



Adult Retrieval Victoria Infusions Table

	Preparation	Concentration	Loading / Bolus	Infusion	Comments
Adrenaline Infusion (1mcg/1ml)	3mg dilute to 50ml with NS	60mcg/ml		Titrate to effect. Usually 1-20ml/hr	1ml/hr=1mcg/min
Adrenaline Increments (10mcg/ml)	Dilute 1ml of 1:10,000 adrenaline with 9mls of N.Saline	10mcg/ml	N/A	N/A	It is preferable that an infusion be set up and bolused during retrieval.
Amiodarone (150mg/3ml) (Bolus and Infusion)	300mg dilute to 50ml with 5%DW	6mg/ml	5mg/kg - usual adult dose 300mg over 30-60min	15mg/kg/24hrs - usual adult dose 900mg/24hr = 6.25ml/hr	Slow push in cardiac arrest.
Dobutamine	300mg dilute to 50mls with NS	6mg/ml		Titrate to effect usually 2-20mcg/kg/min (1.4ml/hr-14ml/hr in a 70kg patient)	1ml/hr = 100mcg/min
Dopamine	300mg dilute to 50mls with NS	6mg/ml		Titrate to effect usually 2-20mcg/kg/min (1.4ml/hr-14ml/hr in a 70kg patient)	1ml/hr = 100mcg/min
Fentanyl (100mcg/1ml)	500mcg dilute to 50ml with NS	10mcg/ml	1-5mcg/kg = 0.1-0.5ml/kg	1-10mcg/kg/hr Usual adult rate 5-20ml/hr	
Fentanyl & Midazolam	Fentanyl 500mcg and Midazolam 50mg make up to 50ml with NS	Fentanyl 10mcg/ml Midazolam 1mg/ml		Usual rate 5-10ml/hr	Titrate to sedation.
Fentanyl & Ketamine Increments	Fentanyl 200mcg and Ketamine 200mg dilute to 20ml with NS	10mcg Fentanyl & 10mg Ketamine / ml	Used by some pre-hospital specialists in the Military. One syringe can deliver analgesia/ sedation/ modified RSI adjunct depending on dose.		Ratio of Fentanyl to Ketamine is altered by some practitioners.
Glyceryl Trinitrate (GTN) (50mg/10ml)	50mg dilute to 50ml with NS	1mg/ml		10-200mcg/min. Start 3ml/hr. (50 mcg/min) up to 12ml/hr (200 mcg/min)	Titrate to pain and BP
Hydralazine (20mg dry)	100mg dilute to 50ml with NS	2mg/ml	5-10mg = 2.5-5ml as a "Pushes" (= 150ml/hr) followed by infusion	50-300mcg/min = 1.5-9ml/hr	Bolus 5mg = 2.5ml over 1 min. May need over 20mg initially in severe hypertension.
Hypertonic (3%) Saline (Hypovolaemic shock with head Trauma)	Neat		5-7ml/kg Usual adult bolus 250ml		Controversial
Isoprenaline	3mg dilute to 50ml with NS	60mcg/ml		Titrate to effect. Usually 5-20mcg/min	1ml/hr=1mcg/min
Ketamine (200mg/2ml)	200mg dilute to 50ml with NS	4mg/ml	1-2mg/kg = 0.25-0.5ml/kg	10-50mcg/kg/min = 0.15-0.75ml/kg/hr	Titrate to sedation and vital signs
Ketamine Increments	200mg dilute to 20 ml with NS	20 mg/ml	N/A	N/A	1-2ml bolus for painful procedures (Femoral splint, stretcher transfer)
Levetiracetam (Keppra)	1000mg dilute to 100ml with NS or 5%DW or Hartmanns	10mg/ml	N/A	15 minutes	Doses from 500mg to 1500mg still go in 100ml of diluent and infuse over 15 minutes.
Levosimendan	12.5mg dilute to 50ml with 5%DW	0.25mg/ml or 250mcg/ml	6-12 mcg/kg over 10 mins (e.g. 70kg 420-840 mcg or a rate of 10-20mls per hour for 10 minutes only) (Recommend completing bolus before departure)	0.05-0.1 mcg / kg / min (e.g. 60 kg = 0.7 - 1.4 ml s / hr, 70kg=0.8-1.6mls/hr, 80kg=0.9-1.8mls/hr) "Levo" is given for 24 hours only but may be repeated after a 48hr interval.	This is usually set up as a 500ml infusion and the rate is not changed over the 24 hours.
Lignocaine (Spinal Decompression Illness / AGE) Hyperbaric Unit	200mg dilute to 50ml with 5%DW	4mg/ml	1mg/kg over 2 mins. Usual adult dose 100mg	4mg/min=60ml/hr for 1hr; then 3mg/min = 45ml/hr for 2hrs; then 2mg/min = 30ml/hr up to 24hrs total.	100mg routinely carried. Ensure that ampoule is suitable for IV use.
