

	1752	Critical Care Paramedic Lorazepam infusion
Nor-Cal EMS Policy & Procedure Manual	Treatment Guidelines	
Effective Date: 11/04/2022	Next Revision: 11/04/2025	
Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR	SIGNATURE ON FILE	

Authority

Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9, Chapter 4, Article 2.

Purpose

To provide a mechanism for Critical Care Paramedics (CCPs) to provide Lorazepam infusions during transports.

- **ONLY** for NorCal EMS Agency accredited CCPs who have successfully completed training program(s) approved by the Nor-Cal EMS Agency Medical Director.
- **ONLY** for CCP ambulance provider agencies approved by the Nor-Cal EMS Agency.
- **CCPs will not initiate Lorazepam infusion.**

Policy

1. CCP are permitted to monitor and adjust Magnesium infusions during interfacility transports; and may initiate infusion with Physician consultation.

Signed transfer order from the transferring physician must provide for maintaining and adjusting infusions during transport.

Prior to transport confirm:

- Continuously monitor ECG, Spo2 with vital signs obtained and documented every 5 minutes
- Regulation of the infusion rate will occur within the parameters as defined by the transferring physician
- Administer Lorazepam as per physician orders. If no orders may use guidelines.

**Lorazepam infusion guidelines
(100mg in 100ml)**

Standard dosing is 2-4mg/hour

May titrate per physician order or as needed (5mcg/min every 5 minutes). In no case shall an adjustment greater than 10/mcg/min every 5 minutes be made.

**Lorazepam bolus guidelines
ADULT DOSING**

Standard dosing is 1mg IV/IO/IM/IN as needed every 5 min to a maximum of 4mg/hour

May half the dose if concern for hypotension or respiratory depression.

PEDIATRIC DOSING

0.1mg/kg IV/IO/IM/IN as needed every 5 minutes. Max dose 2mg.