

IPRATROPIUM [ATROVENT]

DRUG CLASSIFICATION	Quaternary-Derivative of Atropine Short-Acting Muscarinic Antagonist (SAMA) Parasympatholytic / Anticholinergic Agent Bronchodilator / Antisecretory Agent
MECHANISM OF ACTION	Displays competitive inhibition of cholinergic receptors, blocking acetylcholine at parasympathetic sites of bronchial smooth muscle which, suppresses the increase of cyclic guanosine monophosphate levels and prevents bronchoconstrictor action of vagal efferent impulses, resulting in site-specific bronchodilation and prevention of secretions from serous and seromucous glands in the nasal mucosa.
CLINICAL INDICATIONS	Bronchospasm Associated with Respiratory Distress in Reversible Obstructive Airway Disease (i.e., Asthma, COPD, etc.) Bronchospasm Associated with Respiratory Distress in Moderate-to-Severe Allergic Reaction
STANDARD CONTRAINDICATIONS	Hypersensitivity to Atrovent, Atropine, or Other Relative Components
POTENTIAL ADVERSE EFFECTS	Bitter Taste in Mouth / Leg Cramps / Headache / Dizziness / Blurred Vision / Pain / COPD Exacerbation / Bronchitis / Pneumonia / UTI
GENERAL RISKS & PRECAUTION	1) Only administer Atrovent <i>in conjunction with</i> a short-acting beta-adrenergic agonist such as Albuterol for acute exacerbations of bronchospasm. 2) If paradoxical bronchospasm occurs, Atrovent should be discontinued, and an alternative type(s) of treatment should be considered. 3) Use caution in patients with narrow-angle glaucoma as this may increase intraocular pressure. 4) Use caution in patients with bladder-neck obstruction due to risk of worsened condition.
PROTOCOL INDEX	Adult COPD / Asthma (AR-4) Pediatric Respiratory Distress (AR-7) Allergic Reaction / Anaphylaxis (AM-1) Pediatric Allergic Reaction (PM-1)

MEDICATION ADMINISTRATION

ADULT

PEDIATRIC

Moderate-to-Severe Adult Allergic Reaction / Anaphylaxis
COMBINE ALL IPRATROPIUM DOSE(S) WITH ALBUTEROL AS A DUO-NEB
0.5 mg [NEB]; Repeat as needed x 3 if indicated.

Adult Respiratory Distress / Asthma / COPD
COMBINE ALL IPRATROPIUM DOSE(S) WITH ALBUTEROL AS A DUO-NEB
0.5 mg [NEB]; Repeat as needed x 3 if indicated.

NOTE: Patients may receive more than 3 nebulizer treatments which, should continue until improvement. Following 3 combination nebulizers, it is acceptable to continue albuterol solely with subsequent treatments as there is no proven benefit to continual use of ipratropium.

Moderate-to-Severe Pediatric Allergic Reaction / Anaphylaxis
COMBINE ALL IPRATROPIUM DOSE(S) WITH ALBUTEROL AS A DUO-NEB
0.5 mg [NEB]; Repeat as needed x 3 if indicated.

Pediatric Respiratory Distress / Asthma
COMBINE ALL IPRATROPIUM DOSE(S) WITH ALBUTEROL AS A DUO-NEB
0.5 mg [NEB]; Repeat as needed x 3 if indicated.

NOTE: Patients may receive more than 3 nebulizer treatments which, should continue until improvement. Following 3 combination nebulizers, it is acceptable to continue albuterol solely with subsequent treatments as there is no proven benefit to continual use of ipratropium.