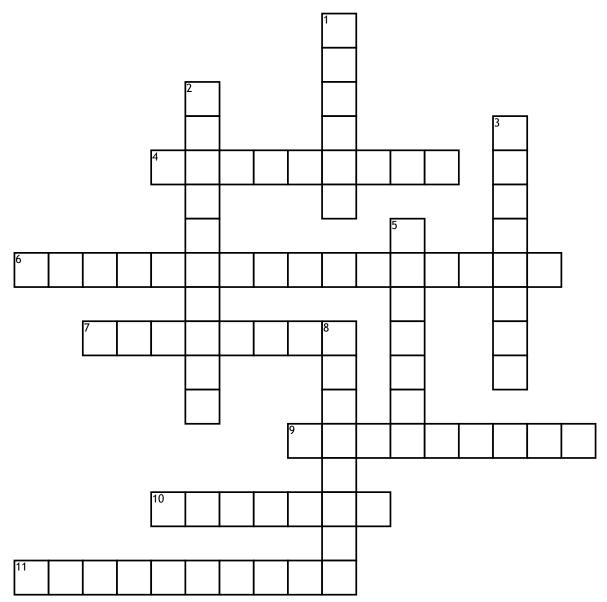
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## Critical Care Infusions-Fall 2017



## Across

- **4.** Calcium channel blocker, can be used to treat atrial arrythmias and HTN, but can cause hypotension.
- **6.** Any time a Benzodiazepine and Opioid are given together.
- **7.** Causes vasoconstriction, increases blood flow to all vital organs without increasing workload or output of heart, and dilates coronary arteries.
- **9.** Used to treat moderate to severe hypertension without reflex tachycardia or sifnificant reduction in heart rate.
- **10.** Has 2 different protocols and even a protocol to transition drip off.

**11.** Sympathomimetic drug that increases cardiac output by increasing HR and contractility, but also some vasodilation.

## Down

- 1. Sedation medication used in CIWA protocol
- **2.** Antidysrhythmic. I have a loading dose in my protocol, and I am found in the ACLS algorhythms.
- **3.** Fast acting, short duration sedative. Lipid based.
- **5.** A potent, rapid-acting antihypertensive agent. Should have PO med before turning drip off.
- **8.** Increases renal perfusion, increases BP, increases cardiac output and increases heart rate.