MIDAZOLAM (Versed)

ACTION: Hypnotic, Sedative, Anti-Seizure

- Midazolam is a potent, short-acting benzodiazepine with hypnotic and amnestic effects. It has no effect on pain.

INDICATIONS:

- Premedication before cardioversion, external pacing and other painful procedures.
- Seizures (status epilepticus).
- Agitated patient who may be a danger to self or others.

CONTRAINDICATIONS:

- Hypersensitivity
- Narrow-angle glaucoma
- Shock, with depressed vital signs, unless being used for cardioversion
- Alcoholic coma

POTENTIAL SIDE EFFECTS:

- Laryngospasm
- Bronchospasm
- Dyspnea
- Respiratory depression and arrest
- Drowsiness
- Amnesia
- AMS
- Bradycardia
- Tachycardia
- PVC's
- Nausea
- Vomiting

ADULT DOSE/ROUTE:

⇒ **Sedation/Agitation:** 5mg IM x1 or 5 mg slow push IV/IO. Maximum total dose 5mg IV/IO.

⇒ **Seizure:** 10 mg IM x1 or intranasally (5mg each nostril) or 5mg slow push IV/IO. May repeat IV/IO dose in 5 minutes. Maximum total dose 10mg IV/IO.

PEDIATRIC DOSE/ROUTE:

⇒ **Sedation/Agitation:** 0.1 mg/kg IM (Max 5mg) x1 or 0.05 mg/kg (Max 2mg) slow push IV/IO. May repeat IV/IO dose in 5 minutes for continued agitation. Maximum total dose is the adult dose..

⇒ **Seizure:** 0.2 mg/kg IM x1 (Max 10mg) or intranasally (half in each nostril) or 0.1mg/kg slow push IV/IO (Max 5mg). May repeat IV/IO dose in 5 minutes x1. Maximum total dose is the adult dose

NOTES:

- Contact Base Hospital if seizure activity continues after maximum dose is reached and additional doses are required.
- Do not use intranasal route in agitation because amount of absorption in an actively resisting, agitated patients is unknown.
- Effects of midazolam may be potentiated if administered with opiate pain medications. Contact Base Hospital if considering administering both medications.
- Always be prepared to protect airway and ventilate patients who are given benzodiazepines. Continuous monitoring of vital signs before and after administration is required.