	M15.1 – SALBUTAMOL (VENTOLIN, COMBIVENT)²	
	Version date: 2025-04-24	Effective date: 2024-04-30 (07:00)

INDICATIONS	
<ul style="list-style-type: none"> Acute exacerbation of asthma (table A) Acute exacerbation of chronic obstructive pulmonary disease (table B) Bronchospasm due to anaphylaxis (table C) 	For the treatment of hyperkalemia, refer to M30

WARNINGS
ABSOLUTE CONTRAINDICATIONS: <ul style="list-style-type: none"> Hypersensitivity to salbutamol

TABLE A: ACUTE EXACERBATION OF ASTHMA	
MDI WITH SPACER	EMR / PCP / ICP / ACP
ADULTS / ADOLESCENTS: <ul style="list-style-type: none"> Initial treatment - in the first hour administer 2 to 10 inhalations every 20 minutes for up to 3 doses as required Evaluate the response after every 2 inhalations After the initial treatment, repeat 2 to 10 inhalations every hour as required INFANTS / CHILDREN: <ul style="list-style-type: none"> Initial treatment - in the first hour administer 4 to 10 inhalations every 20 minutes for up to 3 doses as required After the first 4 inhalations, evaluate the response after every 2 inhalations After the initial treatment, repeat 4 to 10 inhalations every hour as required 	
NEBULIZER	PCP / ICP / ACP
ADULTS / ADOLESCENTS: <ul style="list-style-type: none"> Initial treatment - in the first hour administer 2.5 to 5 mg every 20 minutes for up to 3 doses as required Evaluate the response after every nebulization After the initial treatment, repeat 2.5 to 5 mg every hour as required INFANTS / CHILDREN: <ul style="list-style-type: none"> Initial treatment - administer 0.15 mg/kg per dose (minimum dose = 2.5 mg / maximum dose = 5 mg) every 20 minutes for up to 3 doses in the first hour Evaluate the response after every nebulization After the initial treatment, repeat 0.15 mg/kg every hour as required 	

TABLE B: ACUTE EXACERBATION OF COPD

MDI WITH SPACER	EMR / PCP / ICP / ACP
ADULTS: <ul style="list-style-type: none"> • Initial treatment - administer 2 to 4 inhalations every hour for up to 3 doses as required • Evaluate the response after every 2 inhalations • After the initial treatment, repeat 2 to 4 inhalations every 2 hours as required 	
NEBULIZER	PCP / ICP / ACP
ADULTS: <ul style="list-style-type: none"> • Initial treatment - administer 2.5 mg every hour for up to 3 doses as required • Evaluate the response after every nebulization • After the initial treatment, repeat 2.5 mg every 2 hours as required 	



TABLE C: BRONCHOSPASM DUE TO ANAPHYLAXIS

MDI WITH SPACER	PCP / ICP / ACP
ALL AGES: <ul style="list-style-type: none"> • Administer 2 to 10 inhalations • Repeat every 20 minutes as required 	
NEBULIZER	PCP / ICP / ACP
ALL AGES: <ul style="list-style-type: none"> • Administer 2.5 to 5 mg • Repeat every 20 minutes as required 	

NOTES

1. Medication administration by nebulization is considered an aerosol generating procedure (AGMP). Appropriate personnel protective equipment (PPE) is required (A09).
2. The dosing of Ventolin, Combivent, and generic salbutamol is equivalent.
3. Metered-dose inhalers (MDI) of Ventolin, Combivent, and generic salbutamol each provide 100 mcg salbutamol per actuation. Nebulizer solutions of Ventolin (0.5%), Combivent, and generic salbutamol (0.1%), each contain 2.5 mg of salbutamol per 2.5 ml.

LINKS	
<ul style="list-style-type: none">• A09 - Aerosol Generating Medical Procedures• E03 - Anaphylaxis• E07 - Asthma & COPD• M30 - Hyperkalemia Therapy	

APPROVED BY	
	
Provincial Medical Director	Provincial Associate Medical Director

VERSION CHANGES (refer to X08 for change tracking)
<ul style="list-style-type: none">• Addition of advanced work scope• Revised dosing directions for asthma, COPD, and anaphylaxis for greater clarity and ease of use• Hyperkalemia indication moved to new standing order