

急救藥物概論

成大醫學中心急診醫學部

單元目標:能正確的使用藥物

- 幫助心肺復甦
- 預防或治療心律不整
- 減輕疼痛和焦慮

Agents to Optimize Hemodynamic

- Epinephrine
- Vasopressin
- Norepinephrine
- Dopamine
- Dobutamine
- Digitalis

Agents to Optimize Hemodynamic

- Nitroglycerin
- Sodium Nitroprusside
- Sodium Bicarbonate
- Diuretic

Agents For Arrhythmia

Agents for bradyarrhythmia

- Atropine sulfate
- Dopamine
- Epinephrine
- Isoproterenol / B-adrenergic agonist
- Dobutamine

Agents For Arrhythmia

Agents for supraventricular tachycardia

- Adenosine
- B-adrenergic blockers
- Calcium channel blockers except DHP
- Class Ia, Ic, III
- Digitalis

Agents For Arrhythmia

Agents for ventricular tachycardia

- Class Ib, III, Ic
- B-adrenergic blockers
- Calcium channel blockers except DHP
- Magnesium

Classification of Antiarrhythmic Drugs

Class I

Bind to sodium channel, decrease speed of depolarization

- Ia – Quinidine, Procainamide
- Ib – Lidocaine, Phenytoin
- Ic – Propafenone, Flecainide

Classification of Antiarrhythmic Drugs

Class II

- B-blocking drugs, decrease sympathetic tone
- Affect mainly SA and AV nodes

Classification of Antiarrhythmic Drugs

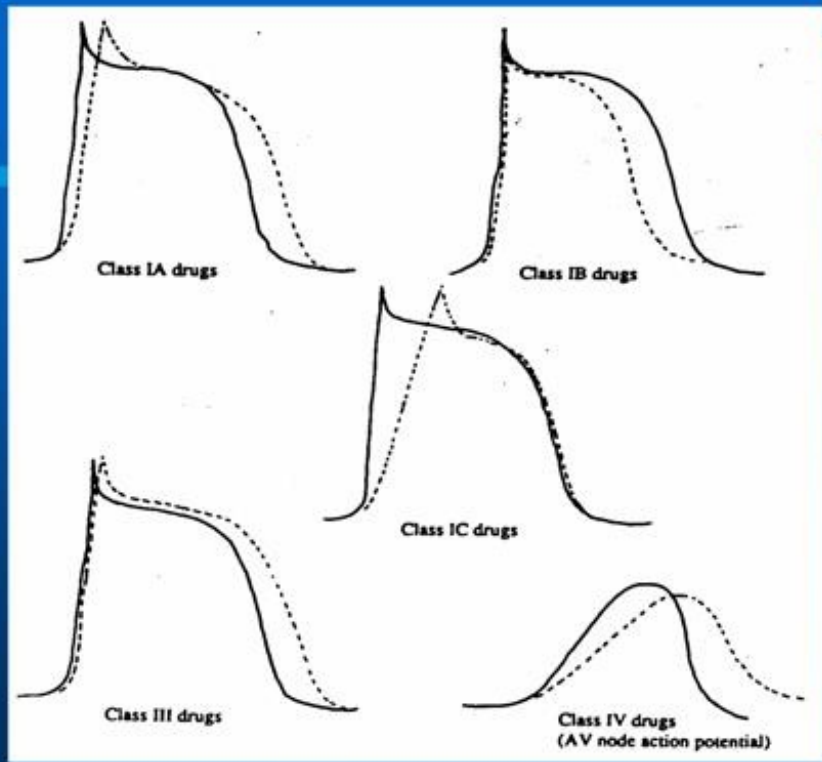
Class III

- Increase action potential duration
- Amiodarone, Sotalol, Bretylium

Classification of Antiarrhythmic Drugs

Class IV

- Affect mainly SA and AV nodes
- Digitalis agents



氧 氣

在心跳停止時，氧氣供應不足

- 吐出的氣體中含氧量16%~17%
- 心輸出量低間接造成混合靜脈血氧壓力及飽和度降低
- 肺內血液右至左分流
- 換氣量/灌注量分配不均(mismatching)

氧氣的作用

- 提高氧氣分壓
- 增加氧氣含量
- 改善組織氧含量

氧氣的適應症

- 急性胸痛
- 任何疑似引起低血氧的原因
- 心肺功能停止