\text{kg}/\text{min}$ Dose: Initial 0.1 $\text{mcg}/\text{kg}/\text{min}$ Avg. rate = 0.25 – 0.5 $\text{mcg}/\text{kg}/\text{min}$	Vasodilator	Titrate 0.05 – 0.1 $\text{mcg}/\text{kg}/\text{min}$ increments Q15 until target BP
Dexmedetomidine (Precedex)	1 min	200mcg / 50ml <b>Can mix in NS and D5W</b>	Loading dose = 1mcg / kg over 10 minutes Continuous Infusion - $\text{mcg}/\text{kg}/\text{hr}$ Avg rate = 0.2 – 0.7 $\text{mcg}/\text{kg}/\text{hr}$	Sedative (Alpha2 – Adrenergic Agonist)	Titrate 0.1 $\text{mcg}/\text{kg}/\text{hr}$ Q10min Increments to desired level of Sedation (Max dose = 1.5 $\text{mcg}/\text{kg}/\text{hr}$ )
Diprivan (Propofol)	seconds	1000mg / 100 ml vial 500mg / 50 ml vial <b>Pre-Mixed</b>	Continuous Infusion - $\text{mcg}/\text{kg}/\text{min}$ Dose: Usual range = 5-50 $\text{mcg}/\text{kg}/\text{min}$	Conscious Sedation	Increase 5 $\text{mcg}/\text{kg}/\text{min}$ Q 5 minutes based on sedation (BIS or RASS)
Dobutamine	1-10 min	500mg / 250ml (Standard) <b>Can mix in NS and D5W</b>	Continuous Infusion - $\text{mcg}/\text{kg}/\text{min}$ Dose: 2 – 20 $\text{mcg}/\text{kg}/\text{min}$	Vasopressor	Increase rate 1 – 4 $\text{mcg}/\text{kg}/\text{hr}$ Q 10 minutes
Dopamine	5 min	400mg / 250ml (Standard) <b>Can mix in NS and D5W</b>	Continuous Infusion - $\text{mcg}/\text{kg}/\text{min}$ Dose: 2 – 20 $\text{mcg}/\text{kg}/\text{min}$	Vasopressor	Increase rate 1 – 4 $\text{mcg}/\text{kg}/\text{hr}$ Q 10 minutes
Epinephrine	minutes	2mg / 250ml (Standard) <b>Can mix in NS and D5W</b>	Continuous Infusion $\text{mcg}/\text{kg}/\text{minute} = \text{OR} = \text{mg}/\text{min}$ Usual Range: 1 – 10 $\text{mcg}/\text{min}$ 0.05 – 1 $\text{mcg}/\text{kg}/\text{min}$	Vasopressor Cardiac Stimulant	Increase 0.01 $\text{mcg}/\text{kg}/\text{min}$ Q 15 minutes. Titrate to effect desired per MD
Brevibloc (Timolol)	2-10 min	2500 mg / 250 ml <b>Pre-Mixed</b>	Continuous Infusion - $\text{mcg}/\text{kg}/\text{min}$ Dose: Usual Range = 50-200 $\text{mcg}/\text{kg}/\text{min}$	Antiarrhythmic / Beta Blocker	Usual Titration: 50 $\text{mcg}/\text{kg}/\text{min}$ increments
Fentanyl	seconds	1mg / 100ml NS (Standard) <b>Can mix in D5W</b>	Continuous Infusion - $\text{mcg}/\text{hour}$ Usual Range: 50 – 300 $\text{mcg}/\text{hr}$ Titrate 25 $\text{mcg}/\text{hr}$ increments	Narcotic Analgesic	Increase rate 25 $\text{mcg}/\text{hr}$ based on pain control
Furosemide (Lasix)	5 min	100mg / 100 ml or 200 mg / 200 ml <b>Can mix in NS and D5W</b>	IV Bolus Dose - $\text{mg}$ Dose: 20 – 40 $\text{mg}$ slow IV/P over 1-2 min or Continuous Infusion - $\text{mg}/\text{hr}$ Usual Dose: 10 – 20 $\text{mg}/\text{hr}$ or (MD pref.)	Loop Diuretic	Dose ordered per MD based on UOP and/or PCWP

# Guide To Icu Drugs Table

**John M. O'Donnell, Flávio E. Nácul**



**Guide To Icu Drugs Table:**

## Whispering the Techniques of Language: An Emotional Quest through **Guide To Icu Drugs Table**

In a digitally-driven world where monitors reign great and instant interaction drowns out the subtleties of language, the profound secrets and mental nuances concealed within phrases frequently get unheard. However, nestled within the pages of **Guide To Icu Drugs Table** a fascinating fictional treasure pulsing with organic feelings, lies a fantastic journey waiting to be undertaken. Published by a talented wordsmith, that charming opus invites visitors on an introspective journey, softly unraveling the veiled truths and profound affect resonating within the very cloth of each word. Within the mental depths with this moving review, we will embark upon a genuine exploration of the book's core subjects, dissect its captivating writing fashion, and succumb to the strong resonance it evokes strong within the recesses of readers' hearts.

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