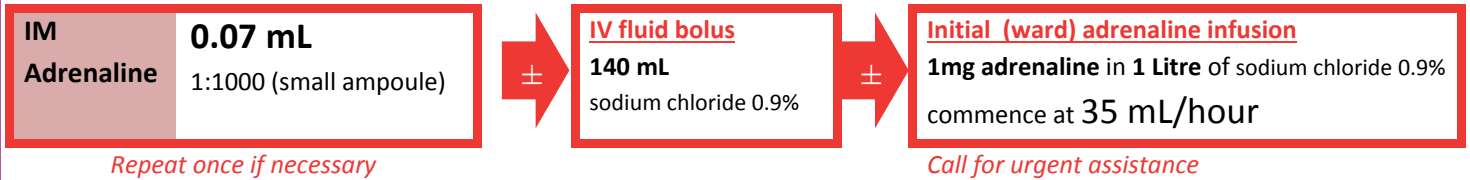


7 kg

Anaphylaxis



Resuscitation

Adrenaline IV (cardiac arrest)	10 micrograms/kg	70 micrograms	of 1:10,000 (large ampoule) <small>ETT dose 0.7 mL of 1:1000 (small ampoule)</small>	0.7 mL
Fluid bolus	20 mL/kg		of Sodium chloride 0.9%	140 mL
Glucose (10%)	2 mL/kg		of Glucose 10%	14 mL
DC shock	4 J/kg		Use paediatric pads	30 Joules
ATROpine	20 micrograms/kg	140 micrograms	Dilute 600 micrograms to 6 mL	1.4 mL
AmIODAROne	5 mg/kg	35 mg	Dilute 1 ampoule (150mg in 3mL) to 25mL in <u>Glucose 5%</u> Over 3 mins in emergency, otherwise over 20-120 mins	5.9 mL
Adenosine (1st dose)	0.1 mg/kg	0.7 mg	<u>Undiluted</u> (6 mg in 2 mL); use 1mL syringe.	0.23 mL
Adenosine (2nd dose)	0.2 mg/kg	1.4 mg		0.47 mL
Adenosine (3rd dose)	0.3 mg/kg	2.1 mg		0.7 mL
Nebulised Adrenaline for upper airway obstruction / croup: 3.5 mL of 1:1000 (small ampoule) OR 0.35 mL of 1% solution diluted to 4 mL				

Intubation (prepare one size above/below)

ET tube size (uncuffed) (Age/4) + 4	3.5	Depth: 10.5-11 cm to lip 12.5-13 cm to nose	Laryngoscope: 1 Suction: 8 Fr
ET tube size (Microcuff™)	3		
ET tube size (cuffed) (Age/4)+3.5	N/A	LMA size: 1.5	

Induction agents

Ketamine	1-2 mg/kg	7 - 14 mg		Dilute 200mg in 20 mL OR dilute 100mg in 10mL	0.7 – 1.4 mL
Propofol	1-2 mg/kg	7 - 14 mg	<i>Risk CVS ↓</i>	Undiluted	0.7 – 1.4 mL
Thiopentone	2.5-5 mg/kg	17.5 – 35 mg	<i>Risk CVS ↓</i>	Reconstitute 500mg in 20 mL water for injection	0.7 – 1.4 mL
Fentanyl	2 micrograms/kg	14 micrograms		Dilute 100 micrograms to 10 mL	1.4 mL
Midazolam	0.1 mg/kg	0.7 mg		Dilute 5 mg to 5 mL	0.7 mL

Paralytic agents

Suxamethonium	2 mg/kg	14 mg		Dilute 100 mg to 10 mL	1.4 mL
Rocuronium	1.2 mg/kg	8.4 mg		Undiluted	0.84 mL
Vecuronium	0.1 mg/kg	0.7 mg		Reconstitute 10 mg in 10 mL water for injection	0.7 mL
Pancuronium	0.1 mg/kg	0.7 mg		Dilute 4mg to 4mL	0.7 mL
Atracurium	0.5 mg/kg	3.5 mg		Dilute 25mg to 10mL	1.4 mL
Cisatracurium	0.1 mg/kg	0.7 mg		Undiluted	0.35 mL

Antidotes

Sugammadex	16 mg/kg	112 mg		Undiluted (100 mg/mL)	1.1 mL
Naloxone	2 micrograms/kg	14 micrograms		Dilute 400 micrograms (1mL ampoule) to 20 mL	0.7 mL <i>repeat PRN</i>

Severe uncontrolled haemorrhage – use WARMED fluids

Tranexamic acid (15 mg/kg) Undiluted: 105 mg (1.05 mL) slow push	Packed cells / FFP (5 mL/kg) 35 mL (aim 1:1 ratio)	Platelets (10-15 mL/kg) 70 - 105 mL	Cryoprecipitate (10 mL/kg) 70 mL
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All dilutions with Sodium chloride 0.9% unless otherwise specified.

