FENTANYL CITRATE (Sublimaze) PUBLIC COMMENT JANUARY 2025

ACTION: Opioid Analgesic

- Centrally acting opiate analgesic effective for acute pain.
- For cardiac patients: fentanyl reduces the pain of ischemia and reduces anxiety, reducing oxygen demands on the heart, improving perfusion.

INDICATIONS:

- Chest pain of suspected ischemic origin that is refractory to maximum anti-ischemic medications (ASA and nitroglycerin)
- Management of acute pain according to ALS Treatment Protocols.

CONTRAINDICATIONS:

- Hypersensitivity or prior allergic reaction
- Respiratory Insufficiency
- Asthma or exacerbated COPD
- Head injury
- Hypotension
- Decreased LOC

POTENTIAL SIDE EFFECTS:

- Respiratory depression
- Hypotension
- Decreased LOC

- Nausea and vomiting
- Bradycardia
- Muscle rigidity (rare)

ADULT DOSE/ROUTE:

- ⇒ 50 mcg IV/IO slow IV push (over 1 minute). May repeat every 5 minutes if SBP > 90 mm Hg. The maximum dose is 200 mcg without base contact.
- ⇒ If no IV/IO, 100 mcg IN or IM (IN preferred). May repeat every 10 minutes if SBP > 90 mm Hg. The maximum dose is 200 mcg without base contact.

PEDIATRIC DOSE/ROUTE:

- ⇒ If IV/IO, 1 mcg/kg/dose IV/IO up to 50mcg slow IV push (over 1 minute). Subsequent dose up to 25 mcg may be repeated every 10 minutes up to the maximum dose of 100 mcg without Base Hospital contact.
- ⇒ If **no** IV/IO, 2 mcg/kg/dose IN or IM (IN preferred) up to 50 mcg. Subsequent dose up to 25 mcg may be repeated every 10 minutes up to the maximum dose of 100 mcg without Base Hospital contact.

NOTES:

- When used in conjunction with non-narcotic pain medications, such as Ibuprofen and Ketorolac, Fentanyl may be used in doses smaller than those listed above for adults/pediatrics and repeated to reach desired effect (not to exceed max dose).
- Rapid infusions of Fentanyl have been associated with chest wall rigidity and respiratory depression, particularly in pediatrics. Administer doses over 1-2 min to prevent occurrence.
- Fentanyl is 100x stronger than Morphine and is dosed in micrograms. It is faster acting than Morphine (peak effect 5-10 minutes) and has a shorter duration of effect (approximately 30 minutes). 100 mcg of Fentanyl is approximately equivalent to 10 mg of Morphine.
- Fentanyl can cause depressed respiratory status. Be prepared to assist ventilations in patients receiving Fentanyl.
- Respiratory depression from Fentanyl can be reversed with Naloxone.
- Fentanyl's effects can be potentiated by Midazolam. Contact the Base Hospital Physician before administering both Fentanyl and Midazolam.
- Contact the Base Hospital Physician if higher doses of Fentanyl are required for adequate pain control.

Effective: xx/xx/xx Supersedes: 10/01/21