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## Epinephrine 1:1000 (1 mg per 1 mL concentration)

**0.15 mg = 0.15 mL**

This is the maximum single dose for:

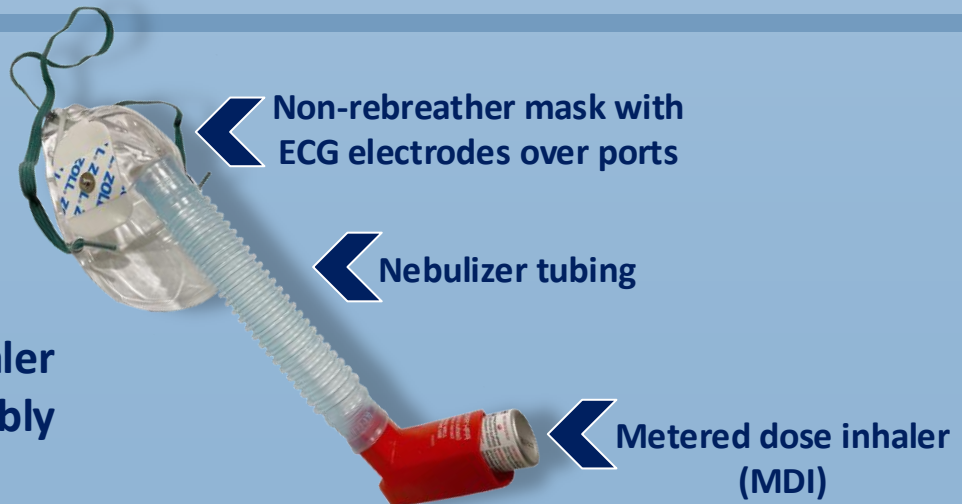
- Pediatrics over 15 kg (33 lbs), or
- Adults with a history of cardiac disease, or
- Adults over 50 years old, or
- Adults with a heart rate exceeding 130 bpm



**0.3 mg = 0.3 mL**

This is the maximum single dose for:

- Adults with no known history of cardiac disease, and
- Adults 50 years old and younger, and
- Heart rate under 130 bpm



### Metered Dose Inhaler (MDI) Mask Assembly

- If available, the Metered Dose Inhaler (MDI) should be utilized with the above pictured closed system inhaler mask. This mask is used to help prevent the transmission of the virus by utilizing a closed system to limit aerosolization. This inhaler mask is assembled using a NRB or nebulizer mask, nebulizer spacer tube, two (2) ECG electrodes, and the MDI. Connect the corrugated spacer tube to the mask and MDI and cover the two (2) exhaust ports on the mask with the ECG electrodes.

Instructional video: <https://www.youtube.com/watch?v=8qalk59u4mc&feature=youtu.be&app=desktop>

- If MDIs are not available, **DO NOT** administer any nebulized bronchodilators. Instead focus on basic airway management and the use of a BVM.
- CoVID-19 is considered as a droplet-precaution viral disease. However, droplets may be aerosolized by coughing, sneezing, or nebulized medication use (home nebulizer) and remain in the air for several hours. Use an N95 mask on yourself when making patient contact. If the patient is transported, apply a surgical mask to the patient to protect others. Do NOT use an N95 mask on these patients.
- If respiratory status continues to decline and the airway must be secured, DO NOT INTUBATE. Instead, focus on BLS airway management to reduce the risk of personal contamination from respiratory droplets. Insertion of a King Airway is an option, but only indicated for rare cases where BVM ventilation is inadequate.