

SAMPLE _Emergency medications dosage chart _SAMPLE

This document is for informational purposes and may be used and/or modified according to site specific practices. All medications (required or optional) in the emergency kit shall be included in the dosage chart. **The Clinic Provider shall review and approve all contents in this document prior to adoption.**

*** Please confirm all dosages with the manufacturer for all medications administered on site***

Rx name	Adults	Pediatrics										
<p>Albuterol sulfate* Inhalation solution (0.0836% - 2.5 mg/ 3 ml)</p> <p>Inhalation aerosol metered dose (90 mcg/actuation)</p>	<p>2.5mg to 5mg every 20 minutes for 3 doses, then 2.5 mg to 10 mg every 1 to 4 hours PRN</p> <p>4 to 8 inhalations every 20 minutes for up to 4 hours, then 1 to 4 hours PRN</p>	<p>Children: 2.5 mg to 5 mg every 20 minutes for 3 doses, then 2.5 mg to 10 mg every 1 to 4 hours PRN.</p> <p>Infants & Neonates: 2.5 mg every 20 minutes for the first hour PRN; if there is rapid response, can change to every 3 to 4 hours PRN.</p> <p>Children: 2 to 10 inhalations every 20 minutes for 2 to 3 doses; if rapid response, can change to every 3 to 4 hours PRN.</p> <p>Infants & Neonates: 2 to 6 inhalations every 20 minutes for 2 to 3 doses; if there is rapid response, can change to every 3 to 4 hours PRN.</p>										
<p>Aspirin* Chewable tablet 81 mg (not enteric coated)</p> <p>Tablet 325 mg (not enteric coated)</p>	<p>For myocardial infarction (MI): Chew 2 to 4 tablets upon presentation or within 48 hours of stroke</p> <p>Chew ½ or 1 tablet upon presentation or within 48 hours of stroke</p>	<p>For myocardial infarction (MI): Chew 2 to 4 tablets upon presentation or within 48 hours of stroke. Not recommended for patients less than 18 years of age who are recovering from chickenpox or flu-like symptoms.</p> <p>Chew ½ or 1 tablet upon presentation or within 48 hours of stroke. Not recommended for patients less than 18 years of age who are recovering from chickenpox or flu-like symptoms.</p>										
<p>Diphenhydramine HCL Injection, USP (50 mg/ml)**</p> <p>Liquid (12.5 mg/5 ml)</p>	<p>10 mg to 50 mg IV/IM (not to exceed 400 mg/day) If IV route, IV push at a rate of ≤25 mg/min</p> <p>25 to 50 mg every 4 to 6 hours; max 300 mg/day</p>	<p>Children: 1 to 2 mg/kg/dose IV/IM (not to exceed 50 mg/dose). If IV route, IV push at a rate of ≤25 mg/min.</p> <p>Infants: 1 to 2 mg/kg/dose IV/IM (not to exceed 50 mg/dose).</p> <p>Neonates (≤ 4 weeks)/premature infants: NOT RECOMMENDED</p> <p>Children: weight in pounds</p> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <thead> <tr> <th style="padding: 2px;">lbs</th> <th style="padding: 2px;">20 to 24</th> <th style="padding: 2px;">25 to 37</th> <th style="padding: 2px;">38 to 49</th> <th style="padding: 2px;">50 to 99</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">ml</td> <td style="padding: 2px;">4</td> <td style="padding: 2px;">5</td> <td style="padding: 2px;">7.5</td> <td style="padding: 2px;">10</td> </tr> </tbody> </table> <p>DO NOT GIVE MORE THAN 4 DOSES IN 24 HOURS. Do not use with any other medicine with diphenhydramine in it.</p> <p>Under 2 years old: NOT RECOMMENDED</p>	lbs	20 to 24	25 to 37	38 to 49	50 to 99	ml	4	5	7.5	10
lbs	20 to 24	25 to 37	38 to 49	50 to 99								
ml	4	5	7.5	10								

