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| Drug | Concentration | Dose /route  | Withdrawal time | Indication |
| Tolazoline | 100mg/ml | 0.1mg/kgSlow IV | Milk: noneMeat:30 days | Reverse effects of xylazine (sedation and analgesia) |
| Atropine  | 0.54mg/ml | 0.04mg/kg¼ IV and the rest IM/SC | Milk: 3 daysMeat: 14days | -reduce secretions of resp tract-reverse sinus bradycardia (<30bpm), sinoatrial arrest, incomplete AV block |
| Epinephrine  | 1mg/ml | 0.02mg/kgIV ¼-1/2 ofIM dose if necessary  | None  | anaphylactic shock-cardiac resuscitation  |

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| Drug  | Contraindication  | Side effects |
| Tolazoline | Animals with circulatory and cardia issues.If sings of stress, debilitation, cardiac disease, sympathetic blockage, hypovolemia or shock. | Tachycardia, peripheral vasodilation, bright pink to dark red mucus membranes, hyperalgesia of lips (licking/flipping of lips seen) |
| Atropine  | Narrow angle glaucoma, tachycardias, ileus, urinary obstruction | -dry mouth (xerostomia), dysphagia, constipation, vomiting, and thirst.-urinary retention or hesitancy-stimulation, drowsiness, ataxia, seizures, respiratory depression, etc-blurred vision, pupil dilation, cycloplegia, and photophobia-sinus tachycardia (at higher doses), bradycardia (initially or at very low doses), hypertension, hypotension, arrhythmias (ectopic complexes), and circulatory failure. |
| Epinephrine  | -Narrow-angle glaucoma-hypersensitivity to epinephrine-shock due to non-anaphylactoid causes-general anesthesia with halogenated hydrocarbons-during labor (may delay the second stage)-cardiac dilatation or coronary insufficiency (cases where vasopressor drugs are contraindicated (e.g., thyrotoxicosis, diabetes, hypertension, toxemia of pregnancy)-should not be used inareas with end artery blood flow (e.g. ears, digits, tail) | **-** Anxiety, tremor, excitability, vomiting,hypertension (overdosage), arrhythmias, hyperuricemia, & lactic acidosis (prolonged use or overdosage)-necrosis at the injection site.(if used repreatedly) |