

MEDICATION SHEET

SCOPE: ALS, CCT	
MEDICATION:	FENTANYL (Sublimaze)
INTERVENTION:	Classification: Opioid analgesic, Narcotic: Schedule II controlled substance
	Actions: Potent synthetic opioid analgesic with rapid onset and short duration; more potent, but less emetic and vasodilatory effects than Morphine
	Contraindications:
	Known hypersensitivity
	Myasthenia Gravis
	Monoamine Oxidase Inhibitor (MAOI) use
	Precautions:
	Brady dysrhythmias
	Respiratory depression
	Risk of chest wall rigidity with rapid IV infusion
	Exacerbate hypotension in the patient with hypovolemic shock Repol or hopotic impoirment.
	Renal or hepatic impairment
	Dosage:
	I. Pain & Anxiolysis:
	a. Adult & Pediatric:
	i. IV/IO/IM: Up to 1 mcg/kg 1. Repeat every 5 min PRN
	1. Repeat every 5 milit PRIV
	Onset of Action: IV/IO: 1 minute, IM: 7-15 minutes
	<u>Duration</u> : 30 minutes - 2 hours
	Adverse Effects: Sedation, dizziness, euphoria, diaphoresis, nausea, vomiting, seizures, hypotension, bradycardia, laryngospasm, respiratory depression, chest wall rigidity, cardiac arrest
	Special Considerations: I. Preferred analgesic for the Obstetric population

If this is a patient care policy, the information contained herein is used to provide guidance in the care of patients, but should not, and does not replace or preclude the use of clinical judgment.

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