

Drug	Class	Dose	Indication	Kinetics	Who shouldn't get it	Comments
Nitroglycerin	Vasodilator	5-200 mcg/min	HTN, Acute MI	O – immediate D – 3-5 min Hepatic	- concurrent use of PDE-5 inhibitors - head trauma or increased ICP - angle-closure glaucoma	- use caution in RV infarct, NTG may cause precipitous hypotension
Nitroprusside	Vasodilator	0.3-10 mcg/kg/min	HTN crisis, acute decompensated HF	O - <2 min D – 1-10 min Renal	- renal insufficiency - intracranial hemorrhage	- risk of cyanide accumulation/toxicity
Hydralazine	Vasodilator	10-20 mg/dose q4-6hr	HTN, HTN crisis	O – 5-20 min D – 1-4 hours Renal	- mitral valve rheumatic heart disease - CHF	- Use caution when dosing because of long duration of action
Nicardipine	CCB	5-15 mg/hr	HTN	O – 10 min D - <= 8 hours Hepatic	- Aortic stenosis - decompensated HF	- do not use if pt has received recent IV beta blocker
Clevidipine	CCB	1-21 mg/hr	HTN	O – 2-4 min D – 5-15 min Hepatic and Renal	- hypertriglyceridemia - acute pancreatitis - severe aortic stenosis	- do not use if pt has received recent IV beta blocker - may cause reflex tachycardia in pt with obstructing coronary disease
Diltiazem	CCB	0.25 mg/kg over 2 min; 0.35 mg/kg over 2 min CIVI: 10-15 mg/hr	AFib/Aflutter, paroxysmal SVT	O – 3 min D – 1-3 hour bolus, 0.5-10 hr CIVI Hepatic	- 2 <sup>nd</sup> or 3 <sup>rd</sup> degree AV block - bradycardia or sick sinus syndrome - CHF - concurrent digoxin use	- do not use if pt has received recent IV beta blocker
Labetalol	BB	20-80 mg IV over 2 min at 10 min interval, up to 300 mg	HTN, HTN urgency or emergency	O – 2-5 min D – 2-18 hours, dose depended Hepatic	- Severe bradycardia - Heart block - Asthma - Severe hepatic injury - Decompensate CHF	- Do not use in if pt has received recent CCB
Esmolol	BB	250-500 mcg/kg bolus, then 50-300 mcg/kg/min CIVI	SVT, Afib, Tachycardia	O – 2-10 min D – 10-30 min RBC esterase	- Sinus bradycardia - Heart block - Uncompensated HF - Cardiogenic shock	- Do not use if pt has received recent CCB - Caution in pt with asthma - Do not withdrawal abruptly
Metoprolol	BB	2.5-5 mg q2-5 min; max total dose 15 mg over a 10-15 min period	Angina, HTN, stable MI	O – 20 min D – 5-8 hrs Hepatic	- Sinus bradycardia - Heart block - Mild to moderate HF - Cardiogenic shock	- Do not use if pt has received recent CCB - Caution in pt with asthma - Do not withdrawal abruptly

CCB – Calcium Channel blocker; BB – beta blocker; O – onset of action; D – duration of action