(breaths per minute)

30–60

24–40

22–34

18–30

Weight (kg)

Atropine

INDUCTION

Etomidate

Ketamine

Propofol

PARALYSIS

Rocuronium

Vecuronium

Lorazepam

MAINTENANCE

Succinylcholine 6mg

PRE

Pediatric Emergency ABC's and More*

http://www.emlrc.org/flpedready/

AIRWAY

Airway Equipment											
ZONE	3 kg	4 kg	5 kg	PIN	RED	PUR	YEL	WHI	BLU	ORG	GRN
Weight (kg)	3	4	5	6-7	8-9	10-11	12-14	15-18	19-23	24-29	30-36
ET Tube (mm)	3.5 unc/	4.0 unc/	4.5 unc/	5.0 unc/	5.5 unc/	5.5 cuff	6.0 cuff				
	3.0 cuff	3.0cuff	3.0 cuff	3.0 cuff	3.0 cuff	3.5 cuff	4.0 cuff	4.5 cuff	5.0 cuff	J.J Cull	0.0 Cull
Lip-Tip (cm)	9-9.5	9.5-10	10-10.5	10-10.5	10.5-11	11-12	12.5-13.5	14-15	15.5-16.5	17-18	18.5-19.5
Suction	8F	8F	8F	8F	8F	8-10F	10F	10F	10F	10F	12F
L-Scope blade	1 St.	2 St./Cvd.	2 St./Cvd	2 St./Cvd	2-3 St./Cvd.	2-3 St./Cvd.					
Stylet	6F	6F	6F	6F	6	6F	10F	10F	10F	14F	14F
Oral Airway	50mm	50mm	50mm	50mm	50mm	60mm	60mm	60mm	70mm	80mm	80mm
NP Airway	14F	14F	14F	14F	14F	18F	20F	22F	24F	26F	26F
BVM	450	450	450	450	450	450	450	450-750	750-100	750-1000	1000
(min vol mLs)	400	700	700	750	700	400	700	700-100	700-100	7 30-1000	1000
LMA	1	1	1	1.5	1.5	2	2	2	2-2.5	2.5	3
<i>Unc</i> = uncuffed											

AGE ESTIMATION CHART						
COLOR	WEIGHT	AGE				
GREY	3-5 kg	< 3 mo				
PINK	6-7 kg	3-5 mo				
RED	8-9 kg	6-11 mo				
PURPLE	10-11 kg	12-24 mo				
YELLOW	12-14 kg	2 yrs				
WHITE	15-18 kg	3-4 yrs				
BLUE	19-23 kg	5-6 yrs				
ORANGE	24-29 kg	7-9 yrs				
GREEN	30-36 kg	10-11 yrs				

