

Care of the Agitated Patient

This agitation medication dosing recommendation table accompanies the [Care of the Agitated Patient Algorithm](#), a clinical tool to guide decision-making when caring for agitated pediatric patients in emergency settings. Ensure weight of pediatric patients are measured and documented in kilograms for weight-based medication dosing.

Medications for MILD/MODERATE AGITATION					
Drug	Route	Dose	PRN Interval	Onset	Considerations
Lorazepam	PO/IM/IV	0.05-0.1 mg/kg/dose MAX single dose: 2 mg	Every 4-6 hours	PO: 30-60 min IM: 15-30 min IV: 5-15 min	Contraindications: AVOID in acute confusional state, autism spectrum disorder, history of paradoxical reaction, or within 1 hour of IM olanzapine Side effects: respiratory depression if administered with an antipsychotic, disinhibition, acute confusional state
Clonidine	PO	0.05 mg-0.1 mg MAX total dose: 0.4 mg/day	Every 6-8 hours	PO: 30-60 min	Contraindications: hypotension, bradycardia. Caution against use with antipsychotics and benzodiazepines due to increased risk of dizziness and drowsiness Side effects: hypotension, bradycardia
Diphenhydramine	PO/IM	1 mg/kg/dose MAX single dose: 50 mg	Every 6-8 hours	PO: 30-60 min IM: 5-30 min	Contraindications: AVOID in acute confusional state and intoxication, or history of paradoxical reaction Side effects: QTc prolongation, disinhibition
Medications for SEVERE AGITATION					
<p>Antipsychotics are often required. An enteral route should be first line, but IM administration may be required. Contraindications for ALL antipsychotics: history of NMS, severe dystonia, QTc prolongation</p>					
Drug	Route	Dose	PRN Interval	Onset	Considerations
Olanzapine	PO/ODT/IM	<40 kg: 1.25-2.5 mg ≥40 kg: 2.5-5 mg MAX DAILY dose: 20mg/day	Every 12 hours	1-8.5 hours	Contraindications: AVOID within 1 hour of any benzodiazepine via any route due to risk of respiratory depression Side effects: paradoxical reaction, sedation
Risperidone	PO/ODT	<20 kg: 0.25-0.5 mg ≥20 kg: 0.5-1 mg MAX single dose: 1 mg	Every 12 hours	30-60 min	Side effects: sedation, akathisia (restlessness/agitation), QTc prolongation, hypotension, EPS
Quetiapine	PO	<40 kg: 6.25-12.5 mg ≥40 kg: 25-50 mg MAX initial single dose: 50mg	Every 12-24 hours	30 min	Side effects: QTc prolongation (less risk than other antipsychotics), hypotension
Haloperidol	PO/IM	<40 kg: 0.025-0.075 mg/kg/dose ≥40 kg: 2-5 mg MAX single dose: 5 mg	Every 2 hours	PO: 30-60 min IM: 15-30 min	Note: May be co-administered with a benzodiazepine and diphenhydramine Side effects: EPS, decreased seizure threshold, hypotension, QTc prolongation

Mild: Subtle behaviors such as fidgeting, irritability, fixed stare
Moderate: Raising voice, yelling, pacing, head-banging, defensive stance
Severe: Combative, imminent risk to self or others

NMS: neuroleptic malignant syndrome
EPS: extrapyramidal symptoms
PO: by mouth / **IM:** intramuscular / **IV:** intravenous / **ODT:** oral disintegrating tablet