**Drugs & Doses**

<table>
<thead>
<tr>
<th>Drug</th>
<th>Vial</th>
<th>Paeds</th>
<th>Adult</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sux</td>
<td>100mg/2ml (50mg/ml)</td>
<td>1-2mg/kg IM emerg: 5mg/kg</td>
<td>1-1.5mg/kg</td>
<td>Brady with 2nd dose</td>
</tr>
<tr>
<td>Atracurium</td>
<td>50mg/5mls (10mg/ml)</td>
<td>Same adult 0.5mg/kg/hr</td>
<td>0.3-0.6mg/kg/hr</td>
<td>10-35 mins</td>
</tr>
<tr>
<td>Rocuronium</td>
<td>50mg/5ml</td>
<td>Same adult As atrac 0.6 mg/kg As atrac Mild tachy</td>
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<tr>
<td>Vecuronium</td>
<td>10mg powder – 5mls same adult</td>
<td>0.1mg/kg</td>
<td>0.8-1.4mg/kg/min</td>
<td>30-40min</td>
</tr>
<tr>
<td>Sugammadex</td>
<td>200mg/2ml (100mg/ml) 2-5mg/kg</td>
<td>4.15mg/kg/hr</td>
<td>1-5mg/kg</td>
<td>6-10mg/kg/hr</td>
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<tr>
<td>Propofol</td>
<td>200mg/20ml Is 5-6mg/kg</td>
<td>3-5mg/kg</td>
<td>Same adult</td>
<td></td>
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<tr>
<td>Thiopentone</td>
<td>50mg &amp; water 20mls-25mg/ml 0.1-0.2mg/kg</td>
<td>0.5-5mg</td>
<td>20-60min</td>
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<tr>
<td>Midazolam</td>
<td>5mg/5mls</td>
<td>0.1mg/kg/min</td>
<td>Routine: 1-2mg/kg</td>
<td>Analgesia: 0.25/kg/hr</td>
</tr>
<tr>
<td>Ketamine</td>
<td>TV: same adult [IM 5-10mg/kg] Same adult</td>
<td>Induction: 1-2mg/kg Analgesia: 0.25/kg/hr 1-3mg/kg/hr Analgesia = 0.25mg/kg/hr</td>
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<tr>
<td>Atropine</td>
<td>600mcg/ml (6mls = 100mg/ml) 10-20mcg/kg (with neostigmine 10-20mcg/kg) [IM/SC: 10-30mcg/kg]</td>
<td>300-600mcg (with neostigmine 600-1200mcg)</td>
<td></td>
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<tr>
<td>Glycopyrrolate</td>
<td>400mcg/2ml 1 4-10mcg/kg</td>
<td>200-400mcg (with neostigmine 200mcg/1mg neostigmine)</td>
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<tr>
<td>Neostigmine</td>
<td>2.5mg/ml 50mcg/kg with atropine 20mcg/kg glyco 10mcg/kg</td>
<td>50-70mcg/kg (max 5mg) with: atropine 10-20mcg/kg glycol 10-15mcg/kg</td>
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<tr>
<td>Adrenaline</td>
<td>1:1000 = 1mg/ml 1:10000 = 0.1mg/ml</td>
<td>10mcg/kg = 0.1ml of 1:10,000</td>
<td>100mcg in aliquots (1ml 1:10,000)</td>
<td>0.04-0.4mg/kg/min Anaphylaxis – 10-50mcg bolus</td>
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<tr>
<td>Ephedrine</td>
<td>30mg/10ml (3mg/1ml) 3-6mg boluses</td>
<td>10-60min</td>
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<tr>
<td>Phenylephrine</td>
<td>10mg in 100ml NSL (100mcg/ml) 2-10mcg/kg bolus 1.5mcg/kg/min</td>
<td>50-100mcg boluses (0.5-1ml) 0.4mg/kg/min</td>
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<tr>
<td>Metaraminol</td>
<td>10mg/10ml 0.1-1mcg/kg/min</td>
<td>0.5-2mcg boluses</td>
<td>20-60min</td>
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<tr>
<td>Esmolol</td>
<td>100mg/10ml Is (10mg/ml) SVT: 0.5mcg/kg HTN: 25-100mg SVT &amp; HTN: 50-200mcg/kg/min Lasts 10mins</td>
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<tr>
<td>Tramadol</td>
<td>100mg/2ml Loading: 3mg/kg</td>
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<tr>
<td>Alfentanil</td>
<td>1mg/2mls Intubation: 10-20mcg/kg = 1mg</td>
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<tr>
<td>Morphine</td>
<td>50-100mcg/kg 2.5-10mg</td>
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<tr>
<td>Fentanyl</td>
<td>100mg/2ml (50mcg/ml) Same as adult 2-4mcg/kg/hr</td>
<td>1-5mcg/kg</td>
<td>&gt;2-3mcg/kg = 1RR</td>
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<tr>
<td>Remifentanly</td>
<td>3mcg/40ml (50mcg/ml) [TCl] 2mcg/70mls (40mg/ml [CCTD40]) 1mcg/kg slow bolus</td>
<td>0.1-0.5mcg/kg/min (8-42ml/hr) Intub: 10-20mcg/hr Etsk: 1-2ml/hr IPPV: 8ml/hr SV: 2-4ml/hr</td>
<td>0.25mcg/kg/min =20ml/hr lasts 5-10min TCl:3-8mg/ml</td>
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<tr>
<td>Lignocaine</td>
<td>1% = 50mg/5ml 2% = 100mg/5ml Intubation = adult Intubation = 1.5mg/kg Pain relief = bolus 1mg/kg then infusion 1mg/kg/hr for 1hr post op Max 3mg/kg/4hrs or 6c adren Prolongs mm relaxants</td>
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<tr>
<td>Ropivocaine</td>
<td>RSC: 0.2% 20mls each/6hrs Max 4mg/kg/4hrs</td>
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<tr>
<td>Bupivocaine</td>
<td>0.25% (2.5mg/ml) = 50mg/20mls 0.5% = 100mg/20mls Max 2mg/kg Max 60mls Max 2mg/kg/4hrs lasts 3.5-7hrs</td>
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<tr>
<td>Droperidol</td>
<td>Emses: 25-50mcg/kg (max 2.5mg) a-blocker lasts 4hrs</td>
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<tr>
<td>Dexamethasone</td>
<td>150mg/kg (max 5mg) 0.1mg/kg</td>
<td>PONV</td>
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<tr>
<td>Parecoxib</td>
<td>powder 0.5mg/kg</td>
<td>40mg</td>
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<tr>
<td>TXA</td>
<td>15mg/kg 15mg/kg ≈ 1g Slow push</td>
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<tr>
<td>KCL</td>
<td>0.5mmol/kg over 60min Neat or 0.3mmol/ml</td>
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Bupivocaine
Morphine
Drug
OBS Epidural