I	I .	1.0	1.0					<i>L L</i> .0	2.0
	RSI	MEDICA	ATIONS						
4 kg	5 kg	PINK	RED	PUR	YEL	WHI	BLU	ORG	GRN
4	5	6-7	8-9	10-11	12-14	15-18	19-23	24-29	30-36
0.08mg	0.1mg	0.13mg	0.17mg	0.2mg	N/A	N/A	N/A	N/A	N/A
1.2mg	1.5mg	2mg	2.5mg	3.2mg	4mg	5mg	6.3mg	8mg	10mg
8mg	10mg	13mg	17mg	20mg	26mg	33mg	42mg	53mg	66mg
12mg	15mg	20mg	25mg	32mg	40mg	50mg	63mg	80mg	100mg
8mg	10mg	13mg	17mg	20mg	26mg	33mg	40mg	53mg	66mg
4mg	5mg	7mg	9mg	10mg	13mg	17mg	21mg	27mg	33mg
0.4mg	0.5mg	0.7mg	0.9mg	1mg	1.3mg	1.7mg	2.1mg	2.7mg	3.3mg
0.2mg	0.25mg	0.3mg	0.4mg	0.5mg	0.6mg	0.8mg	1mg	1.3mg	1.6mg
	4 kg 4 0.08mg 1.2mg 8mg 12mg 8mg 4mg 0.4mg	4 kg 5 kg 4 5 0.08mg 0.1mg 1.2mg 1.5mg 8mg 10mg 12mg 15mg 8mg 10mg 4mg 5mg 0.4mg 0.5mg	RSI MEDICA 4 kg 5 kg PINK 4 5 6-7 0.08mg 0.1mg 0.13mg 1.2mg 1.5mg 2mg 8mg 10mg 13mg 12mg 15mg 20mg 8mg 10mg 13mg 4mg 5mg 7mg 0.4mg 0.5mg 0.7mg	RSI MEDICATIONS 4 kg 5 kg PINK RED 4 5 6-7 8-9 0.08mg 0.1mg 0.13mg 0.17mg 1.2mg 1.5mg 2mg 2.5mg 8mg 10mg 13mg 17mg 12mg 15mg 20mg 25mg 8mg 10mg 13mg 17mg 4mg 5mg 7mg 9mg 0.4mg 0.5mg 0.7mg 0.9mg	RSI MEDICATIONS 4 kg 5 kg PINK RED PUR 4 5 6-7 8-9 10-11 0.08mg 0.1mg 0.13mg 0.17mg 0.2mg 1.2mg 1.5mg 2mg 2.5mg 3.2mg 8mg 10mg 13mg 17mg 20mg 12mg 15mg 20mg 25mg 32mg 8mg 10mg 13mg 17mg 20mg 4mg 5mg 7mg 9mg 10mg 0.4mg 0.5mg 0.7mg 0.9mg 1mg	RSI MEDICATIONS 4 kg 5 kg PINK RED PUR YEL 4 5 6-7 8-9 10-11 12-14 0.08mg 0.1mg 0.13mg 0.17mg 0.2mg N/A 1.2mg 1.5mg 2mg 2.5mg 3.2mg 4mg 8mg 10mg 13mg 17mg 20mg 26mg 12mg 15mg 20mg 25mg 32mg 40mg 8mg 10mg 13mg 17mg 20mg 26mg 4mg 5mg 7mg 9mg 10mg 13mg 0.4mg 0.5mg 0.7mg 0.9mg 1mg 1.3mg	RSI MEDICATIONS 4 kg 5 kg PINK RED PUR YEL WHI 4 5 6-7 8-9 10-11 12-14 15-18 0.08mg 0.1mg 0.13mg 0.17mg 0.2mg N/A N/A 1.2mg 1.5mg 2mg 2.5mg 3.2mg 4mg 5mg 8mg 10mg 13mg 17mg 20mg 26mg 33mg 12mg 15mg 20mg 25mg 32mg 40mg 50mg 8mg 10mg 13mg 17mg 20mg 26mg 33mg 4mg 5mg 7mg 9mg 10mg 13mg 17mg 0.4mg 0.5mg 0.7mg 0.9mg 1mg 1.3mg 1.7mg	RSI MEDICATIONS 4 kg 5 kg PINK RED PUR YEL WHI BLU 4 5 6-7 8-9 10-11 12-14 15-18 19-23 0.08mg 0.1mg 0.13mg 0.17mg 0.2mg N/A N/A N/A 1.2mg 1.5mg 2mg 2.5mg 3.2mg 4mg 5mg 6.3mg 8mg 10mg 13mg 17mg 20mg 26mg 33mg 42mg 12mg 15mg 20mg 25mg 32mg 40mg 50mg 63mg 8mg 10mg 13mg 17mg 20mg 26mg 33mg 40mg 8mg 10mg 13mg 17mg 10mg 13mg 17mg 21mg 0.4mg 0.5mg 0.7mg 0.9mg 1mg 1.3mg 1.7mg 2.1mg	RSI MEDICATIONS 4 kg 5 kg PINK RED PUR YEL WHI BLU ORG 4 5 6-7 8-9 10-11 12-14 15-18 19-23 24-29 0.08mg 0.1mg 0.13mg 0.17mg 0.2mg N/A N/A N/A N/A N/A 1.2mg 1.5mg 2mg 2.5mg 3.2mg 4mg 5mg 6.3mg 8mg 8mg 10mg 13mg 17mg 20mg 26mg 33mg 42mg 53mg 8mg 10mg 13mg 17mg 20mg 26mg 33mg 40mg 53mg 4mg 5mg 7mg 9mg 10mg 13mg 17mg 21mg 27mg 0.4mg 0.5mg 0.7mg 0.9mg 1mg 1.3mg 1.7mg 2.1mg 2.7mg

J				
	Infants	Adults		
Head	Large prominent occiput—flexed neck	Flat occiput		
Tongue	Relatively larger	Relatively smaller		
Epiglottis	Omega sign or "U" shape	Flat, flexible		
Vocal Cords	Short, concave	Perpendicular to trachea		
Smallest Diameter	Cricoid ring, below cords	Vocal cords		
Cartilage	Soft	Firm		
Secretions	Increased	Normal		
Main Breathing	Preferential nose	Either, mainly		
Orifice	breathers	mouth		

BREATHING

Ventilator Settings											
Zone	3 kg	4 kg	5 kg	PINK	RED	PUR	YEL	WHI	BLU	ORG	GRN
Tidal Vol. (mL)	20-30	24-40	30-50	40-65	50-85	65-105	80-130	100-165	125-210	160-265	200-330
Ventilator Rate (BPM)	20-25	20-25	20-25	20-25	20-25	15-25	15-25	15-25	12-20	12-20	12-20
Insp. Time (sec)	0.6	0.6 0.6 0.6 0.6 0.7 0.7 0.7 0.8 0.8									
PEEP		3-5 cm; Avoid peak pressures >40 or mean >30									
PIP	Start a	t 16, av	g. 20-30	cm, in	crease	by increr	nents of 2	2 until app	ropriate m	inute ventila	ation

Mechanical Ventilation Considerations

Fixed pressure; variable volume w/every sensed breath. Tidal volume set; delivered w/ a decelerating flow pattern to

Pressure Control:

Volume Control:

Control Modes- all breaths controlled

PRVC: (Pressure Regulated Volume Control):

try to keep peak pressure under a set limit.

