



REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME

atropine

Effective Date: Mar 2013

CLASSIFICATION
Anticholinergic

OTHER NAMES

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Revised Date: January 2025

ADMINISTRATION POLICY:

- IV Bolus - May be administered by a nurse experienced in ED/OR/CARDIAC ROOM/ICU/PACU
- IM Injection - May be administered by a nurse
- Subcutaneous - May be administered by a nurse
- IV Infusion - May be administered by a nurse experienced in ED/ICU

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 0.4 mg/mL – 1 mL ampoule, 0.6 mg/mL – 1 mL ampoule
0.1 mg/mL – 5 & 10 mL prefilled syringe, 0.2 mg/mL - 5 mL prefilled syringe

IV Bolus: May be administered undiluted or diluted in 10 mL normal saline, D5W or combination dextrose-saline solutions. Administer over 2 to 3 minutes.

IV Infusion: Pump Library:

Drug Library	Dose Rate	Short Name	Care Unit
Yes	mg/h	atropine	Critical Care
Drug	Diluent	Final Volume (VTBI)	Final Concentration
13.2 mg (22mL of 0.6mg/mL)	100 mL NS	122 mL	0.1 mg/mL
Clinical Advisory			
Soft Low Dose Limit: 0.3 mg/h		Soft High Dose Limit:	

IM/Subcutaneous: Administer undiluted

DOSAGE:

Usual: 0.4 to 0.6 mg IV/Subcut/IM (may be repeated)

Bradycardia/Drug-induced AV conduction impairment:

0.5 to 1 mg IV every 3 to 5 minutes to a maximum total dose of 3 mg

Organophosphate or carbamate insecticide or nerve agent poisoning:

Dose is dependent on severity of symptoms.
Mild to moderate: 1 to 2 mg IV. Double the dose every 3 to 5 minutes if required.
Severe: 3 to 5 mg IV. Double the dose every 3 to 5 minutes if required.
IV continuous infusion: 10 to 20% of total cumulative IV bolus dose as initial continuous infusion per hour. Adjust rate to maintain response without causing atropine toxicity.

Maximum concentration: 0.6 mg/mL

Maximum rate: 0.6 mg/minute



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STABILITY/COMPATIBILITY:

Stability of Final Admixture: Use immediately

Compatibility: Compatible with normal saline, D5W

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Cardiovascular: asystole, hypotension, arrhythmias, tachycardia, palpitations
- Dermatologic: flushing
- Gastrointestinal: abdominal pain, constipation, nausea, vomiting, xerostomia
- Hypersensitivity: hypersensitivity reactions including anaphylaxis
- Renal: urinary retention
- Neurologic: confusion, dizziness, headache
- Ophthalmic: blurred vision

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Use cautiously in patients with glaucoma, pyloric stenosis or obstructive uropathy as conditions may worsen
- IV Bolus and IV Infusion: Continuous Cardiac Monitoring, heart rate, blood pressure and mental status
- Elderly patients: Use cautiously in elderly due to increased sensitivity to anticholinergic effects of drug