Author Year Country Research Design Sample Size	Methods	Outcomes
Rollstin et al., (2016) United States Case Series N=11	**Population:** Mean age: 48yr; Gender: males=9, females=2; Mean time post injury= 10 days; Severity of injury: ASIA: A=7, B=3, unknown=1. **Interventions:** Oral albuterol **Outcome Measures:** Incidence of bradycardic events.	1. Patients had significantly fewer bradycardic events after albuterol initiation (p=0.013).
Evans et al., (2014) USA Case Control N=18	**Population:** Median age=49yr (albuterol group), median age=51 yr (no-albuterol group); Gender: males=75%, females=25% (albuterol group), males=80%, females=20% (no-albuterol group); Level of injury: C5 or higher (n=7, albuterol group), C5 or higher (n=7, no-albuterol group); Severity of injury: median injury severity score (ISS)=36.5, AIS A-C (albuterol group), median ISS=26, AIS A-B (no albuterol group). **Intervention:** Retrospective review of cervical SCI patients from a trauma center comparing those who were given (albuterol group) versus those who were not given (no-albuterol group) oral albuterol. **Outcome Measures:** Incidence of bradycardia; Hospital days requiring chronotropic use; Total atropine administered. **Chronicity:** Patients receiving albuterol were treated for a median of 5 days (range: 1-116 days); Patients not receiving albuterol were monitored for the initial 2wk of hospitalization.	1. All patients developed bradycardia: time to bradycardic episode was 0-13 days in the albuterol group, and 0-23 days in the no-albuterol group. 2. The median number of bradycardic episodes was significantly lower in patients receiving albuterol versus those not receiving albuterol (1.8 versus 4.3, p=0.08). 3. Hospital days on chronotropic agents were significantly lower in patients receiving albuterol versus those not receiving albuterol (0 versus 5.5, p=0.05). 4. The median total of atropine administered was significantly higher in patients not receiving albuterol versus those receiving albuterol (1 mg versus 0 mg, p=0.013).