Set pressure over PEEP for each breath.

any type of breath (PRVC, PC or VC).

Set TV delivered at constant flow rate—Seldom used.

SIMV: (Synchronized Intermittent Mandatory ventilation):

A hybrid between Control and Support. A portion of the

breaths (the SIMV breaths) are controlled, the remaining

spontaneous breaths are supported. SIMV can be done w/

Adol	escent (12–18yrs)		12–16		
	Chest Tu	be Sizes			
Weight (kg)	Pneumothorax/Tra	nsudate	Exudate	Pigta 5F-12	
<3	8-10		10-12	8.5	
3-8	10-12		12-16	8.5	
8-15	12-16		16-20	10-12	2
16-40	16-20		20-28	12-1	4
>40	20-24		28-36	12-1	4

Normal Pediatric Respiratory Rates

Infant (birth-1yr)

Toddler (1–3yrs)

Preschooler (3–6yrs)

School-age (6-12yrs)

	way Inemonic
D islodged tube	
Obstructed tube	
Pneumothorax	
Equipment failure	е

Lund and Browder Burn Chart

Half of Half of one Half of one lower leg

CIRCULATION

			Pediatric ECG Values								
Initial Mainte	nance Fluid Rates	Age	Heart Rate (bpm)	QRS Axis (degrees)	PR interval (sec)	QRS Duration (sec)	R V1 mm	S V1 mm	R V6 mm	S V6 mm	SV1-RV6 mm
Bodyweight (kg)	Maintenance Rate	44 1			0.00.0.40.(0.44)	,	F 07 (4.4)	0.5.00.(0)	0.40 (5)	0.0.40 (4)	
0-10	4 mL/kg/hr	<1 day	94-155 (122)	58-168 (+135)	0.08-0.16 (0.11)	0.03-0.07 (0.05)	5-27 (14)	0.5-23 (9)	0-12 (5)	0.2-10 (4)	2-27 (13)
	40 mL/ + 2 mL/kg/hr for	1-3 days	91-158 (124)	65-171 (+134)	0.08-0.14 (0.11)	0.03-0.07 (0.05)	5-27 (15)	0.5-21 (10)	0.1-12 (5)	0.2-10 (3)	2-28 (14)
11-20	each kg over 10 kg	3-7 days	90-166 (128)	76-168 (+133)	0.07-0.14 (0.10)	0.03-0.07 (0.05)	3-25 (13)	0.5-17 (7)	0.5-12 (5)	0.4-10 (4)	2-25 (12)
	60 mL/ + 1 mL/kg/hr for	7-30 days	106-182 (148)	65-159 (+110)	0.07-0.14 (0.10)	0.03-0.08 (0.05)	3-22 (11)	0.5-14 (14)	3-17 (8)	0.2-10 (3)	3-22 (12)
21-70	each kg over 20 kg	1-3 mo	120-179 (149)	31-115 (+75)	0.07-0.13 (0.10)	0.03-0.08 (0.05)	3-19 (10)	0.5-13 (5)	5-22 (12)	0.3-7 (3)	6-29 (17)
Ex: Maintenanc	e rate for a 15 kg child	3-6 mo	105-185 (142)	7-105 (+60)	0.07-0.15 (0.11)	0.03-0.08 (0.05)	3-20 (10)	0.5-17 (6)	6-23 (14)	0.2-10 (3)	7-35 (19)
40 + 10 (5	$(g \times 2) = 50 \text{ mL/hr}$	6-12 mo	107-168 (132)	7-98 (+54)	0.07-0.15 (0.11)	0.03-0.08 (0.05)	2-20 (9)	0.5-18 (7)	6-23 (13)	0.2-8 (2)	7-33 (19)
or see weight/leng	gth-based dosing system)	1-3 yrs	90-151 (119)	8-100 (+55)	0.08-0.15 (0.11)	0.04-0.08 (0.06)	3-18 (9)	1-21 (9)	6-23 (14)	0.1-7 (2)	7-38 (22)
		3-5 yrs	73-137 (108)	7-104 (+55)	0.09-0.16 (0.12)	0.04-0.08 (0.06)	2-18 (8)	2-22 (10)	9-25 (15)	0.1-6 (2)	13-42 (25)
Cardiac Ar	rest Medications	5-8 yrs	65-133 (100)	10-140 (+66)	0.09-0.16 (0.12)	0.04-0.08 (0.06)	1-13 (7)	3-24 (12)	9-27 (17)	0.1-4 (1)	13-47 (28)
Dopamine		8-12 yrs	63-129 (92)	9-115 (+61)	0.09-0.16 (0.13)	0.04-0.09 (0.06)	0.5-10 (6)	3-26 (12)	10-26 (17)	0-4 (1)	15-45 (28)
Drip	2-20 mcg/kg/minute	12-16 yrs	66-120 (86)	11-133 (+58)	0.09-0.18 (0.14)	0.04-0.09 (0.07)	0.5-10 (5)	3-22 (11)	7-23 (15)	0-4 (1)	11-42 (25)

