REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME

isoproterenol

HIGH ALERT DOUBLE CHECK

Effective Date: Dec 2013 **Revised Date:** Dec 2022	CLASSIFICATION **Vasoactive**	OTHER NAMES **Isuprel**	PAGE 1 of 2

ADMINISTRATION POLICY:

IV Bolus/IO:	Administration restricted to nurses under direct supervision of prescriber
IV Infusion:	Administration restricted to nurses experienced in ED/CARDIAC ROOM/ICU/PACU
IM Injection:	Administration restricted to nurses under direct supervision of prescriber
Subcut:	Administration restricted to nurses under direct supervision of prescriber

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 0.2 mg/mL. Do not use if pinkish or darker yellow/brown in color or if precipitate present.

IV Bolus/Intraosseous: Dilute 0.2 mg/mL (1 mL) with 9 mL normal saline
Final volume: 10 mL Final concentration: 0.02 mg/mL (20 mcg/mL)
Administer over 1 to 2 minutes.
If administration is intraosseous, flush with 5 mL normal saline to move drug into central circulation.

IM/Subcut: Administer undiluted

IV Infusion: Pump Library:

Drug Library	**Dose Rate**	**Short Name**	**Care Unit**
Yes	mcg/min	isopro1	Critical Care
Drug	**Diluent**	**Final Volume (VTBI)**	**Final Concentration**
1 mg (5 mL of 0.2 mg/mL)	250 mL normal saline or D5W	255 mL	0.004 mg/mL
Clinical Advisory: High Alert			
Soft Low Dose Limit: 1 mcg/min	Soft High Dose Limit: 20 mcg/min		

Maximum rate: Titrate according to response and adverse effects
Maximum concentration: 0.004 mg/mL

DOSAGE: **Note: 1 mg = 1000 mcg**

Usual:
IV/Intraosseous Push: 0.01 to 0.06 mg, depending on indication
IV/Intraosseous Infusion: 1 to 20 mcg/minute
Subcutaneous: 0.2 mg, followed by 0.15 to 0.2 mg
IM: 0.2 mg, followed by 0.02 to 1 mg

Maximum single dose: 0.2 mg
Maximum daily dose: 20 mcg/minute

REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME

isoproterenol

Effective Date: Dec 2013 **Revised Date:** Dec 2022	CLASSIFICATION **Vasoactive**	OTHER NAMES **Isuprel**	PAGE 2 of 2

STABILITY/COMPATIBILITY:

Stability of Final Admixture: 24 hours room temperature

Compatibility: Compatible with D5W or normal saline

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Tachycardia, palpitations, angina
- Nausea, vomiting, cardiac arrhythmias, hypotension, nervousness

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Continuous cardiac monitoring
- Monitor heart rate, blood pressure, EKG
- Dosage adjustments should be based on patient's heart rate and blood pressure. If heart rate exceeds 110 beats/minute or if premature heart beats/EKG changes develop the physician should be notified. Slowing the rate of infusion or temporarily discontinuing the infusion should be considered.
- Elderly patients: Use with caution