

Neonatal Drug Guideline

ATROPINE

DESCRIPTION AND INDICATION FOR USE

Atropine is an anticholinergic agent with effects on smooth muscle, cardiac muscle and various glandular cells. It causes increased heart rate, reduced gastrointestinal motility, urinary retention, mydriasis (dilated pupils) and reduced salivation and sweating.

Atropine is used with suxamethonium and morphine or fentanyl prior to intubation to reduce the incidence of bradycardia from vagal stimulation and therefore maintain cerebral perfusion during the procedure.

Effects of atropine can be seen within 30 seconds and may last up to 6 hours.

DOSE

Endotracheal intubation (with suxamethonium and morphine or fentanyl)

IV: 10 to 20 microg/kg/dose, given prior to morphine or fentanyl

Post neonatal period:

If ex-term and >28 days or corrected gestational age > 44/40 refer to AMH Children's Dosing Companion

RECONSTITUTION/DILUTION

Ampoule = 600 microg in 1 mL

IV: No dilution necessary

ROUTE AND METHOD OF ADMINISTRATION

IV: Give over 1 minute. Flush immediately with a sufficient volume of 0.9% sodium chloride to ensure the dose is administered to the patient (and not still contained in the line).

COMPATIBILITY INFORMATION

Please contact your clinical pharmacist for information on drugs or fluids not appearing in the table below. Medications that are not routinely used in the Special Care Nursery have not been included in this table and may be incompatible.

	Compatible	Incompatible
Fluids	Dextrose 5%, Dextrose 10%, Sodium chloride 0.9%	No information
Drugs	Dobutamine, fentanyl, heparin, potassium chloride, morphine	Adrenaline, flucloxacillin, noradrenaline, sodium bicarbonate

SIDE EFFECTS

- Cardiac arrhythmias
- Dilated pupils
- Dry mouth, abdominal distension with reduced intestinal motility, oesophageal reflux

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SPECIAL PRECAUTIONS

CONTRAINDICATIONS

- Tachycardia secondary to cardiac insufficiency or thyrotoxicosis, cardiospasm
- Paralytic ileus, obstructive disease of the gastrointestinal/urinary tract
- Myasthenia gravis

DRUG INTERACTIONS

Single doses for use in the intubation sequence are unlikely to have clinically significant drug interactions

NURSING RESPONSIBILITIES

- Observations/Monitoring:
 - Cardio-respiratory monitoring
 - Monitor urinary output and bowel actions
 - Observe for signs of feed intolerance
 - Strict mouth care