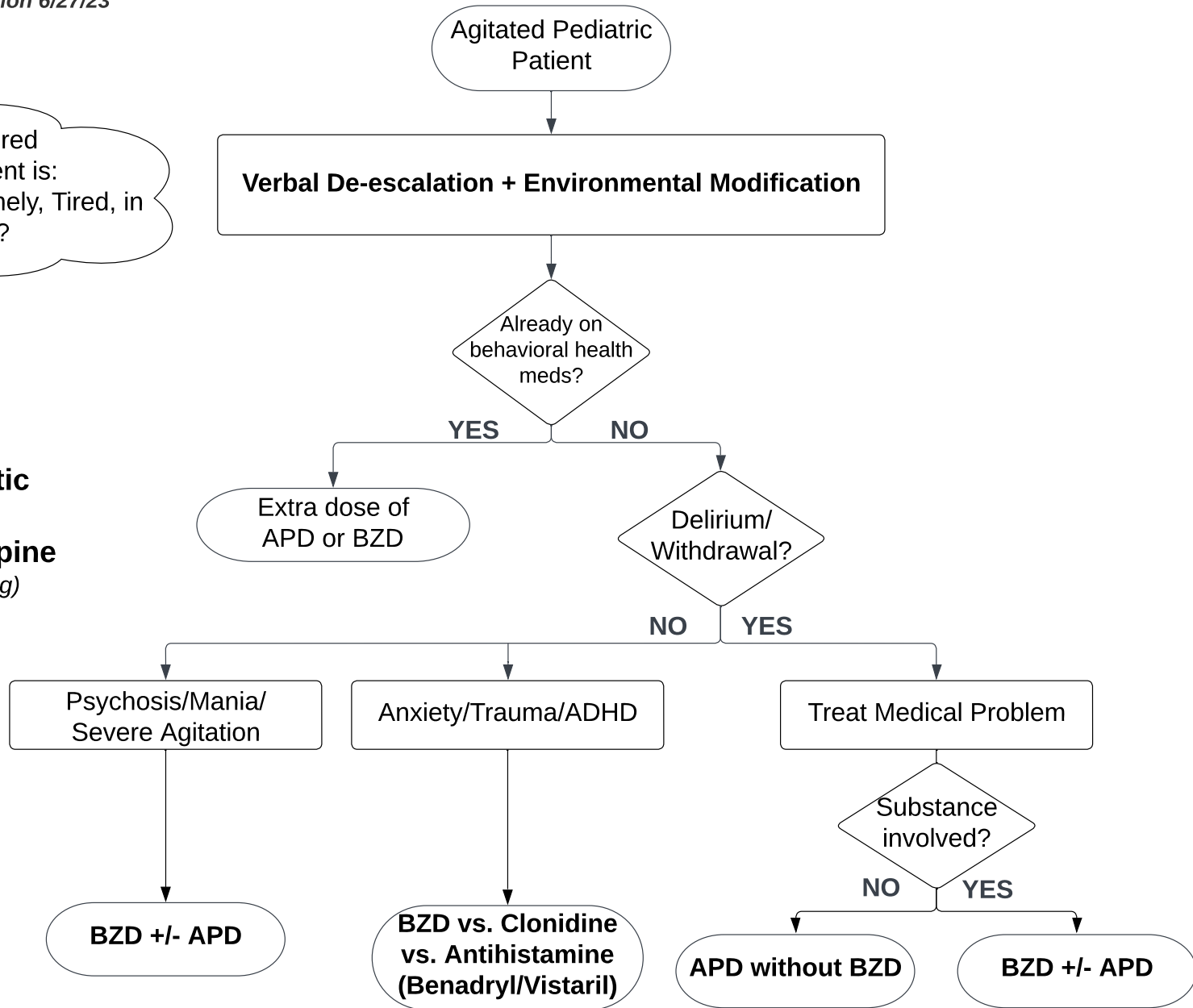


# PED/PES Acute Agitation Pathway

Version 6/27/23

Have we considered that the patient is:  
• Hungry, Angry, Lonely, Tired, in Pain?

