

# PhenyLEPHRine

## Classification

Sympathomimetic

## Indications

- ACP: Maintenance of blood pressure in acute hypotensive states, or shock following adequate fluid volume replacement

## Contraindications

- Known hypersensitivity or allergy to phenylephrine
- Hypersensitivity to sulfites (contained in the product preparation)
- Severe hypertension or ventricular tachycardia
- Pheochromocytoma

## Adult dosages

- ACP: Maintenance of blood pressure in acute hypotensive states, or shock following adequate fluid volume replacement
- 100 mcg IV slow push every 2-5 minutes to maximum of 500 mcg
- Administer dose over 20-30 seconds
- If higher doses are required, consult with ClinCall

## Pediatric Considerations And Dosing

Not authorized. Consider the use of push-dose epinephrine in these patients.

## Mechanism Of Action

Agonizes alpha-adrenergic receptors producing arterial vasoconstriction

## Pharmacokinetics

Intravenous:

- Onset: rapid
- Duration: 15-20 minutes

## Adverse Effects

- Headache
- Nervousness
- Reflex bradycardia
- Nausea and vomiting
- Paresthesia
- May produce significant peripheral or visceral vasoconstriction

## **Warning And Precautions**

Exercise caution when administering phenylephrine to patients with bradycardia, incomplete AV block, or other underlying cardiovascular disease.

Phenylephrine carries a significant risk of sloughing and tissue necrosis if extravasation occurs. Ensure administration line is patent and free-flowing.

Rapid IV administration of phenylephrine may result in development of premature ventricular contractions, ventricular tachycardia, and hypertension.

