

Table 3. Alternatives for Specific Clinical Situations

Situation	Alternatives
Procedural sedation ^{6,7,9,11-17}	<p>NOTE: These agents must be given in conjunction with other appropriate interventions as prescribed by current practice.</p> <p>Diazepam: Up to 10–20 mg IV given immediately before <i>OR</i> 5–10 mg IM given 30 minutes before procedure</p> <p>Lorazepam: 0.044 mg/kg (up to a maximum of 4 mg) IV given 15–20 minutes before procedure</p> <p>Midazolam: 1–2.5 mg IV, then small incremental doses to achieve the desired effect</p> <p>Propofol: Monitored Anesthesia Care (labeled dose): 0.5 mg/kg over 3 to 5 minutes followed by infusion at 1.5 to 4.5 mg/kg/hr Procedural sedation (unlabeled): 1 mg/kg followed by supplemental doses of 0.5 mg/kg every 3 minutes as needed</p> <p>Fospropofol: Monitored Anesthesia Care (labeled dose): standard dosing regimen for adults ages 18 to 64 years who are healthy or have mild systemic disease, is 6.5 mg/kg for the initial bolus dose, followed by supplemental doses of 1.6 mg/kg as needed, separated by at least 4 minutes. Use a modified dosing regimen of 75% of the initial and supplemental doses for adults \geq 65 years old or those with severe systemic disease. Specific dosing instructions are available in product labeling for patients who weigh more than 90 kg or less than 60 kg.</p> <p>Methohexital: 0.75 to 1 mg/kg IV followed by supplemental doses of 0.5 mg/kg every 2 to 5 min as needed</p> <p>Dexmedetomidine: 0.5 to 1 microgram/kilogram (mcg/kg) intravenously (IV) over 10 minutes, followed by a maintenance infusion of 0.6 mcg/kg/hour IV titrated to desired clinical effect, (maintenance dose range: 0.2 to 1 mcg/kg/hour)</p> <p>Ketamine: 1 to 2 mg/kg IV over 1 to 2 minutes followed by 0.25 to 0.5 mg/kg every 5 to 10 minutes as needed</p> <p>Etomidate: 0.1 to 0.15 mg/kg IV over 30 to 60 seconds, followed by 0.05 mg/kg every 3 to 5 minutes as needed</p>