

C. Amiodarone (Cordarone®)

- I. Classification
 - Antidysrhythmic
- II. Actions
 - Sodium, potassium and calcium blockade
 - Prolongs intranodal conduction and refractoriness of the AV node
- III. Indications
 - Pulseless, refractory VT and VF
 - Wide-Complex Tachycardia with pulse
- IV. Contraindications
 - Second and Third Degree AV Block
 - Cardiogenic Shock
 - Marked Sinus Bradycardia
- V. Adverse Effects
 - A. Cardiovascular
 - Bradycardia*
 - Congestive heart failure
 - Hypotension*
 - VT
 - B. Gastrointestinal
 - Liver function test abnormal
 - Nausea
- VI. Administration
 - A. Adult:
150 mg or 300 mg IV/IO push, flush with 10 to 20 ml NS before and after administration.
 - B. Pediatric:
5 mg/kg IV/IO, slow push, flush with 5 to 10 ml NS.
 - C. Drips (Adult):
Mix 150 mg with 50 ml D₅W, and run over 5 to 10 minutes in a 10 drop/ml IV/IO administration set.
- VII. Onset
 - Within 1-5 minutes
- VIII. Duration
 - Has 20-47 day half-life after return of spontaneous pulses and normal blood pressure.
- IX. Precautions
 - Most common side affect is hypotension
 - Torsades de pointes occurs in less than 1% of patients
- X. Notes
 - A. Amiodarone precipitates with Sodium Bicarbonate. Flushing with 10-20 ml of normal saline

prior and after administration should avert this reaction.

- B. The medication is very viscous and forms bubbles easily. Do Not Shake vial.
- C. After return of spontaneous circulation (ROSC) and extremely long transport times (20 minutes or more), contact on-line physician for possible orders for re-bolus.