

| Agent | Titration | Effect on BP | Effect on Cardiac Output | Noteable Effects |
|---|--|--------------------|--------------------------|---|
| Diltiazem (1-15 mg/hr) | 2.5 mg/hr every 30-60 min | variable, decrease | decrease | AV Block, bradycardia, CHF exacerbation |
| Dobutamine (2-20 mcg/kg/min) | 2.5 mcg/kg/min every 5-15 min | variable, decrease | increase | hypotension, dysrhythmias |
| Dopamine (mcg/kg/min) - dose dependent | | | | |
| 0.5 to 2 mcg/kg/min | titrate by provider order (1-5 mcg/kg/min typically) | decrease | increase | tissue necrosis, dysrhythmias |
| 5 to 10 mcg/kg/min | titrate by provider order | variable | increase | tissue necrosis, dysrhythmias |
| 10 to 20 mcg/kg/min | titrate by provider order | increase | increase | tissue necrosis, dysrhythmias |
| Epinephrine (0.01-0.2 mcg/kg/min) or (1-15 mcg/min) | titrate by 0.01 mcg/kg/min or 1 mcg/min every 1-15 min | increase | increase | tissue necrosis, dysrhythmias |
| Milrinone (.125-.375 mcg/kg/min) | titrate with provider order | variable, decrease | increase | hypotension, dysrhythmias, N/V |
| Nicardipine (5-15 mg/hr) | 2.5 mg every 15 min | decrease | patient dependent | hypotension, peripheral edema, tachyarrhythmia |
| Nitroglycerin (5-200 mcg/min) | 5-10 mcg every 3-5 min | decrease | patient dependent | hypotension |
| Nitroprusside (0.5-10 mcg/kg/min) or (5-300 mcg/min) | 0.5 mcg/kg/min or 10 mcg/min every 5 min | decrease | patient dependent | hypotension, cyanide toxicity, titrate diligently |
| Norepinephrine (5-80 mcg/min) or (0.05-0.1 mcg/kg/min) | 2 mcg/min or 0.01 mcg/kg/min every 3-5 min | increase | (+/-) | tissue necrosis, dysrhythmias at high doses |
| Phenylephrine (25-200 mcg/min) | 25 mcg every 1-15 min | increase | variable | tissue necrosis |
| Vasopressin (0.01-0.04 units/min) | typically start at 0.04 and titrate off by 0.01 every 30 min | increase | (+/-) | tissue necrosis |
| *** Drip titrations are dependent by institution, this document is a general guide. Always formulate a plan with the provider prior to titration. | | | | @nurseabnormalities |