Drip	2-20 mcg/kg/minute		12-16 yrs	66-120 (86)	
Epinephrine	0.01 mg/kg <i>OR</i> 0.1 mL/kg of 1:10,000 conc	en	itration q 3	-5 min	
Epinephrine Drip	0.1-2 mcg/kg/minute				

	Pediatric Arrhythmia Management				
Dofibrillation	1st shock 2 J/kg, 2nd shock 4 J/kg, subsequent shocks >/=4 J/kg,				
Defibrillation	max 10 J/kg or adult max dose				
SVT	Start at 0.5-1 J/kg, if not effective, increase to 2 J/kg				
QTc = QT (sec)/ $\sqrt{RR(sec)}$ = 0.xyz(sec) = xyz (milli sec)					

Blood Transfusion Formula (1 unit pRBC's ≈ 250-300 ml's)

Vol to be transfused (mls) = Patient Weight (kg) x Aimed for increment of Hb (g/dl) x 5

Or 10-20 ml/kg for hemorrhagic shock

Pediatric Blood Pressure					
Hypotension	= <70 + (ag	ge in years	s x 2)		
Normal BP Ranges	Systolic	Diastolic	Mean Arterial		
Normal Di Ranges	(mm Hg)	(mm Hg)	(mm Hg)		
Birth (12hr-<1000g)	39-59	16-36	28-42		
Birth (12hr, 3kg)	60-76	31-45	48-57		
Neonate (96hr)	67-84	35-53	45-60		
Infant (1-12m)	72-104	37-56	50-62		
Toddler (1-2yr)	86-106	42-63	49-62		
Preschooler (3-5yr)	89-112	46-72	58-69		
School-aged child (6-7yr)	97-115	57-76	66-72		
Pre-adolescent (10-12yr)	102-120	61-80	71-79		
Adolescent (13-15yr)	110-131	64-83	73-84		

De distric Diseasi De

AVPU Awake Responds to **V**erbal Stimulation Responds to Painful stimulation

Support Modes- spontaneous breathing

CPAP: (Continuous Positive Airway Pressure)

NAVA: (Neurally Adjusted Ventilatory Assist)

Non-invasive Ventilation: (Bipap™)

The ventilator always maintains pressure in the circuit;

Support varies depending on sensed diaphragmatic effort.

Can have different inspiratory & expiratory pressures, or

patient takes breath —> ventilator increases flow.

Fixed TV; pressure variable w/every senses breath-based

Pressure Support:

Volume Support:

straight CPAP.

on proximity to goal vol.

Celsius to Fahrenheit Conversion Chart						
CELSIUS (°C)	FAHRENHEIT (°F)		CELSIUS (°C)	FAHRENHEIT (°F)		
26	78.8		35	95		
27	80.6		36	96.8		
28	82.4		37	98.6		
29	84.2		38	100.4		
30	86		39	102.2		
31	87.8		40	104		
32	89.6		41	105.8		
33	91.4		42	107.6		
34	93.2		43	109.4		
Conversion Equation: ${}^{0}\text{C x } 1.8 + 32 = {}^{0}\text{F}$ OR ${}^{0}\text{F} - 32 / 1.8 = {}^{0}\text{C}$						

Conversion Equation:						
0 C x 1.8 + 32 = 0 F $-$ 32 /1.8 = 0 C						
ABUSE: TEN 4 FACES P						

