

DROPERIDOL

PHARMACOLOGY & MECHANISM OF ACTIONS:

- ❑ Major tranquilizer
- ❑ Is a potent neuroleptic agent that is available in either an intravenous or intramuscular injection.
- ❑ Produces marked tranquilization and sedation; it allays apprehension and provides a state of mental detachment and indifference while maintaining a state of reflex alertness.
- ❑ Potentiates other CNS depressants.
 - It produces mild alpha-adrenergic blockade, peripheral vascular dilation, reduction of the pressor effect of epinephrine, and has an anti-emetic effect.
 - It can produce hypotension and decreased peripheral vascular resistance.
- ❑ The onset of action of a single IV dose is from 3 to 10 minutes following administration, and the peak effect may not be apparent for up to 30 minutes. Duration is generally from 2 to 4 hours.

INDICATIONS:

- ❑ Sedation of combative patients to facilitate restraint.

CONTRAINDICATIONS:

- ❑ Known allergy to droperidol
- ❑ Known cardiac Q-T abnormality

ADMINISTRATION:

	ADULT	PEDIATRIC	
PARAMEDIC	<ul style="list-style-type: none">❑ 2.5 mg IV or 5 mg IM❑ May repeat x 1 to max of 5 mg IV and 10 mg IM.	<ul style="list-style-type: none">❑ Consult OLMC	PARAMEDIC

PRECAUTIONS & SIDE EFFECTS:

- ❑ Hypotension may occur; IV fluids and other measures to manage hypotension should be readily available.
- ❑ Use caution when administering droperidol to patients who have taken other CNS depressant drugs (barbiturates, tranquilizers, alcohol). Droperidol may have additive or potentiating effects - the dosage should be reduced.
- ❑ Droperidol may induce Torsades de Pointes. Monitor the patient's ECG Q-T interval following administration
- ❑ Common side effects are hypotension and tachycardia; these effects usually subside without treatment. If hypotension is severe or persists, give fluids.
- ❑ Droperidol should be used with caution in patients with a seizure disorder or condition that causes seizures; other similar neuroleptics are known to lower the seizure threshold.

SPECIAL NOTES:

- ❑ Extrapyramidal symptoms (acute dystonic reactions) have occurred following administration. These are not life threatening and generally do not require treatment.
 - Diphenhydramine may be considered if treatment deemed necessary.