Magnesium Sulfate

Formulary

Douglas County Kansas EMS System

March 2021

Approved Provider: Paramedic

Referenced Protocols: Breathing Difficulty, Dysrhythmias, OB/Gyn Emergencies

Dosing and Administration

ADULT Medications:

- **Torsades:** 1-2 g IV/IO push
- Refractory VT/VF: 1-2 g IV/IO push
- Pre-Eclampsia:

4 g IV/IO over 20 minutes (60gtts/min in 100cc NS w/10gtt set)

- Eclampsia:
 - 4 g IV/IO over 20 minutes (50qtts/min in 100cc NS w/10qtt set)
- Breathing Difficulty:
 - 1 g IV/IO over 20 minutes (50atts/min in 100cc NS w/10att set)

PEDIATRIC Medications: Refer to HandTevy

- **Torsades:** 25-50 mg/kg IV/IO push
- **Breathing Difficulty:** 25-50 mg/kg IV/IO over 20 minutes (50gtts/min in 100cc NS w/10gtt set)

Pharmacology and Actions:

- Seizures, toxemia of pregnancy: Exact mechanism is not clearly understood. Magnesium
 may decrease the amount of acetylcholine released at the myoneuronal junction,
 resulting in depression of neuromuscular transmission. Magnesium also may have a
 direct depressant effect on smooth muscle and may CNS depression
- Antiarrythmic effect: Magnesium may decrease myocardial cell excitability by contributing to the re-establishment of ionic equilibrium and stabilizing cell membranes. Magnesium also appears to modulate the sodium current, the slow inward calcium current, and at least one potassium current

Indications:

- S/S of severe pre-eclampsia and seizures associated with eclampsia
- Torsades de pointes
- Status Asthmaticus
- Refractory VF/VT

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Contraindications:

Heart block

Precautions:

• Monitor for signs of magnesium toxicity (absent patellar reflexes, respirations < 12/min, chest tightness, dyspnea, ECG changes.)

Administration:

• Acceptable routes include IV/IO

Side Effects:

- Respiratory depression and paralysis of respiratory muscles
- Depress reflexes
- Hypotension
- Heart block
- Hypocalcemia