	<b>M14 - AMIODARONE</b>	
	MEDICATION STANDING ORDER	<b>HIGH-ALERT MEDICATION <sup>1</sup></b>
Version date: 2023-12-13		Effective date: 2024-01-16 (0700)

INDICATIONS
<ul style="list-style-type: none"> <li>• Cardiac arrest due to ventricular fibrillation (VF) or pulseless ventricular tachycardia (pVT) that has not responded to at least one shock, one cycle CPR, and one dose of epinephrine</li> <li>• Return of spontaneous circulation (ROSC) after VF / pVT arrest when amiodarone has not yet been given</li> <li>• Stable wide complex tachycardia (WCT) or ventricular tachycardia (VT) when the transport time is long &amp; the patient is at risk of deterioration <sup>4</sup></li> </ul>



CONTRAINDICATIONS
<ul style="list-style-type: none"> <li>• Unstable WCT or VT must proceed straight to cardioversion</li> </ul>

CARDIAC ARREST (VENTRICULAR TACHYCARDIA / VENTRICULAR FIBRILLATION)		
ROUTE (WORK SCOPE)	INITIAL DOSE	REPEAT DOSE
<b>INTRAVENOUS (ICP ONLY)</b>	17 years & older - 300 mg	17 years & older - 150 mg once in 5 minutes (max = 450 mg total)
	12 months to 17 years - 5 mg/kg (max = 300 mg/dose)	12 months to 17 years - 5 mg/kg every 5 min (max = 3 doses total)
<b>INTRAOSSEOUS (ICP ONLY)</b>	17 years & older - 300 mg	17 years & older - 150 mg once in 5 minutes (max = 450 mg total)
	12 months to 17 years - 5 mg/kg (max = 300 mg/dose)	12 months to 17 years - 5 mg/kg every 5 min (max = 3 doses total)

ROSC (AMIODARONE NOT GIVEN DURING RESUSCITATION) <sup>2</sup>		
ROUTE (WORK SCOPE)	INITIAL DOSE	REPEAT DOSE
INTRAVENOUS (ICP ONLY)	17 years & older: 300 mg over 10 minutes	None
	12 months to 17 years: 5 mg/kg over 10 minutes (max = 300 mg/dose)	
INTRAOSSEOUS (ICP ONLY)	17 years & older: 300 mg over 10 minutes	
	12 months to 17 years: 5 mg/kg over 10 minutes (max = 300 mg/dose)	

STABLE VENTRICULAR TACHYCARDIA / UNDIFFERENTIATED WIDE-COMPLEX TACHYCARDIA <sup>2</sup>		
ROUTE (WORK SCOPE)	INITIAL DOSE	REPEAT DOSE
INTRAVENOUS (ICP ONLY)	<u>17 years &amp; older</u> : 150 mg over 10 minutes <sup>2</sup>	Consult OLMS <sup>3</sup>

NOTES
<ol style="list-style-type: none"> <li>ERS HIGH-ALERT MEDICATION: Refer to Shared Health Provincial Clinical Standard - Safety Controls for High-Alert Medications (refer to A03 - HIGH ALERT MEDICATIONS).</li> <li><u>The administration rate differs between cardiac arrest and nonarrest.</u> During arrest administer by rapid push, follow with a saline flush, and elevate the arm for 10 to 20 seconds if possible. In non-arrest inject by slow push over 10 minutes.</li> <li>With recurrent arrhythmias management can become very complex. Consult on-line medical support (OLMS) at any time.</li> </ol>

APPROVED BY	
	
Medical Director - Provincial EMS/PT	Associate Medical Director - Provincial EMS/PT

**VERSION CHANGES (refer to X08 for change tracking)**

- Addition of Shared Health Provincial Clinical Standard for high-alert medications