INDICATIONS:

1. ~~Suspected Septic Shock unresponsive to fluid resuscitation.~~
2. ~~Distributive (spinal) Shock unresponsive to fluid resuscitation.~~
3. ~~Cardiogenic Shock unresponsive to initial fluid challenge (20 mL/kg up to maximum dose of 250 mL normal saline) or presenting with evidence of pulmonary edema (pulmonary basilar rales).~~
   - ROSC
   - Shock unresponsive to initial fluid bolus
   - Deteriorating patient condition with unknown shock etiology

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CONTRAINDICATIONS:

1. ~~Hypovolemic Shock prior to fluid resuscitation and volume replacement~~
   ~~a. Examples include hemorrhage or severe vomiting/diarrhea with dehydration~~
2. ~~Non-shock (perfusing) states~~
3. ~~Suspected stimulant drug intoxication~~
   - Hemorrhagic shock

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PROCEDURE:

Base Hospital contact and order required.

1. Initiate fluid resuscitation with 20 mL/kg IV or IO bolus up to maximum dose of 250 mL. If no response and it appears that Push Dose Epinephrine (PDE) would be indicated, make Bbase Hh~~o~~spital contact for PDE order.
2. If patient is experiencing cardiogenic shock with pulmonary edema, do not administer fluids but go directly to Bb~~a~~se Hh~~o~~spital contact.
3. Paramedics may prepare PDE dose prior to Bb~~a~~se Hh~~o~~spital contact but cannot administer medication without Bb~~a~~se Hh~~o~~spital contact and order.

~~**Mixing instructions:**~~

- ~~Take the epinephrine preparation of 1 mg in 10 mL (0.1 mg/mL - cardiac epinephrine) and waste 9 mL of the epinephrine solution.~~
- ~~Into that syringe, withdraw 9 mL of normal saline from the patient's IV bag. Shake well.~~
- ~~Mixture now provides 10 mL of epinephrine at a 10 mcg/mL concentration.~~

Recommended Preparation:

1. Obtain epinephrine 1 mg in 10 mL (0.1 mg / mL; cardiac epinephrine).
2. Waste 9 mL from the syringe, leaving 1 mL (0.1 mg).
3. Withdraw 9 mL of normal saline into syringe.
4. Gently mix.
5. Final concentration: 10 mL total volume at 10 mcg / mL.

Preparation and Dosing of Push Dose Epinephrine - Pediatric

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Administration~~Push Dose:~~

- Administer 0.1 m~~L~~l / kg ~~of above solution~~ (0.001 mg / kg) IV / IO (max single dose 1.0 mL).
- ~~Maximum single dose 1.0 ml of above solution (0.01 mg or 10 mcg).~~
- May repeat dose every 3 minutes to titrate to age-based SBP (refer to graph below).~~.~~
- ~~Titrate to a SBP > 70 + age in years X 2 for age up to 10 years.~~
- ~~For ages of 10 or more, titrate to a SBP > 90.~~

Weight	Volume
3 kg	0.3 mL
4 kg	0.4 mL
5 kg	0.5 mL
6 kg	0.6 mL
7 kg	0.7 mL
8 kg	0.8 mL
9 kg	0.9 mL
≥ 10 kg	1 mL

Pediatric Vital Signs by Age

Age	Pulse	Systolic Blood Pressure	Respiratory Rate
Neonate (0-30 days)	100-180	> 60	30-60
Infant (31 days - < 1 yr)	100-160	> 60	30-60
Toddler (1 yr - < 3 yrs)	90-150	> 70	24-40
Pre-school (3 yrs - < 5 yrs)	80-140	> 75	22-34
School Aged (5 yrs - < 10 yrs)	70-120	> 80	18-30
Teen (≥ 10 yrs)	60-100	> 90	12-16