

# Hypotension

CHI Formulary Treatment algorithm

Treatment algorithm- December  
2023

Supporting treatment algorithms  
for the clinical management of  
Hypotension

Figures 1 and 2 outline a comprehensive treatment algorithm on **the management of Hypotension** aimed at addressing the different lines of treatment after thorough review of medical and economic evidence by CHI committees.

For further evidence, please refer to CHI **Hypotension** full report. You can stay updated on the upcoming changes to our formulary by visiting our website at <https://chi.gov.sa/AboutCCHI/CCHIprograms/Pages/IDF.aspx>

Our treatment algorithm offers a robust framework for enhancing patient care and optimizing treatment outcomes across a range of treatment options, holding great promise for improving healthcare delivery.

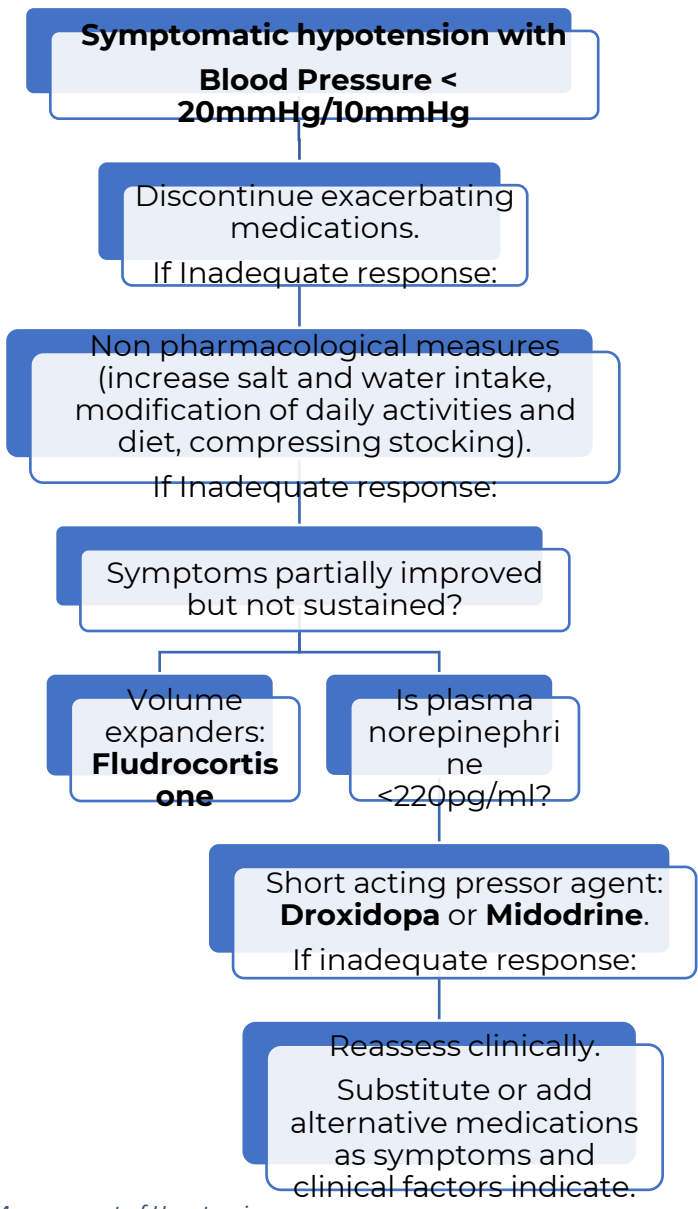


Figure 1: Management of Hypotension

Use **Norepinephrine** (0,025 to 1mcg/kg/minute) as a first-line vasopressor. Target a mean arterial pressure (MAP) of 65mmHg.

If MAP is inadequate despite low to moderate dose of norepinephrine, consider adding **Vasopressin** (0,01 to 0,03 units/minute).

If cardiac dysfunction with persistent hypo perfusion is present despite adequate volume status and blood pressure, consider adding **Dobutamine** (2 to 10mcg/kg/minute) or switching to **Epinephrine** (0,01 to 0,5mcg/kg/minute).

Figure 2: Management of Hypotension