Reviewed and approved by: _____

Date: _____

Print name and Title: _____

Rx name	Adults	Pediatrics										
<p>Diphenhydramine HCL (continued) Chewable Tablets (12.5 mg)</p> <p>Tablets (25 mg)</p>	<p>2 to 4 chewable tablets every 4 to 6 hours</p> <p>Take 25 to 50 mg by mouth</p>	<p>Children: weight in pounds</p> <table border="1" data-bbox="938 226 1523 296"> <thead> <tr> <th>lbs</th> <th>20 to 24</th> <th>25 to 37</th> <th>38 to 49</th> <th>50 to 99</th> </tr> </thead> <tbody> <tr> <td>tablet</td> <td>N/A</td> <td>1</td> <td>1 ½</td> <td>2</td> </tr> </tbody> </table> <p>DO NOT GIVE MORE THAN 4 DOSES IN 24 HOURS. Do not use with any other medicine with diphenhydramine in it. Under 2 years old: NOT RECOMMENDED</p> <p>NOT RECOMMENDED. Refer to parenteral route or oral solution.</p>	lbs	20 to 24	25 to 37	38 to 49	50 to 99	tablet	N/A	1	1 ½	2
lbs	20 to 24	25 to 37	38 to 49	50 to 99								
tablet	N/A	1	1 ½	2								
<p>Epinephrine Injection, 1:1,000 (1 mg/ml)**</p> <p>Injection, 1:10,000 (0.1 mg/ml)</p> <p>Auto-injector: Epipen (Epinephrine 0.3 mg) Epipen Jr (Epinephrine 0.15 mg)</p> <p>Auvi Q (Epinephrine 0.1 mg, 0.15 mg, 0.3 mg)</p>	<p>0.3 to 0.5 mg IM may repeat every 5 to 10 minutes</p> <p>0.1 to 0.25 mg IV (1 to 2.5 ml of 1:10,000 solution) injected slowly once.</p> <p>> 66 lbs: 0.3 mg/dose IM or subcutaneous into the anterolateral aspect of the thigh.</p> <p>> 66 lbs: 0.3mg IM or subcutaneous into anterolateral aspect of the thigh, through clothing if necessary.</p>	<p>0.01 mg/kg IM (up to maximum of 0.3 mg). May repeat every 5 to 10 minutes as needed.</p> <p>Infants: 0.05 mg IV slowly once, may repeat at 20 to 30 minute intervals as needed. Neonates (≤ 4 weeks): 0.01 mg/kg of body weight IV slowly once.</p> <p>33 to 66 lbs: 0.15 mg/dose IM or subcutaneous into the anterolateral aspect of the thigh. < 33 lbs: NOT RECOMMENDED</p> <p>33 to 66 lbs: 0.15mg IM or subcutaneous into anterolateral aspect of the thigh, through clothing if necessary. 16.5 - 33 lbs: 0.1mg IM or subcutaneous into anterolateral aspect of the thigh, through clothing if necessary.</p>										
<p>Glucagon/Glucose Injection** (emergency medication for low blood sugar) 1 mg (1 unit)</p> <p>Tablet</p>	<p>< 20 kg: 0.5 mg or 20 to 30 mcg/kg IM, IV or subcutaneous.</p> <p>> 20 kg: 1 mg IM, IV or subcutaneous.</p> <p>If the patient does not respond in 15 minutes, may give 1 to 2 more doses.</p> <p>15 gm (3 to 4 tablets) by mouth, may repeat in 15 minutes if hypoglycemic symptoms do not resolve.</p>	<p>< 20 kg: 0.5 mg or 20 to 30 mcg/kg IM, IV or subcutaneous</p> <p>> 20 kg: 1 mg IM, IV or subcutaneous (If the patient does not respond in 15 minutes, may give 1 to 2 more doses).</p> <p>Children: 10 to 20 gm (0.3 gm/kg) by mouth, may repeat in 15 minutes if hypoglycemic symptoms do not resolve. Infants & Neonates (≤ 4 weeks): NOT RECOMMENDED. Parenteral route recommended (IV dextrose or IM glucagon).</p>										
<p>Naloxone* Injection solution injection (0.4 or 1 mg/mL)</p> <p>Auto-injector (2 mg in 0.4 ml)</p>	<p>0.4 mg to 2 mg IV, IM, or subcutaneous up to a total dose of 10 mg, may repeat every 2 to 3 minutes PRN</p> <p>2 mg IM or subcutaneous into the anterolateral aspect of</p>	<p>0.01 mg/kg IV, IM or subcutaneous, may repeat dose every 2 to 3 minutes as needed</p>										

