# ALS Pharmacology – METOPROLOL TARTRATE

**Metoprolol** *may be used only when* diltiazem *is unavailable.* (EMSOPs must notify the State EMS Medical Director of diltiazem shortages).

#### a) Class

Beta blocker

# b) Actions

- (1) Blocks beta-1 receptors in the heart
- (2) Decreases ventricular rate and contractility

## c) Indications

Symptomatic atrial fibrillation and atrial flutter with a ventricular rate greater than or equal to 130 bpm

## d) Contraindications

- (1) Hypotension: SBP less than 100 mmHg
- (2) Heart rate: less than 130 bpm
- (3) Wheezing, bronchospasm, asthma/COPD exacerbation
- (4) Second or third degree heart block
- (5) Hypersensitivity to the drug
- (6) Patients less than 18 years of age

#### e) Precautions

(1) Use caution in patients with renal failure



(2) In patients with stated history of CHF or decreased ejection fraction (EF less than 30%), hypotension may occur rapidly following administration. Be prepared with IV fluid bolus (250 ml).

# f) Adverse effects

- (1) Bradycardia
- (2) Nausea or Vomiting
- (3) Hypotension

#### g) Significant interactions

Congestive heart failure may result if used along with calcium channel blockers

#### h) Dosage

- (1) Adult
  - (a) 5 mg IV given over 1-2 minutes. May repeat dose once in 5 minutes if heart rate remains greater than 130 bpm and no contraindications are present.
  - (b) For patients with borderline blood pressure (SBP 100-120) or CHF, administer metoprolol slowly in 2.5 mg IV/IO increments, not to exceed 10 mg IV/IO (maximum).



# ALS Pharmacology – METOPROLOL TARTRATE (continued)

(2) Pediatric – contraindicated for patients less than 18 years of age unless approved by consultation with a Pediatric Base Station.

# i) Overdose or Toxicity

Typically presents with severe hypotension and symptomatic bradycardia

# j) Treatment of Overdose or Other Adverse Reactions

- (1) Give general supportive measures, monitor vitals, administer oxygen
- (2) Hypotension:
  - (a) If lungs are clear, administer *Lactated Ringer's* 20 mL/kg IV/IO; titrate to a systolic blood pressure of 100 mmHg
  - (b) If rales are present, administer fluid bolus, maximum of 250 mL of *Lactated Ringer's*. Titrate to a systolic blood pressure of 100 mmHg.
  - (c) Treat with *glucagon* per beta *Overdose/Poisoning-Adult*

