

(continued)

Drug	Indications	Precautions/ Contraindications	Adult Dosage
<p>Lidocaine <i>Can be given via endotracheal tube</i></p>	<ul style="list-style-type: none">• Alternative to amiodarone in cardiac arrest from VF/pVT• Stable monomorphic VT with preserved ventricular function• Stable polymorphic VT with normal baseline QT interval and preserved LV function when ischemia is treated and electrolyte balance is corrected• Can be used for stable polymorphic VT with baseline• QT-interval prolongation if torsades suspected	<ul style="list-style-type: none">• Contraindication: Prophylactic use in AMI is contraindicated• Reduce maintenance dose (not loading dose) in presence of impaired liver function or LV dysfunction• Discontinue infusion immediately if signs of toxicity develop	<p>Cardiac Arrest From VF/pVT</p> <ul style="list-style-type: none">• Initial dose: 1 to 1.5 mg/kg IV/IO• For refractory VF, may give additional 0.5 to 0.75 mg/kg IV push, repeat in 5 to 10 minutes; maximum 3 doses or total of 3 mg/kg <p>Perfusing Arrhythmia For stable VT, wide-complex tachycardia of uncertain type, significant ectopy:</p> <ul style="list-style-type: none">• Doses ranging from 0.5 to 0.75 mg/kg and up to 1 to 1.5 mg/kg may be used• Repeat 0.5 to 0.75 mg/kg every 5 to 10 minutes; maximum total dose: 3 mg/kg <p>Maintenance Infusion 1 to 4 mg per minute (30 to 50 mcg/kg per minute)</p>
<p>Magnesium Sulfate</p>	<ul style="list-style-type: none">• Recommended for use in cardiac arrest only if torsades de pointes or suspected hypomagnesemia is present• Life-threatening ventricular arrhythmias due to digitalis toxicity• Routine administration in hospitalized patients with AMI is not recommended	<ul style="list-style-type: none">• Occasional fall in blood pressure with rapid administration• Use with caution if renal failure is present	<p>Cardiac Arrest (Due to Hypomagnesemia or Torsades de Pointes) 1 to 2 g (2 to 4 mL of a 50% solution diluted in 10 mL [eg, D₅W, normal saline] given IV/IO)</p> <p>Torsades de Pointes With a Pulse or AMI With Hypomagnesemia</p> <ul style="list-style-type: none">• Loading dose of 1 to 2 g mixed in 50 to 100 mL of diluent (eg, D₅W, normal saline) over 5 to 60 minutes IV• Follow with 0.5 to 1 g per hour IV (titrate to control torsades)