

Magnesium Sulfate



Calcium Gluconate



Procainamide



Sodium  
Bicarbonate



## Pediatric Dosage

### *ACTION:*

Reverse magnesium toxicity

*DOSE: (10% = 100 mg/mL)*

60-100 mg/kg (0.6-1.0 mL/kg) IV/IO (9 mg/mL elemental Ca)

### *NOTES:*

Give slow IV push to hypocalcemia, hypermagnesemia, calcium channel blocker toxicity, preferably via central vein

## Pediatric Dosage

### *ACTION:*

Alkalinizing agent, electrolyte for Metabolic Acidosis, Hyperkalemia and sodium channel blocker overdose

### *DOSE:*

(1 mEq/mL and 0.5 mEq/mL)

V/IO: 1 mEq/kg per dose

### *NOTES:*

Infuse slowly and only if ventilation is adequate.

## Pediatric Dosage

### *ACTION:*

Electrolyte and bronchodilator for Asthma, Torsade de pointes, Hypomagnesemia

*DOSE: (500 mg/mL)*

(500 mg/mL for injection)

Torsade de Point (pulseless), IV/IO 25-50 mg/kg bolus (max dose 2 g)

### *NOTES:*

10-20 min IV infusion for torsades de point (w/ pulse) or 15-30 minute slow infusion suspected hypomagnesemia, status asthmaticus

## Pediatric Dosage

### *ACTION:*

Antiarrhythmic: SVT, Atrial Flutter, VT (w pulses) for perfusing tachycardia's (100 mg/mL and 500 mg/mL)

### *DOSE:*

15 mg/kg IV/IO load over 30-60 min

### *NOTES:*

Monitor blood pressure & ECG continuously w/ focus on QT interval.  
Monitor procainamide and NAPA concentrations