

DEPARTMENT: Poudre Valley Hospital Emergency Medical Services	POLICY DESCRIPTION: Versed (midazolam)
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APPROVED: 12/3/2014	RETIRED:
EFFECTIVE DATE: 12/8/2014	REFERENCE NUMBER: 5280

Versed (midazolam)

SCOPE:

Poudre Valley Hospital EMS and represented Northern Colorado services [See page 1]

PURPOSE:

To define the use of Versed (midazolam)

INDICATIONS:

- Status epilepticus (Ativan first-line IV/IO/IM agent; Versed is first-line for IN dosing).
- Sedation prior to cardioversion or pacing.
- Sedation after intubation.
- Chemical restraint

CONTRAINDICATIONS:

- Known hypersensitivity to any ingredient in the product.
- Versed should not be given to patients who have a SBP<100 or signs of hypo-perfusion; except in status seizures.
- Contraindicated in pregnancy (Class D) except for status epilepsy in early pregnancy where there is no other option. Benzodiazepines are second line to magnesium sulfate in eclamptic seizures (Greater than 20 weeks).
- The effects of Ativan and Versed are cumulative. If one drug has been administered, the use of the other drug will require a direct order.

Protocol: Versed	EMT- B	EMT - IV	EMT-I	EMT-P
Adult chemical restraint				
Adult dose: 0.5 - 1mg IV or 1 - 4mg IM				SO
Sedation prior to cardioversion/pacing or following successful ET/NT intubation.				
Adult dose: 0.5 – 2mg IV/IO				SO
Status seizures				
Adult and Pediatric IN/IM dose: 0.2mg/kg [may repeat once after 15 min] if still seizing (maximum single dose 5mg).				SO
Adult IV/IO dose: 2mg IV/ IO every 3min to total of 8mg or termination of seizure.				SO
Pediatric IV/IO dose: 0.1 mg/kg every 3min to total of 0.2mg/kg or termination of seizure (maximum single dose 2mg).				SO

ADDITIONAL CONSIDERATIONS:

- A neurological exam and GCS should be documented before and after each dose.
- Exercise caution when using this medication due to rapid onset of hypotension, respiratory depression and over sedation. Respiratory drive must be monitored closely. Pulse oximetry, capnography, and cardiac monitoring should be in place as soon as possible. Immediate ventilatory assistance with 100% O2 and bag-valve-mask may be necessary.
- If given IV, it should be given over two minutes. Consider initial smaller incremental

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doses.

- D. Exercise caution when using this medication due to rapid onset of hypotension, respiratory depression and over sedation.
- E. Consider lower range of dosage for elderly patients.

REFERENCES: