

Paediatric Emergency - Dosing Chart



Western Health

Be Safe – Be Smart – Be Kind

COVID - 19

ANAPHYLAXIS	Adrenaline IM 10mcg/kg (0.01ml/kg of 1:1000) (1mg in adult)																									
ASTHMA	Magnesium Sulphate, Aminophylline, Salbutamol IV doses on Asthma Infusions Chart																									
CROUP	1. Dexamethasone PO/IV/IM 0.15mg for mild-mod; 0.6mg/kg for severe 2. Adrenaline NEB* 0.5ml/kg 1:1000 (max 5ml [5mg])																									
HIGH FLOW NP *	2L/kg for first 12kg, then 0.5L/kg for each kg after that (max flow 50L/min) start in 25-30% FiO2 and reassess.																									
HYPOGLYCAEMIA (NON IDDM)	IV access: 10% Glucose IV 2ml/kg REMEMBER: LOW BGL BLOOD TESTS PRIOR	No IV access: IM Glucagon <25kg: 0.5 units, >25kg 1 unit																								
PAIN	Paracetamol: PO 15mg/kg/dose Ibuprofen: PO 10mg/kg/dose	Oxycodone: PO 0.1-0.2mg/kg/dose Fentanyl: IN 1.5mcg/kg/dose (max 100mcg) Morphine: IV 0.05 to 0.1mg/kg/dose Nitrous Oxide: 50-70% via blender																								
SEIZURE	1st line: Midazolam IV/IM/IO 0.15mg/kg repeat at 5 min Diazepam IV 0.1-0.3mg/kg, PR 0.3-0.5mg/kg (max 10mg)	2nd line: Keppra 40mg/kg infusion over 5 min (>6months) Phenobarbitone IV 20mg/kg over 30 min (<6 months)																								
SEPSIS	Normal CSF: Flucloxacillin IV 50mg/kg + Gentamicin IV 7.5mg/kg (<10yrs) IV 6mg/kg (>10yr) Unknown CSF: Flucloxacillin IV 50mg/kg + Cefotaxime IV 50mg/kg OR Ceftriaxone IV 50-100mg/kg																									
SVT	Stable: Vagal manoeuvres, if fails Adenosine IV 0.1mg/kg, increase 2 minutely by 0.05mg/kg to max 0.3mg/kg/dose (max 18mg adult) Shocked: IV diazepam (0.25ml/kg) if awareness then DC cardioversion synchronised shock 1 joule/kg																									
WEIGHT FORMULAE	0-12 Months: Weight(kg) = (0.5 x age in months) 1-5 years: Weight(kg) = (2 x age in years) + 8 6-12 years: Weight(kg) = (3 x age in years) +7 Or use Broselow Tape Or Ask Parent/Carer																									
ETT* CUFFED TUBES Preferred unless under 3 months	ETT Size: age/4 + 3.5 (cuffed); age/4 +4 (uncuffed) ETT length at lip (>1yr) Oral: Age/2 +12cm; Nasal: age/2 +15 Under 1yr: <table border="1" style="margin-left: 20px;"> <thead> <tr> <th>ET TUBES (ETT)</th> <th>Term Newborn</th> <th>2 months</th> <th>6 months</th> </tr> </thead> <tbody> <tr> <td>SIZE</td> <td>3</td> <td>3.5</td> <td>4</td> </tr> <tr> <td>LENGTH AT LIPS</td> <td>8.5</td> <td>9</td> <td>10</td> </tr> <tr> <th>LARYNGEAL MASK (LMA)</th> <td><5kg</td> <td>5-10kg</td> <td>11-20kg</td> <td>21-30kg</td> <td>31-50kg</td> </tr> <tr> <td>SIZE</td> <td>1</td> <td>1.5</td> <td>2</td> <td>2.5</td> <td>3</td> </tr> </tbody> </table> Resuscitator Bag <2 years 500ml >2 years 2L bag		ET TUBES (ETT)	Term Newborn	2 months	6 months	SIZE	3	3.5	4	LENGTH AT LIPS	8.5	9	10	LARYNGEAL MASK (LMA)	<5kg	5-10kg	11-20kg	21-30kg	31-50kg	SIZE	1	1.5	2	2.5	3
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RAPID SEQUENCE INDUCTION* (get help)	Induction: Ketamine IV 1-2mg/kg/dose OR Propofol IV 2-3mg/kg Thiopentone IV 2-5mg/kg (Sz)	Muscle Relaxants: Suxamethonium IV 3mg/kg newborn; 2mg/kg child; 1.5mg/kg adult OR Rocuronium IV 1.2-1.6mg/kg undiluted																								
CARDIAC ARREST* (get help)	Adrenaline IV 10mcg/kg (0.1ml/kg of 1:10000) every 2 nd loop Adrenaline ETT 100mcg/kg (0.1ml/kg of 1:1000) (up to 26mg) Sodium bicarb 8.4% IV 1ml/kg over 5 minutes DC SHOCK 4 joules/kg Amiodarone IV 5mg/kg after 3 rd shock																									
CONTACTS	Code Blue 444 or 8345 0444 PIPER 1300 137 650 RCH Switch 9345 5522 SH switch 8345 6333 SH ED 8345 1596 (comms); SH Paed ED 8345 50803/50804 SH Paed ED Fax: 8345 1607 or 8345 1612 (office) Paed ED Consultant 0466 795 158	Paed ED Social Work 0466 372 353 JK Paeds Admissions Reg 9055 3054 Page 718; JK Neonatal Reg 9055 3157 Neonatal Consultant 9055 3115 JK Outpatients: 9055 2020 Pathology 51488																								
*These are AEROSOL GENERATING PROCEDURES (AGP) - Consultant or Senior Registrar decisions regarding use - Use negative pressure room or closed door room - Use Droplet and Airborne precautions: - Gown, Gloves, Eye protection and N95																										

Version	Date (of the change)	Responsibility (Author)	Description (action taken to the document)
V1	Jan 2020:	Jennifer Watt & David Krieser	
V3	May 2020	David Krieser	Updated with CoVID19 considerations – David Krieser