ABUSE: TEN 4 FACES P Any bruising to the:		Burn Resuscitation Fluid Rates/Target Urine Output By Type & Age				
	oning to the.	Category of Burn	Age/weight	Adjusted Fluid Rates	Urine Output	
Torso, Ears, or Neck	4 yrs or under		Adults/Child (≥14yo)	2ml LR x kg x % TBSA	0.5ml/kg/hr	
			Addits/Clilid (214y0)	ZIIII LIN X NG X 70 TDOA	30-50ml/hr	
Frenulum, Angle of jaw, Cheek, Eyelid, Sclera		Flame or Scald	Child <14yo	3ml LR x kg x % TBSA	1ml/kg/hr	
				2ml LR x kg x % TBSA		
Pattern			Infants and young child (≤30kg)	+ sugar containing solution	1ml/kg/hr	
Or <u>ANY</u> bruising <u>4</u> months or under		orma (=ookg)		at maintenance rate		
		Electrical		4ml LR x kg x % TBSA until	1-1.5ml/kg/hr until	
is a <u>significant indi</u>	is a <u>significant indicator</u> of child abuse.		ALL AGES	urine clears	urine clears	

DISABILITY/ENVIRONMENT

	PEDIATRIC GLASGOW COMA SCALE (PGCS)					Half of	Half of one	Half of one lower leg
		Infant <1yr	Child 1-4 yrs	4-Adult		head (A)	thigh (B)	(C)
	Eyes			0 yr	9 1/2	2 3/4	2 1/2	
	4	Open	Open	Open		0.440	2 111	0.440
	3	To voice	To voice	To voice	1 yr	8 1/2	3 1/4	2 1/2
	2	To pain	To pain	To pain	5 yr	6 //2	4	2 3/4
	1	No response	No response	No response	10 yr	5 1/2	4 1/4	3
Т			Verbal		10 yi	0 1/2	4 1/4	3
	5	Coos, babbles	Oriented, Speaks, interacts	Oriented and Alert	15 yr	4 1/2	4 1/4	3 1/4
	4	Irritable cry, consolable	Confused speech, disoriented, consolable	Disoriented	Relative percentage of body surface area (%BSA) affective growth			area (%BSA) affected by
	3	Cries persistently to pain	Inappropriate words, inconsolable	Nonsensical speech	Do not include Superficial (first-degree) burns such as erythema or sunburns			
	2	Moans to pain	Incomprehensible, agitated	Moans, unintelligible				(A)
	1	No response	No response	No response				
			Motor					1.1.1
	6	Spontaneous movement	Spontaneous movement	Follows commands				
	5	Withdraws to touch	Localizes pain	Localizes pain		2 / 13 / 2		
	4	Withdrawals to pain	Withdrawals to pain	Withdrawals to pain	ain /2 13 /13			11/2
	3	Decorticate flexion	Decorticate flexion	Decorticate flexion	11/2	21/2 / 21/2		
	2	Decerebrate extension	Decerebrate extension	Decerebrate extension	Givis Land	(T)	Tim Ecil	
	1	No response	No response	No response	B B B			\·-{}{

	A A A A A A A A A A A A A A A A A A A
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الساق السام	(C) (D)
Seizure & ICP	Medications
3% Saline: 2-5 ml/kg IV ov	/er 20 min (max 250 ml)
Mannitol:1 g/kg IV (infuse	with filter)
Levetiracetam: 50-60 mg/	/kg IV (max 4500 mg)
Lorezepam: IV 0.1 mg/kg	(max 4mg)
Fosphenytoin: 20 mg PE/	/kg IV (max 1500mg PE)

*Disclaimer: This resource is provided for educational and informational purposes only. It is not intended as a substitute for professional medical diagnosis or management by a qualified health care professional medical diagnosis or management by a qualified health care professional. As new research and clinical guidelines becomes available, patient safety standards will change. Therefore, it is strongly recommended that physicians, nurses and other healthcare professionals remain current on medical literature and national standards of care and structure their treatment accordingly. As a result of ongoing medical advances and developments, this resource and information on this site is provided on an "as is" and "as available" basis. Patient care must be individualized. The use of information obtained or downloaded from or through this website is at the user's sole discretion and risk.

Weight (kg —> lbs)

(kg) (lbs)

37.5 82.7

40 88.2

42.5 93.7

45 99.2

47.5 | 104.7

50 110.2

52.5 115.7

57.5 126.8

62.5 137.8

70 | 154.3

72.5 | 159.8

75 165.3

Arterial Line Catheter Size by Age/Weight

Weight (kg) | Gauge/French/Length

24 G or 2.5 F;

2.5 cm

22 G or 2.5 F;

2.5 cm

20 G

French

Gauge

4.0-5.0

5.0-8.0

Parameter

Obtunded/LOC

Closed fracture

Coma/decerebrate

Category

Length

(cm)

5-12

5-25

5-30

77.5 | 170.9

10 - 40 kg

>40 kg

Parameter Score Clinical

Central Venous Line Catheter Size by Age/Weight

Catheter

Gauge

16-20

Pediatric Trauma Score

Parameter

Open Wound Minor

Skeletal

(lbs)

