			SEVERE SYMPTOMS ³												
	Dose	Autoinjector Products (AI), Note: Select only one combination product (i.e. Atropen ® plus Pralidoxime Autoinjector (AI); <u>OR</u> Mark 1 kit; <u>OR</u> ATNAA Combination AI)						Dose	Autoinjector Products (AI), Note: Select only one combination product (i.e. Atrope plus Pralidoxime Autoinjector (AI); <u>OR</u> Mark 1 kit; <u>OR</u> ATNAA Combination AI)						
Neight bs (kg)	Atropine 0.05mg/k Pralidoxime 25mg/kg	Pralidoxi	oen ® plus ime 600mg Al ed separately)	Mark 1 Kits (Atro 2mg & Pralidoxi 600mg Al)		2mg/Pr	AA (Atropine alidoxime 600mg mbination Al)	Atropine 0.1 mg/kg Pralidoxime 50mg/kg	Atropen ® plus Pralidoxime 600mg (packaged separate		Mark 1 Kits (Atropine 2mg & Pralidoxime 600mg Al)			<u>ATNAA</u> (Atrop 2mg/Pralidoxime (Combination	
11 lbs (5 kg)	Atropine 0.25mg Pralidoxime 125m		en 0.25mg Pralidoxime	n/a		n/a		Atropine 0.5mg Pralidoxime 250mg	1 Atropen 0.5mg (Blu Pralidoxime follow BPI		n/a			n/a	
22Lbs (10 kg)	Atropine 0.5mg Pralidoxime 250m		0.5mg (Blue): e follow BPFG ⁴	n/a			n/a	Atropine 1mg Pralidoxime 500mg	1 Atropen 1mg (Red Pralidoxime follow BP	·	n	/a		n/a	
44 lbs (20 kg)	Atropine 1mg Pralidoxime 500m		n 1mg (Red): e follow BPFG ⁴	O R n/a	n/a R		n/a	Atropine 2mg Pralidoxime 600mg ²	1 Atropen 2mg (Green) 1 Pralidoxime 600mg A		O R 1 Mark 1 kit		O R	1 ATNAA Combina	
66 lbs (30 kg)	Atropine 1mg ² Pralidoxime 600m		n 1mg (Red): ime 600mg Al	n/a			n/a	Atropine 2mg ² Pralidoxime 600mg ²	1 Atropen 2mg (Green 1 Pralidoxime 600mg		1 Mar 2 Mark	k 1 kit		1 ATNAA Combina	
88 lbs (40 kg)	Atropine 2mg Pralidoxime 600m		2mg (Green): dme 600mg Al	1 Mark 1 kit		1 ATNA	A Combination Al	Atropine 4mg Pralidoxime 1200mg ²	2 Atropen 2mg (Gree 2 Pralidoxime 600mg			: 1 kits		2 ATNAA Combina	
>110 lbs	Atropine 2mg Pralidoxime 600m		2mg (Green): ¢me 600mg Al	1 Mark 1 kit		1 ATNA	A Combination Al	Atropine 6mg Pralidoxime 1800mg ²	3 Atropen 2mg (Green 3 Pralidoxime 600mg		3 Mark	: 1 kits		3 ATNAA Combina	
Bulk	Drug Form		Mild	Symptoms					Severe S						
	ight Atropine 0.4mg/ml Pralidoxime 333mg/ml						Atropir	e 0.4mg/ml	Pralidoxime	a 3331	ng/ml		Diaze	pam 5mg/ml	
lb	s (kg)		Administer IM/IV		Dose Mild 25mg/kg Administer IM/IV			Dose Severe 0 1mg/kg Administer IM/V		Dose Severe 50ma/ka Administer IM/IV		Do: Severe 0.2mg/kg		Dose Administer IN	
		0.25mg/kg	0.6ml	/ Mild 25mg/kg 125mg	Adm	0.4ml	Severe 0.1mg/kg 0.5mg	1.2ml	Severe 50mg/kg	Ad	0.8ml		_	(g Administer IV 0.2ml	
11 lbs (5kg) 22 lbs (10Kg)		0.25mg	0.6mi 1.2ml		125mg 0		0.5mg	2.5ml	250mg 500mg	-	0.8mi 1.5ml	1mg 2mg		0.2mi	
44 lbs (20Kg)		1ma	2.5ml	250mg			2mg	2.5ml	1000mg		3ml	2mg 4mg		0.4mi	
	s (30Kg)	1.5mg	3.8ml	600mg ²			3mg	7.5ml	1500mg		4.5ml	6mg	·	1.2ml	
88 lbs (40Kg)		2mg	5ml	600mg ²	600mg ²		4mg	10ml	1800mg ²		5.4ml	8mg		1.6ml	
	os (>50Kg)	2mg ⁶ 5ml		600mg ²		1.8ml	6ma ²	15ml	1800mg ²		5.4ml	10mg		2ml	

