In children, 10 mg or less may be used. With a dose as low as 0.5 mg, unobservable mental symptoms or respiratory depression may occur. The symptoms of this toxicity include mental obtundation, depression, and drowsiness. These symptoms may be treated or prevented by more adequate ventilation and careful administration. In children, in whom the symptoms are more insidious, if the seizures do not subside within 10 minutes, atropine and/or another anticholinergic agent may be required. Usual doses of atropine sulfate are given as an antimuscarinic by subcutaneous, intramuscular, or intravenous injection.

Atropine Sulfate Injection, USP is a sterile, nonpyrogenic isotonic solution of atropine sulfate monohydrate in water for injection with sodium chloride. The solution contains no bacteriostat, antimicrobial agent or added buffer. The pH ranges from 0.2 to 0.5.

DESCRIPTION

Atropine Sulfate, USP is chemically designated 1α,2β,3β,4α,5α,6α-hexahydro-1α-methoxymethyl-3β,4α,5α,6α-tetrahydro-4H-pyridine-4-carboxylic acid. Atropine Sulfate Injection, USP is a sterile, nonpyrogenic isotonic solution of atropine sulfate monohydrate in water for injection with sodium chloride. Atropine Sulfate Injection, USP is a sterile, nonpyrogenic solution of atropine sulfate monohydrate in water for injection with sodium chloride. Atropine Sulfate Injection, USP is a sterile, nonpyrogenic isotonic solution of atropine sulfate monohydrate in water for injection with sodium chloride.

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