16.5

27.6

33.1

44.1

49.6

55.1

60.6

66.1

71.7

77.2

Infant

Child

Adolescent

Age (years)

< 1, newborn

3-8

Parameter Category

Weight (kg) 10-20

Airway

(mmHg)

1 kg = 2.20 lbs



http://www.emlrc.org/flpedready/

PAIN MANAGEMENT & SEDATION

Acute Pain Medications				
Generic (Brand)	Pediatric (<12 yo)			
Acetaminophen (Tylenol®)	15 mg/kg PO q 4-6 h Max: 90 mg/kg/day			
Acetaminophen IV (Ofirmev®) Use only if not tolerating PO	<50 kg 15 mg/kg IV q 6 h or 12.5 mg/kg IV q 4 h prn pain Max: 75mg/kg/day			
Ibuprofen (Motrin®) (> 6 months)	10 mg/kg PO q 6 to 8 h Max: 40 mg/kg/day or 2400 mg/day			
Ketorolac (Toradol®) (> 6 months)	0.5-1 mg/kg/ dose IM/IV q 6 h Max: 15-30 mg q 6 h x 5 day			
Naproxen (Naprosyn®) (> 2 years)	5 mg/kg PO q 12 h Max: 1000 mg/day			
Morphine	IV 0.1 mg/kg q 2-4 h			
Hydromorphone (Dilaudid®)	IV 0.015 mg/kg q 4 h			
Fentanyl	IV 1-2 mcg/kg q 1-2 h (max 50 mcg/dose)			
Hydrocodone/APAP 325 mg (Norco 5, 7.5, 10 tabs) Hycet (7.5 mg/325 mg per 15 mL)	0.1-0.2 mg/kg q 4-6 h			
Intranasal Medications				

15 ml	_)		
	Intranasal Me	dications	
Generic	Dose	Max Dose	Comments
Fentanyl	IN: 1.5-2 mcg/kg q 1-2 h Neb: 1.7-3 mcg/kg	3 mcg/kg or 100 mcg	Use most concentrated form with an
Midazolam (5 mg/mL)	IN: 0.3 mg/kg	10 mg or 1 mL per nostril (total 2 mL)	atomizer. 1 mL/nare max Divide dose equally between each nare.

Ketamine (Ketalar®)				
Indications Starting Dose				
Procedural Sedation	IV: 1-2mg/kg;			
Procedural Sedation	IM: 4-5 mg/kg			
	IV: 0.1 to 0.3 mg/kg;			
Sub-dissociative Analgesia	IM: 0.5-1.0 mg/kg; * IN: 0.5-1.0 mg/kg			
Excited Delirium	11/1 1 ma/ka: 11/1 1 5 ma/ka			
Syndrome	IV: 1 mg/kg; IM: 4-5 mg/kg			

Nonpharmacologic Interventions*					
Physical (Sensory) Interventions Cognitive-Behavioral Interventions					
Comfort positioning	Psychological preparation, education, or coaching				
Cutaneous stimulation	Distraction tools: movies, games, videos, apps, toys with light/sound, bubbles				
Nonnutritive sucking	Relaxation techniques (breathing, meditation, etc.)				
Pacifier +/- sucrose solution	Music and singing				
Pressure, massage	Guided imagery				
Hot or Cold treatments	Conversation and therapeutic language				
*Used alone or in conjunction with pharmacologic interventions, Intervention based on age,					

Usea alone or in conjunction with pharmacologic interventions. Intervention basea on age, developmental stage, setting and situation.

For more information on nonpharmacologic interventions or to download a distraction toolkit, visit

