

## MIDAZOLAM

**Additional Names:** Versed

**Classification:** Benzodiazepine, Anxiolytic

**Indications:** Seizure Control  
Anxiolytic, Sedation  
Pre-medication before TCP

**Contraindications:** Known Hypersensitivity  
Narrow-Angle Glaucoma  
Hypotension

**Dosages:**

**Adult:**

**Seizure**  
10mg IM if seizing upon arrival  
2.5mg IV/IM/IO, q2min prn, max 10mg (not including initial IM dose if seizing upon arrival)

**Agitated/Combative Patient**  
2.5-5mg IV/IM/IN, max 10mg  
If agitation persists after 5min, repeat initial dose if max dose not already reached

**Hyperactive Delirium with Severe Agitation**  
5mg IV/IM  
If agitation persists after 5min, repeat initial dose

**Post Intubation Sedation**  
5mg IV/IO/IM, q2min prn, max 20mg

**Bradycardia – TCP Premedication**  
2.5-5mg IV/IO/IN, if possible, for sedation

**Tachycardia – Cardioversion Premedication**  
2.5-5mg IV/IO/IN, if possible, for sedation

**Congestive Heart Failure – Anxiolytic prior to CPAP**  
2.5 mg IV/IO/IM x1 prn

**Pediatric:**

**Seizure:**  
0.2mg/kg IM/IN, max 5mg, if seizing on arrival, may repeat x1 q5min  
0.1mg/kg IV/IO, max 2mg, may repeat x1 q5min

**Side Effects:** Rapid administration may cause respiratory depression/arrest  
Hypotension, cardiac arrhythmias, anterograde amnesia



## MIDAZOLAM (continued)

**Physiological:  
Effects** Induces effects by acting on parts of the gamma-amino butyric acid (GABA) and benzodiazepine receptors, the major inhibitory neurotransmitters in the CNS. Contains anxiolytic, anticonvulsant, sedative, muscle relaxant, and amnesic properties.

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**Additional Info:** Potentiates the effects of other CNS depressants.  
Use lower end of dosing range in debilitated patients, including the elderly.  
Do not dilute for IM/IN administration.  
Considered to be twice as potent as Diazepam, milligram for milligram

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