**H2. Adenosine (Adenocard)**

**Class and Action:** Antidysrhythmic, endogenous nucleoside; Decreases electrical conduction through the AV node. Blocks some vagal stimulation

**Indications:** Diagnosis and treatment of SVT

**Contraindications:** Hypersensitivity, 2nd or 3rd degree AV heart blocks, Sick Sinus Syndrome, ineffective in treatment of A-fib/Flutter or V-tach

**Side Effects:** Vertigo, lightheadedness, headache, disphoresis, palpitations, hypotension, dyspnea, sinus brady/pause, ventricular ectopy, chest pain, nausea, metallic taste

**Drug Interactions:** Caffeine and aminophylline may antagonize the effects of Adenosine. Persantine and Tegretol potentiate Adenosine.

**Onset, Duration, and Routes:** Onset is immediate, with a duration of 10-15 seconds. Route is IV or IO

**Adult Dose:**
- 1st Dose is 6 mg
- 2nd dose 12 mg

**Pediatric Dose:**
- 1st dose 0.1 mg/kg, max of 6 mg.
- 2nd dose 0.2 mg/kg, max of 12 mg.

**WDM EMS Protocols:**
B9. Tachycardia
D9. Pediatric Tachycardia

**Special Considerations:**
- Consider utilizing a 20 ga IV (preferably bigger) is used in the AC.
- Should be a rapid push followed by a 20 ml flush of Normal saline, consider using 3-way stopcock

Medication: H2. Adenosine
Date of Most Recent Update: 6/2020