

This document is for **reference only**. Please refer to Physician Order's for specific indications, dosages, and applications

IFT

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Drug Name: **Diltiazem INFUSION**
Trade Name: **Cardizem, Dilacor XR, Tiazac, Cartia XT,**
REVISED: **November 1, 2018**

Class:

- Calcium Channel Blocker
- Class IV antidysrhythmic

Mechanism of Action:

- Diltiazem inhibits the influx of extracellular calcium across both the myocardial and vascular smooth muscle cell membranes. Resulting in dilation of the coronary and systemic arteries; improved oxygen delivery to the myocardial tissue; and decreased total peripheral resistance, systemic blood pressure, and afterload.
- It is a negative dromotrope & creates refractoriness in the AV node. Its effects on calcium channels in SA and AV nodes, and peripheral vasculature are equipotent.

Indications:

- Atrial fibrillation & atrial flutter with a rapid ventricular response
- Multifocal atrial tachycardia
- PSVT

Contraindications:

- 2nd or 3rd degree AV block (*in the absence of a functioning pacemaker*)
- Sick Sinus Syndrome (*in the absence of a functioning pacemaker*)
- Cardiogenic shock
- Hypersensitivity
- Atrial fibrillation or atrial flutter associated with WPW or short PR syndrome (Lown-Ganong-Levine Syndrome)
- Ventricular tachycardia
- Wide-complex tachycardia of unknown origin
- AMI (*associated with CHF or left ventricular dysfunction*)
- Advanced aortic stenosis
- Hypotension (less than 90 mmHg)

Precautions:

- CHF
- Elderly
- Renal / Hepatic Impairment
- Pregnancy (C)

Dosage:

Doses are highly variable and based on institutional guidelines and patient laboratory values. Double check orders with transferring physician.

Infusions:

- **IV/IO Infusion: 5-15 mg/hr on pump**

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Physicians may order additional bolus doses to supplement infusion.

- **IV/IO: 10 mg slow over 2 minutes. Repeat every 10-15 minutes PRN rate control.**

OR

- **IV/IO: 0.25 mg/kg IV over 2 minutes. May repeat in 15 minutes @ 0.35 mg/kg IV over 2 minutes**

Onset:

- 2-5 minutes

Duration:

- 1-3 hours

Side Effects:

- First or second degree AV block
- Bradycardia
- Ventricular dysrhythmias
- CHF, Edema
- Hypotension, Syncope
- Flushing
- Chest pain
- Dyspnea
- Sweating
- N/V
- Dizziness
- Nervousness
- Xerostomia
- HA

Interactions:

- May prolong the sedative effects of midazolam.
- May enhance the effects of ASA and prolong bleeding time.
- Additive effects with antihypertensives, alpha-blockers, & diuretics.
- Should not be used in combination with IV beta-blockers. The negative inotropic, chronotropic, & hypotensive effects can induce heart failure.
- Calcium salts can antagonize the hypotensive effects, but do not seem to have an effect on AV conduction.
- Incompatible with simultaneous furosemide injection.

PEARLS:

- Monitor closely for hypotension
- If patient develops refractory hypotension after diltiazem administration, stop diltiazem infusion and **consider calcium chloride or calcium gluconate 0.5- 1 gm slow IV push as reversal agent (on med control order).**

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