Seizures / Neurology (see seizure flowchart)

MIDazolam (5 mg/ 1 mL – small ampoule)		IV MIDazolam	IV Clonazepam	IV Diazepam
Intramuscular: (0.15 mg/kg) = 1.05 mg = 0.21 mL IM		(5 mg/ 5 mL – large ampoule)	Child dose	(0.25 mg/kg)
Buccal / nasal: (0.3 mg/kg) = 2.1 mg = 0.42 mL intranasal or buccal		IV: (0.15 mg/kg) = 1.05 mg 1.05 mL IV	0.5 mg	1.75 mg
PhenyTOIN	20 mg/kg	140 mg	Undiluted (preferred). May dilute up to 25 mL (max); give over 20 min	
Levetiracetam	40 mg/kg	280 mg	Dilute 500mg vial to 10mL. Give 5.6 mL over 5 min	
PHENobarbitone	20 mg/kg	140 mg	Dilute to at least 1:10; give over 20 min	
Paraldehyde. 0.4 mL/kg (undiluted)	Dilute 1 ampoule (5mL) to a total of 10mL with olive oil or 0.9% sodium chloride. Give 5.6 mL PR			
Pyridoxine		50-100 mg	In consultation with neurology	
Mannitol 20%	0.5g/kg (2.5 mL/kg)	17.5 mL	Over 20-30 minutes for raised ICP	
Sodium chloride 3% (“Hypertonic Saline”)	3 mL/kg	21 mL	Over 10-20 minutes for raised ICP	

Electrolyte abnormalities

Hyperkalaemia	Critical hypocalcaemia
- Calcium gluconate 10% 3.5 mL slow IV (peripheral / central) OR Calcium chloride 10% 0.7 – 1.4 mL (central)	Calcium gluconate 10% 3.5 mL slow IV (peripheral / central)
- Salbutamol 2.5mg nebulised	Hypomagnesaemia
- Glucose 10% 35 mL with Actrapid 0.7 units/hour IV	700 mg (1.4 mL of 50% MgSO₄) , dilute to at least 4 mL Infuse over at least 4 hours
- Sodium bicarbonate 8.4% 7 – 21 mL (if acidosis)	Severe hypokalaemia needing urgent treatment
Calcium and bicarbonate should be given using different lines	Use pre-mixed 100mL bag [isotonic] (Potassium Chloride 10 mmol in Sodium Chloride 0.29%) 2.1 mmol (21 mL) over 1 hour using syringe driver
Critical hyponatraemia with seizures (Do NOT correct >8 mmol/L/day) 28 mL of Sodium Chloride 3% over 20 minutes	

“Push-dose pressors”

Metaraminol	10 micrograms/kg	70 micrograms	10 mg (1 ampoule) in 100 mL bag. Draw up 10 mL. (OR dilute 2mL (1mg) from 3mg/6mL vial up to 10 mL)	0.7 mL
Phenylephrine	5 micrograms/kg	35 micrograms	10 mg (1 ampoule) in 100 mL bag. Draw up 10 mL.	0.35 mL
Adrenaline	1 micrograms/kg	7 micrograms	Dilute 0.7 mL of 1:10,000 Adrenaline (<u>large ampoule</u>) to total volume of 10 mL	1 mL

Infusions

	Order	1 mL / h is equal to	Starting dose
Prostaglandin (Alprostadil) NICU (Clayton) SCN (Dandenong and Casey)	420 micrograms made up to 50 mL (Sodium chloride 0.9%)	20 nanograms/kg/min	0.5 – 5 mL/h (if shocked, start at high end of range and anticipate apnoea / need for intubation)
Adrenaline / Noradrenaline (Central / IO)	1.05 mg made up to 50 mL (Glucose 5%)	0.05 micrograms/kg/min	1 – 10 mL/h
Noradrenaline / Adrenaline (Peripheral) 1 mL/kg/h = 0.1 microgram/kg/min	6 mg made up to 1000 mL (1 L) [or 3mg in 500 mL]. Starting dose = 3.5 mL/h; titrate by 3.5 mL/h (Dilute ADRENALINE with 0.9% sodium chloride; and dilute NORadrenaline with Glucose 5% + 0.9% sodium chloride) mL/h = microgram/kg/min: 3.5=0.05; 7=0.1; 10.5=0.15; 14=0.2; 17.5=0.25; 21=0.3; 28=0.4; 35=0.5; 70=1		
Dobutamine	105 mg made up to 50 mL (Glucose 5%)	5 micrograms/kg/min	1 – 4 mL/h
Morphine	7 mg made up to 50 mL (Glucose 5% preferred)*	20 micrograms/kg/hour	1 – 4 mL/h
Midazolam	21 mg made up to 50 mL (Glucose 5% - preferred)*	1 micrograms/kg/min	1 - 4 mL/h

*Can also use Sodium chloride 0.9%

All dilutions with Sodium chloride 0.9% unless otherwise specified.

Edition 2
Due for review 2022