REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME
procainamide

HIGH ALERT DOUBLE CHECK

Effective Date: Dec 2011 **Revised Date:** Dec 2022	CLASSIFICATION **Antiarrhythmic**	OTHER NAMES **Pronestyl**	PAGE 1 of 2

ADMINISTRATION POLICY:

IV Infusion – Administration restricted to nurses experienced in ED/OR/CARDIAC ROOM/ICU/PACU
IV Bolus – May be administered by a nurse under direct supervision of a prescriber
IV Intermittent – Administration restricted to nurses experienced in ED/OR/CARDIAC ROOM/ICU/PACU
IM Injection – May be administered

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 100 mg/mL – 10 mL vial
IV Bolus: (Emergency use only) Dilute each 100 mg = 1 mL with 9 mL normal saline administer over at least 2 minutes
IV Intermittent: Less than or equal to 1000 mg: Dilute in 50 to 500 mL normal saline
1001 mg or greater: Dilute in 100 to 500 mL normal saline
Administer over 30 to 60 minutes

IV Infusion: Pump Library:

Drug Library	**Dose Rate**	**Short Name**	**Care Unit**
Yes	mg/min	procain	Critical Care
Drug	**Diluent**	**Final Volume (VTBI)**	**Final Concentration**
2000 mg (20 mL of 100 mg/mL)	500 mL NS	520 mL	3.846 mg/mL
Clinical Advisory: High Alert			
Soft Low Dose Limit: 1 mg/min	Soft High Dose Limit: 4 mg/min		

DOSAGE:

Loading Dose: 20 to 50 mg per minute until arrythmia suppresses, QRS becomes greater than 50 percent widened or hypotension (or maximum 17 mg per kg given)
Maintenance dose: IV continuous: 1 to 4 mg/minute

IM dosing during surgery & anesthesia: 100 mg to 500 mg (may be administered parenterally in adults)

Maximum total loading dose: 17 mg/kg (based on actual body weight)

Maximum rate: 50 mg/minute
Maximum concentration: 9 mg/mL

STABILITY/COMPATIBILITY:

Stability of Final Admixture: 24 hours at room temperature
Compatibility: Compatible with normal saline
Compatible with dextrose or combination dextrose/saline solutions for 8 hours

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PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Hypotension, especially if given too rapidly
- Decreased cardiac output
- Cardiac arrhythmias
- Severe hypotension, tachycardia, confusion, lethargy, nausea, vomiting; signs and symptoms of overdose
- Possible cross-sensitivity with local anesthetics of the ester type (e.g.: procaine, benzocaine, tetracaine)

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Continuous cardiac monitoring
- Monitor vital signs
- Dose reduction is required in patients with renal dysfunction
- Intravenous therapy should be terminated as soon as cardiac rhythm is stabilized
- Oral therapy, if indicated, may begin 3 to 4 hours after the last IV dose
- Use with caution in patients with marked disturbances in atrioventricular conduction; procainamide may further
- depress conduction
- Use with extreme caution in myasthenia gravis due to enhanced blockade or neuromuscular transmission and
- antagonism of the therapeutic effects of concomitant administered cholinergic agents
- Elderly patients: Lower doses may be required