**APD= Antipsychotic Drug**  
**BZD= Benzodiazepine**  
(See next page for dosing)



## Medications for Acute Agitation

Medication	Dose	Peak effect	Max daily dose	Notes/monitoring
Diphenhydramine <b>[Benadryl]</b> (antihistamine)	PO/IM: 12.5-50mg 1 mg/kg/dose TID-QID PRN (50 mg max per dose)	PO: 2 hours	Child: 50-100 mg Adolescent: 100-200 mg	Avoid in delirium
Hydroxyzine <b>[Hydoxyzine]</b> (antihistamine)	PO/IM: < 6 years: 0.5 mg/kg q6h PRN (maximum dose: 12.5 mg q6h PRN) ≥ 6 years: 0.5 mg/kg q6h PRN (maximum dose: 25 mg q6h PRN) IV: Contraindicated	PO: 2 hours	< 6 years: Maximum 50 mg/day ≥ 6 years: Maximum 100 mg/day	May prolong QTc IM route not preferred – if using IM administer in thigh only (NO gluteal administration) Do NOT give IV (vesicant)
Lorazepam <b>[Ativan]</b> (benzodiazepine)	PO/IM/IV: 0.5 mg-2 mg Q4-8hrs PRN (2 mg max per dose) 0.05 mg-0.1 mg/kg/dose	IV: 10 mins PO/IM: 1-2 hours	Child: 4 mg Adolescent: 6-8 mg Depending on weight/prior medication exposure	Avoid in delirium. <b>Do not give with olanzapine</b> (especially IM due to risk of respiratory suppression).
Clonidine <b>[Catapres]</b> (alpha 2 agonist)	PO: 0.05 mg- 0.1 mg Q8 hrs PRN	PO: 30-60 mins	27-40.5 kg: 0.2 mg/day 40.5-45 kg: 0.3 mg/day >45 kg: 0.4 mg/day	Monitor for hypotension and bradycardia Avoid giving with benzodiazepines (BZD) or atypical antipsychotics due to hypotension risk
Chlorpromazine <b>[Thorazine]</b> (antipsychotic)	PO/IM: 12.5-60 mg Q6-8hrs PRN 0.55 mg/kg/dose	PO: 30-60 mins IM: 15 mins	Child <5 years: 40 mg/day Child >5 years: 75 mg/day	Monitor hypotension Monitor for QT prolongation
Haloperidol <b>[Haldol]</b> (antipsychotic)	PO/IM: 0.5 mg- 5 mg 0.05-0.1 mg/kg/dose Q6hr PRN (5 mg max per dose)	PO: 2 hours IM: 20 mins	15-40 kg: 6mg >40 kg: 15 mg Depending on prior antipsychotic exposure	Monitor hypotension Consider EKG or cardiac monitoring for QT prolongation, especially for IV administration. Note EPS risk with major depressive disorder (MDD) > 3 mg/day, with IV dosing having very high EPS risk.
Olanzapine <b>[Zyprexa]</b> (antipsychotic)	PO/ODT or IM: Age 4 to <6: 1.25 mg once Age 6-12 years: 2.5 mg once Age >12: 2-5-5 mg once	PO: 5 hours (range 1-8 hours) IM: 15-45 mins	10-20 mg Depending on antipsychotic exposure	<b>Do not give IM with or within 1 hour of any BZD given risk for respiratory suppression</b>
Risperidone <b>[Risperdal]</b> (antipsychotic)	PO/ODT: 0.25-1mg 0.005-0.01 mg/kg/dose	PO: 1 hour	Child: 1-2 mg Adolescent: 2-3 mg Depending on antipsychotic exposure	Can cause akathisia (restlessness/agitation) in higher doses

**For any dosing or formulation questions call the pharmacy**

Psych ED Pharmacy: 974-4097

ED Pharmacy: 974-3765

Peds Pharmacy (7a-10p): 974-6679

Central Pharmacy (10p-7a): 974-8761