



# El Dorado County Emergency Medical Services Agency

Quick Reference

Revised Date: July 1, 2020

## Medication Profile

### Lidocaine Hydrochloride (Xylocaine)

#### **Class:**

Antidysrhythmic, anesthetic

#### **Action:**

Suppresses ventricular dysrhythmias by decreasing ventricular irritability. Increase fibrillatory threshold by elevating the electrical stimulation of the ventricles. Depresses conduction in ischemic tissues. May reduce ICP. Blocks the conduction of impulses and stabilizes neural membranes thereby relieving pain.

**Onset:** IV/IN 45-90seconds

**Peak:** Unknown

**Duration:** 10-20min

#### **Adult Administration:**

Post IO insertion pain: 40mg IO push. May repeat 20mg

VF/VT no pulse: 1.0-1.5mg/kg IV/IO push. May repeat in 3-5 minutes (Max dose 3mg/kg)

VT with pulses: 1.0-1.5mg/kg slow IV/IO push. If rhythm persists, repeat ½ initial dose in 5-10 minutes (Max dose 3mg/kg)

**Repeat doses should be half of the initial dose for patients older than 70 with CHF, chronic liver disease, or impaired circulation.**

#### **Pediatric Administration:**

Post IO insertion: 0.5mg/kg IO push

VF/VT no pulses: 1mg/kg IV/IO. If rhythm persists repeat dose in 10 minutes (Max dose 3mg/kg).

Only bolus therapy shall be used.

VT with pulses: 1mg/kg IV/IO. If rhythm persists repeat dose in 10 minutes.

#### **Indications:**

Pain management post IO insertion  
Ventricular dysrhythmias VTach, Vfib  
Post defibrillation or cardioversion of ventricular Rhythms  
May be used if Amiodarone is not available or  
Allergy to lidocaine

#### **Contraindications:**

Hypersensitivity/allergy  
High degree heart  
block (Mobitz II, 3<sup>rd</sup> degree)  
Junctional Bradycardia  
Ventricular Ectopy associated with  
bradycardia  
Idioventricular or escape rhythms

#### **Side Effects:**

CV: Hypotension, bradycardia  
CNS: lightheadedness, confusion, seizures

#### **Pregnancy:**

**This document is not a substitute for Protocols and Procedures.**

Effective Date: September 1, 2020