- standard epidural:
  - 18g tuohy
  - aim 3-5cm of catheter in epidural space
  - test dose ropivocaine 0.2% 4mls:
    - subarachnoid: wait 15mins
    - IV: rpt test with 3mls lignocaine & adrenaline > 1HR 20-30 in 20sec
  - bolus dose ropiv 0.2% 8ml with:
    - [early labour] 50mcg fentanyl
    - [>5-6cm dilated] 100mcg fentanyl
  - top up: wait 15min – add another 8mls ropiv; wait 15min – try 5mls ropiv 0.375
  - infusion – when dermatome @T10:
    - ropiv 0.2% with fentanyl 2mcg/ml. Rate 6-14mls/hr. IAR 8ml/hr
- top up of established epidural:
  - ropiv 0.75 5-10mls
- C section spinal 25-27G pencil point (need T4 block): should last 60-120min
  - 2.5ml 0.5% bupivacaine heavy & 15-25mg fentanyl & 150mcg morphine
- C section epidural (need T4):
  - test dose as above
  - top up: ropivocaine 0.75 5ml boluses up to 15mls + 50-100mcg fentanyl
- Rapid epidural block:
  - lignocaine 2% & adrenaline 1:200,000 +/-bicarb
  - 20mls 2% lignocaine (5ml solution will usually give you 2 dermatome levels is 20mls = 8levals)
  - 0.1ml 1:1000 adren
  - 2mls 8.4% bicarb ⇒ make to 22mls
  - +/- 100mcg fentanyl
- CSE:
  - epidural post op analgesia dose: 3mg in 5mls N saline

PCA Adjuncts
Clonidine – 100mcg in 100mls (1mcg/ml) pain & antiemesis
Ketamine – 50mg in 100mls (0.5mg/ml)
Droperidol – 5mg in 100mls (0.05mg/ml) antiemesis

AFOI – method 1
- nebulized 4% lignocaine 5mls – rpt if needed
- MAD 10mls of 4% lignocaine with EITHER
  - 5mcg/ml adrenaline OR
  - phenylephrine 5mg
AFOI – method 2
- dexmetomidine:
  - loading: 0.5mcg/kg loading over 5mins
  - I1mcg/kg/hr infusion
  - topicalise airway with MAD

Paeds premed (give in pamol):
midaz 0.5mg oral (max 15) (0.3mg/kg intranasal)
ketamine 0.5mg/kg & atropine 10-20mcg/kg
clonidine 5mcg/kg (intranasal 2mcg/kg)

Anaesthetic plan:
P – rep
  - pre op Ax & consent
  - post op – DVT, destination, pain, PONV
R – esus
I – V
M – monitoring
E -quipmen
T – ransfer
I – induction
M – antenence
E – emergence

Induction:
D – drugs
A – airway
M – machine
S – suction
I – IV
P – positioning

Antacids
- nifedipine
  - load: 10mg oral – can rpt in 30min
  - main: 10mg PO qds
- IV hydrazine 1mg/ml:
  - load: 5ml over 15min. rpt if DBP >100
  - main: neat infusion 5ml/hr. titrate to DBP 90-100. Aim 2-3ml/hr (max 18ml/hr)
The Ultimate TIVA Recipe (Sapsford)
- IPPV = 1000mg propofol, 6mg alfentanil +/- 40mg ketamine
- Spont vent = 1000mg prop, 6mg alfentanil +/- 20mg ketamine
- effect site model: 1-4 ng (spont vent); 4-6ng (IPPV)
  - notes:
    - elderly – titrate up effect site model slowly to maintain SV
    - young – bolus straight prop or mixture
    - morphine @ end titrate for post op analgesia (infusion analgesia should last at least 15min)
      - alfentanil spont breath range = 20-40mcg/kg/hr
      - ketamine analgesia range = 100-400mcg/kg/hr

Paeds Emergency Calculations

W = (age+4) * 2
Energy (J) = 43/kg (>8 norm)
Tube = (age+4) + 4
F luid = 20mls/kg
Calcium chloride 0.1-0.2ml/kg 10%
A drenaline 10mcg/kg (0.1ml of 1:10,000 or 0.01ml 1:1000)
A mirodarone 5mg/kg
A tropine 10-20mg/kg
G 5ml/kg of 10% (or infant 2ml/kg)
Calcium dose 0.2mls/kg 10% Ca gluconate
A tropine = 20mcg/kg IV or IM
Sux = 2mg/kg IV; 5mg/kg IM
Prop = 3-5mg/kg
Fentanyl = 2mcg/kg IV