http://pami.emergency.med.jax.ufl.edu/resources/new-approaches-to-pain-course/







p://pami.emergency.med.jax.ufl.edu

	Procedural Sedation and Ana	lgesia
Generic (Brand)	Pediatric	Comments
Ketamine (Ketalar®)	>3 mo: IV 1-2 mg/kg; additional doses 0.5 mg/kg IV q 10-15 min prn; IM 4 - 5 mg/kg	Risk of laryngospasm increases with active asthma, upper respiratory infection and procedures involving posterior pharynx; vomiting occurs, commonly consider premedication. Not recommended in patients < 3 mo.
Midazolam (Versed®)	IV 0.05-0.1 mg/kg IN 0.2-0.3 mg/kg (IN max 10 mg)	Initial max dose 2 mg.
Propofol (Diprivan®)	IV 1 mg/kg slow push (1-2 min); additional doses 0.5 mg/kg	Risk of apnea, hypoventilation, respirator depression, rapid changes in sedative dephypotension; provides no analgesia
Etomidate (Amidate®)	Risk of myoclonus (premedication w/ benzo or opioi and vomiting, risk of adrenal suppres	
Ketamine + Propofol	IV ketamine 0.75 mg/kg + propofol 0.75 mg/kg. Additional doses: ketamine 0.5 mg/kg, propofol 0.5-1 mg/kg	See ketamine and propofol comments respectively
Dexmedetomidine (Precedex®)	IV 0.5–2 mcg/kg loading dose (over 10 min) followed by 0.5 to 2 mcg/kg/h continuous infusion IN 2-3 mcg/kg	Risk of bradycardia, hypotension, especia with loading dose or rapid infusions, apneabronchospasm, respiratory depression
Nitrous oxide	50% N2O/50% O2 inhaled	Do not use if acute asthma exacerbation suspected pneumothorax/other trapped a or head injury with altered level of consciousness
Morphine	IV 0.1-0.2 mg/kg, titrated to effect	Monitor mental status, hemodynamics, and histamine release. Requires longer recover time than fentanyl. Difficult to titrate during procedural sedation due to slower onset all longer duration of action. Reduce dosing when combined with benzodiazepines (combination increases risk of respiratory compromise)
Fentanyl	1-3 yo: 2 mcg/kg; 3-12 yo 1-2 mcg/kg	100 times more potent than morphine; Rap bolus infusion may lead to chest wall rigidinal Reduce dosing when combined with benzodiazepines and in elderly. Preferred agent due to rapid onset and short duration

COMMON PEDIATRIC PAIN SCALES

Wong-Baker FACES® Pain Rating Scale					
			(O)		0000
0	2	4	6	8	10
No Hurt	Hurts Little Bit	Hurts Little More	Hurts Even More	Hurts Whole Lot	Hurts Worst

	FLACC SCALE						
	0 1 2						
1	FACE	No particular expression or smile	Occasional grimace or frown, withdrawn or disinterested	Frequent to constant frown, clenched jaw, quivering chin			
2	LEGS	Normal position; relaxed	Uneasy, restless, tense	Kicking or legs drawn up			
3	ACTIVITY	Lying quietly, normal position, easily moves	Squirming, shifting back and forth, tense	Arched, rigid or jerking			
4	CRY	None (awake or asleep)	Moans or whimpers, occasional complaint	Crying steadily, scream or sobs, frequent complaints			
5	CONSOLABILITY	Content, relaxed	Reassured by occasional touching, hugging or being spoken to, distractible	Difficult to console or comfort			

MISCELLANEOUS INFORMATION

Death Communication Tips: GRIEV_ING*

G- gather the family/community; insure that all members are present or identify representatives,

· Gather your inner strength (who if not you?) and Gather your team- 2 minimum, Doctor, if possible.

R- resources; call for support resources available to assist the family/community with their grief or the disaster at hand, i.e. community, hospital, chaplain services, ministers, family, and friends. Create list of resources.

- identify yourself, identify the deceased or injured patient by name, identify the situation, and identify the state of knowledge of the family relative to the events of the day. Identify that you are bringing bad news.

E- educate; briefly educate the family as to the events that have occurred, educate them about the current state of their loved one(s), educate others about how they can help and not create more chaos.

V- verify that their family member has died or other events/bad news. Be clear! Use the words dead or died, missing, etc. No jargon. Be honest.

Space-give the family/community personal space and time for an emotional moment; allow the family time to absorb the information. Stop talking. Family may scream, hit, etc. Protect yourself.

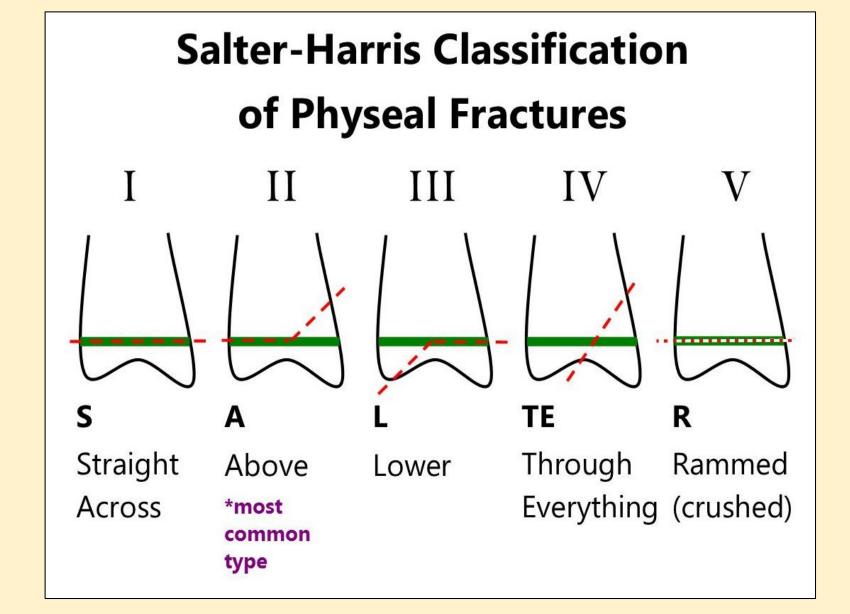
• inquire; ask if there are any questions and answer them to the best of your ability. You don't have to be perfect. You may not have all the answers.