Reviewed and approved by: _____

Date: _____

Print Name and Title: _____

Rx name	Adults	Pediatrics
Naloxone* (continued) Nasal spray (4 mg/actuation)	the thigh, may repeat same dose after 2 to 3 minutes. Spray 4 mg into 1 nostril. If desired response is not achieved after 2 to 3 minutes, give a second dose intranasally into alternate nostril.	2 mg IM or subcutaneous into the anterolateral aspect of the thigh, may repeat same dose after 2 to 3 minutes. Spray 4 mg into 1 nostril. If desired response is not achieved after 2 to 3 minutes, give a second dose intranasally into alternate nostril.
Nitroglycerin* SL tablets (0.3 mg or 0.4 mg)	0.3 to 0.4 mg sublingually or in buccal pouch at onset, may repeat in 5 minutes; max 3 tabs in 15 minutes. Prophylaxis: 5 to 10 minutes before activity.	NOT RECOMMENDED FOR UNDER 18 YEARS OLD
Spray (0.4 mg)	Spray 0.4 mg (1 spray) sublingually every 5 minutes up to 3 doses.	NOT RECOMMENDED FOR UNDER 18 YEARS OLD
Oxygen delivery system – tank is at least 3/4 full if only one tank is available	6 to 8 L/minute May consider any oxygen delivery systems if appropriate.	Children: 1 to 4 L/minute Nasal prongs or nasal catheters preferred; can consider face mask, head box, or incubator for older children. Infants & Neonates (≤ 4 weeks): 1 to 2 L/minute Nasal prongs or nasal catheters preferred.
Optional emergency medications – not required for Medi-Cal Managed Care providers		
Ammonia inhalants	Crack open one (1) capsule	Same as adult
Other:		
Other:		

* Only one emergency medication strength or route is required.

** This medication strength and route treats the widest age range of the population and meets the state requirement for this medication category. All medication strengths and routes must be considered to provide emergency treatment for the population served, as applicable.

Emergency Kit Must Include:

- Appropriate Sizes ESIP needles/syringes
- Alcohol Wipes
- Nasal Cannula/ Oxygen Mask (Infant, Child, Adult)
- Ambu Bags (Infant, Child, Adult)
- Bulb Syringe
- Oxygen Tank (at least ¾ full)

References:

<https://www.pdr.net/drug-summary/Albuterol-Sulfate-Inhalation-Solution-0-083--albuterol-sulfate-1427>

https://www.accessdata.fda.gov/drugsatfda_docs/label/2013/091526lbl.pdf

<https://www.benadryl.com/benadryl-dosing-guide>

<https://www.health.harvard.edu/heart-health/aspirin-for-heart-attack-chew-or-swallow>

<https://www.pdr.net/drug-summary/Adrenalin-epinephrine-3036>

<https://www.pdr.net/drug-summary/Glucagon-glucagon--rDNA-origin--290>

<https://medlineplus.gov/druginfo/meds/a682480.html#:~:text=Glucagon%20is%20used%20along%20with,stored%20sugar%20to%20the%20blood>

<https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/narcan-naloxone-nasal-spray-approved-reverse-opioid-overdose>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5753997/>

https://www.accessdata.fda.gov/drugsatfda_docs/label/2014/021134s007lbl.pdf (Page 8)

Reviewed and approved by: _____

Date: _____

Print Name and Title: _____