PEDIATRIC DOSING GUIDELINES FOR NERVE AGENTS (Sarin-GB, Soman-GD, Tabun-GA, VX) ANTIDOTES Clinical Symptoms: <u>Mild-Moderate</u>: miosis, rhinorrhea, dyspnea, diaphoresis, vomiting, weakness. <u>Severe</u>: include the a copious secretions, apnea, seizures, severe muscle twitching, paralysis, or coma. copious secretions, apnea, serures, severe muscle twitching, paralysis, or coma. Atropine: Available as 0.4mg/mL; 20mL vials Note: 0.1mg/mL mild symptoms); up to 0.1mg/kg IM (severe symptoms) Note: 0.1mg minimum dose (paradox Adults and children > 14 yrs old : 2mg IM (mild symptoms); up to 0.1mg/kg IM (severe symptoms) "Repeat doses every 2-5 min until an Atropine effect is observed; then doses can be repeated every 1-4 hours to maintain Atropine effect. Note: The number of mL that can be administered IM is < 2; multiple injections may be necessary to achieve appropriate dose. Paradioxing: A vailable as 0.40m viel. Despenditud with Den I de targin were a paral entities to mark time a celutine of 0.40m effet. Note: 0.1mg minimum dose (paradoxical bradycardia) Praidozime: Available as 1Gm vial; Reconstitute with 3mL of sterile water or normal saline to result in a solution of 333mg/mL. Children <14 yrs old: 25mg/kg IM/IV (mild symptoms); up to 50mg/kg IM/IV (severe symptoms) Adults and children > 14 yrs old: 600mg IM/IV (mild symptoms); 1800mg IM/IV (severe symptoms) 2-PAM can cause hypertension when given rapidly IV; administer slowly over 20 minutes to minimize. This hypertension can be rapidly but transiently reversed by phentolamine (adult: 5 mg IV; child: 1 mg IV). *Additional doses titrate based upon response for severe persistent symptoms- repeat as needed every 1-2 hours if muscle weakness is not relieved. Diazepam: For severe symptoms & for all patients that receive 6mg of atropine and/or 1800mg of 2-PAM. Children < 14 yrs old: 0.2mg/kg IM/IV, Adults and children >14 yrs old: One auto-injector (10mg) IM/IV Auto-Injector Formulations: Mark 1TM: Available as 2 auto-injectors; 1 containing Atropine 2mg/0.7mL & 1 containing Pralidoxime (2-PAM) 600mg/2mL. ATNAA (Antidote Treatment- Nerve Agent, Auto-Injector): 2-chambered auto-injector that delivers Atropine 2.1mg in 0.7mL & 2-PAM 600mg in 2mL sequentially using a single needle Note: The Mark I & ATNAA are not approved for pediatric use, but could be initial treatment for children of any age with severe symptoms of nerve agent toxicity. Mild-moderate symptoms should be treated with <u>supportive measures</u> only. Pralidoxime Chloride: Available in a pre-filled syringe containing 2-PAM 600mg in 2mL. References: J Pediat. 2002 Sept;141(3):311-326.; Reterences: J Pediat. 2002 Sept. 141(3):311-326; www.bt.dc.gov/childrer/pd/dworking/exessumm03.pdf; Pediatrics. 2003 Sept.112(3 Pt 1):648-58.; www.dsf.health.state.pa.us/health/lib/health/ems/ems_ib_5.pdf; The Harriet Lane Handbook. 16th ed. St Louis, MO: Mosby;2002:39; J Pediat. 2005 Jan;146(1):8-10.; www.atsf.dc.gov/MHM/mmg166.htm; www.meridianmeds.com/international.html AtroPen® : Available in 4 different strengths of Atropine in color-coded pre-filled auto-injector syringes: 2mg/0.7mL (green) for children and adults >41kg 1mg/0.7mL (dark red) for children 18 to 41 kg 0.5ma/0.7mL (blue) for children 7 to 18 ka For massive exposure and severe symptoms, more than 1 dose to a maximum of 3 may be necessary (for all auto-injectors).
If auto-injectors are not available, dose the 2 medications based on commercial availability (Atropine is administered first).
Note: Atropine & 2-PAM are not always given together-individual patient assessment is necessary for proper treatment of symptoms.
Some market of a dotting the commercial availability (Atropine is administered first). November 1, 2005 erse side of this docu tric dosina re