N- nuts and bolts; preparation; inquire about organ donation, funeral services, and personal belongings. Offer family opportunity to view the body/the site.

G- give them your card, hospital or community information. Offer to answer questions that may arise later. Return their call or establish a call center/resource. *adapted from Hobgood, C. The educational intervention "GRIEV_ING" improves the death notification skills of residents. Acad Emerg Med. 2005 Apr;12(4):296-301.

Lab test

<12 mo



Normal WBC Values					
	White Blood Cells				
Age	(x 10 ³ /µL)				
Birth	9-30				
1-3 days	9-38				
4-7 days	5-21				
7-14 days	5-20				
15-60 days	5-20				
2-5 months	5.5-18				
6 months-1yr	6.0-17.5				
1-3 years	6.0-17.0				
3-5 years	5.5-15.5				
6-10 years	4.5-14.5				
10-15 years	4.5-13.5				
15-20 years	4.5-12.5				

ore	15-20 years		4.5-12.5		
OI C		Hemoglobin/Hematocrit Normal Pediatric Values			
		Normai	Pediatric	values	
2		Age	Hemoglobin	Hemato	
1		, ,	(g/dL)	(%)	
1		Term	18.0-21.5	51-68	
	newborn 10.0-21	10.0-21.3	.0		
0		1-3 days	14.0-24.0	43-68	
2		4-7 days	14.3-22.3	42-62	
1		7-14 days	12.9-20.5	39-59	
-1		14-60 days	10.7-17.3	33-5	
		2-5 months	10.1-14.5	30-40	
2		6 months-1yr	10.0-13.2	30-39	
1		1-2 years	10.0-13.5	30-40	
		2-4 years	10.5-14.5	32-42	

10.9-14.9

10-15 years 11.4-15.4 34-45

	12 1110	10 10 0/2	10 10 0/2
	1–3 yr	5–45 U/L	5–45 U/L
	4–6 yr	10–25 U/L	10–25 U/L
	7–11 yr	10–35 U/L	10–35 U/L
ALI	12–13 yr	10-30 U/L (female)	10–30 U/L
		10-55 U/L (male)	10–55 U/L
	>14 yr	5-30 U/L (female)	5–30 U/L
		10–45 U/L (male)	10–45 U/L
	Infant	150–420 U/L	150–420 U/L
ALKALINE PHOSPHATASE		100–320 U/L	100–320 U/L
	Adolescent	100–390 U/L	100–390 U/L
	Adult	30–120 U/L	30–120 U/L
	Newborn	90–150 mcg/dL	64-107 µmol/L
AMMONIA		79–129 mcg/dL	56–92 μmol/L
	Infant/child	29–70 mcg/dL	21–50 µmol/L
	Adult	15–45 mcg/dL	11–32 µmol/L
	0–14 days	3–10 U/L	3–10 U/L
AMYLAS	15 days–13 wk	2–22 U/L	2–22 U/L
, 2 ,	13 wk–1 yr	3–50 U/L	3–50 U/L
	>1 yr	25–101 U/L	25–101 U/L
	0–10 days	47–150 U/L	47–150 U/L
AST	10 days–24 mo	9–80 U/L	9–80 U/L
	>24 mo	15–40 U/L	15–40 U/L
	Newborn	17-24 mEq/L	17–24 mmol/L
BICARBON	Infant	19–24 mEq/L	19–24 mmol/L
	2 mo–2 yr	16-24 mEq/L	16–24 mmol/L
	>2 yr	22-26 mEq/L	22–26 mmol/L
	Preterm	20–60 mg/dL	1.1–3.3 mmol/L
	Newborn, <1 day	40–60 mg/dL	2.2–3.3 mmol/L
GLUCOS	Newborn, >1 day	50–90 mg/dL	2.8–5.0 mmol/L
	Child	60–100 mg/dL	3.3–5.5 mmol/L
	>16 yr	70–105 mg/dL	3.9–5.8 mmol/L
	Age	WBC Count/µL (median)	95th Percentile
CSF	0–28 days	0–12(3)	19
	29–56 days	0–6 (2)	9
	Child	0–7	
Turners			

Key Pediatric Lab Values

13–45 U/L

Conventional Units

SI units

13–45 U/L



To learn more about this resource email pedready@jax.ufl.edu or visit http://www.emlrc.org/flpedready/