Magnesium Sulphate (2.5g=10mmol/ 5ml) (Pre-eclampsia)	5g=20mmol dilute to 50ml with NS	0.1g=0.4mmol/ml	4g=16mmol=40ml over 20min	1-2g=4-8mmol = 10-20ml/hr	For seizure give further 2gm = 8mmol = 20ml over 5 min
Magnesium Sulphate (2.5g=10mmol/ 5ml) (Asthma)	5g=20mmol dilute to 50ml with NS	0.1g=0.4mmol/ml	2g=8mmol=20ml over 20min		
Magnesium Sulphate (2.5g=10mmol/ 5ml) (Torsades)	5g=20mmol dilute to 50ml with NS	0.1g=0.4mmol/ml	2g=8mmol=20ml over 10-15 min	0.5-0.75g/hr=2-3mmol/hr=5-7.5ml/hr	
Mannitol (20%)				0.5-1gr/kg over 30 minutes	
Metaraminol Infusion (10mg/1ml)	10mg dilute to 50ml with NS	200mcg/ml	0.2-0.5mg = 1-2.5ml boluses	Suggest start 2mg/hr=10ml/hr	Titrate to effect
Metaraminol Increments (10mg/1ml)	10mg dilute to 20ml with NS	0.5mg/ml			Short term option. Beware reflex Bradycardia.
Midazolam (5mg/1ml and 50mg/10ml)	50mg dilute to 50ml with NS	1mg/ml	0.05-0.1mg/kg = 0.05-0.1ml/kg	0.5-10mg/hr = 0.5-10ml/hr	
Milrinone	10mg dilute to 50 ml with NS	0.2mg/ml	0.05mg per Kg over 10 minutes	1.6-3.2 mg/hour = 8-16 ml/hour	
Morphine (10mg/ml)	50mg dilute to 50ml with NS	1mg/ml	2.5-15mg in 2.5mg = 2.5ml boluses	2-10mg/hr = 2-10ml/hr	
Morphine and Midazolam	Morphine 50mg and Midazolam 50mg dilute to 50ml NS	1mg Morphine and 1mg Midazolam /ml	1-2ml boluses	Usual rate 5-10ml/hr	Titrate to sedation.
Naloxone (400mcg/1ml)	400mcg dilute to 50ml with NS	8mcg/ml	400mcg-2mg. Repeat if needed	Give half the effective bolus dose over 1hr. Titrate to effect.	
Nifedipine	10mg dilute to 50ml with NS	200mcg/ml	5ml/hr (15mcg/kg/hr) first 2/24	10ml/hr (30mcg/kg/hr) maintenance	Titrate to BP. If drops 7ml/hr for 2hrs then back to 10ml/hr. Run centrally with infusion solution (eg. NS) at 40ml/hr.
Noradrenaline (2mg/2ml)	3mg dilute to 50ml with NS	60mcg/ml		Titrate to effect. Usual range 2-20ml/hr	Central Line Only. 1ml/hr=1mcg/min
Octreotide (Oesophageal Varices)	500 mcg dilute to 50ml with 5%DW	10 mcg/ml	50-100 mcg	25-50mcg/hr for 48 hrs = 2.5 - 5 ml/hr	
Phenytoin (250mg/5ml)	1g in 20ml neat	50mg/ml	15-20mg/kg = 0.3-0.4ml/kg over at least 20min. Usual adult dose 1g. Max rate 50mg/min = 1ml/min		
Potassium Chloride (10mmol/10ml)	2-4 mmol dilute to 50ml with NS	40-80 micromol/ml		250-500ml/hr. Max 20mmol/hr	Continuous cardiac monitoring. May irritate peripheral veins. Not routinely carried.
Propofol (200mg/20ml)	200mg in 20ml neat	10mg/ml	Bolus 10-50mg = 1-5ml slowly	1-3mg/kg/hr. Usual adult range 6-20ml/hr	
Salbutamol (5mg/5ml)(Asthma)	6mg dilute to 50ml with NS	120mcg/ml	200-300mcg = 1.7-2.5ml over 2-5 min	2 mcg/min = 1 ml/hr	
Salbutamol (5mg/5ml) (Preterm Labour)	6mg dilute to 50ml with NS	120mcg/ml		2 mcg/min = 1 ml/hr	
Sodium Nitroprusside (50mg dry)	50mg dilute to 50ml with NS	1mg/ml		Start 3mcg/kg/min = 0.18ml/kg/hr. Range 0.5-10mcg/kg/min = 0.03-0.6ml/kg/hr	Titrate to BP target
Syntocinon (10 Units/1ml) PPH			5 units by slow IV injection		
Thiopentone (500mg dry)	500mg dilute to 20ml with water	25mg/ml	2-5mg/kg Usual adult dose 120-350mg = 5-14ml	Usual range 1-5mg/kg/hr = 0.04-0.2ml/kg/hr	
Vasopressin (20 units/1ml) (Shock resistant to Noradrenaline)	20 units dilute to 50ml with NS	0.4units/ml	N/A	Usual dose 0.01-0.04 Units per minute (0.6-2.4 units/hr) = 1.5-6ml/hr. (Range 1-12 ml/hr)	Central Line Only
Vasopressin (20 units/1ml) (Oesophageal Varices)	20 units dilute to 50ml with NS	0.4units/ml	N/A	Start at 0.4 units per minute up to 1.0 units per minute	Central Line Only. Octreotide preferred. Note: Very high doses required (thus side effects)



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