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DOSING VARIABILITY OF MEDICATIONS USED FOR RAPID SEQUENCE INTUBATION IN THE EMERGENCY DEPARTMENT (B3), Sara Stahle, Asad Patanwala, Daniel Hays, John Sakles, Brian Erstad. The University of Arizona, Tucson, AZ (stahle@pharmacy.arizona.edu). IRB approval received.

Many critically ill patients require some form of endotracheal intubation to secure and maintain a patent airway, and physicians routinely use rapid sequence intubation (RSI) in many circumstances. RSI involves several distinct phases including pretreatment, induction, and paralysis. While several medications can be used as the induction agent, etomidate is commonly used in many emergency departments due to advantageous pharmacodynamics and favorable effects on neurologic and cardiovascular parameters. Succinylcholine is the most commonly used paralytic agent due to its fast onset and short duration of action. In patients with contraindications to succinylcholine, rocuronium has shown comparable intubation conditions to succinylcholine. In the emergency department at University Medical Center, it is common to administer standard fixed doses for most adult patients. The purpose of this retrospective study is to evaluate dosing variation of etomidate, succinylcholine and rocuronium based on BMI for patients requiring RSI, as well as to evaluate the effect of dosing on the success rate of the first intubation attempt. Data collection will include demographic and laboratory data, medication doses, and RSI procedural information. The results will be discussed.

