



REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME

glycopyrrolate

Effective Date: Mar12-2014

CLASSIFICATION
Anticholinergic

OTHER NAMES
Robinul

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Revised Date: March 2024

ADMINISTRATION POLICY:

- IV bolus:** - May be administered by a nurse with access to a cardiac monitor
- IV Infusion** - May be administered by a nurse
- IM Injection** - May be administered by a nurse
- Subcutaneous** - May be administered by a nurse

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 0.2 mg/mL – 1, 2 and 20 mL vials

IV bolus: Administer undiluted over 1 or 2 minutes

IV intermittent: Administer over 15 to 20 minutes

Dose	Dose Preferred Diluent Volumes Bag size
	NaCl 0.9% or D5W
Ordered	50mL

IM, Subcut: Administer undiluted

DOSAGE:

Usual:

IV, IM, Subcut: 0.1 to 0.4 mg every 1 to 8 hours as needed for control of oral secretions

IV, IM: 0.1 to 0.2 mg 30 to 60 minutes prior to surgery or procedure

For use with neostigmine in neuromuscular blockade reversal: 0.2 mg IV for every 1 mg of neostigmine

Maximum rate: 0.2 mg over 1 minute

Maximum concentration: 0.2 mg/mL

Maximum single dose: 0.4 mg

Maximum daily dose: 0.8 mg (exception: no maximum in palliative care)

STABILITY/COMPATIBILITY:

Stability of Final Admixture: Use immediately

Compatibility: Compatible with normal saline, D5W, combination dextrose-saline solutions

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- GI: constipation, dry mouth
- CV: tachycardia, palpitations
- CNS: headache, nervousness, drowsiness, dizziness, insomnia, confusion
- Other: urinary hesitancy and retention, decreased sweating, loss of taste, blurred vision, weakness

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Use with caution in patients with glaucoma, asthma or cardiovascular disorders
- Elderly patient: have increased sensitivity to anticholinergic effects.