TACHYCARDIA with PULSES (P04)

	F	E	O	P	D
ASSESSMENT: look for signs of poor perfusion or respiratory distress (delayed capillary refill, diminished distal pulses, cool extremities, ALOC).	X	X	X	X	
OXYGEN: 100% by non-rebreather mask or blow-by.	X	X	X	X	
BLS AIRWAY: okay if airway patent. Support ventilations with appropriate airway adjuncts.	X	X	X	X	
SUPRAGLOTTIC AIRWAY: if GCS is < 8 and not rapidly improving.				X	
PULSE OXIMETRY: apply and monitor.		X	X	X	
CAPNOGRAPHY: apply and monitor if SGA has been placed.				X	
ECG MONITOR: lead placement may be delegated. Treat as indicated.				X	
VASCULAR ACCESS: IV/IO, rate as indicated.				X	
Sinus Tachycardia (QRS < 0.10 seconds) Heart Rate > 220 in infants or >180 in children					
FLUID BOLUS: NS 20 mL/kg as indicated. Reassess after each bolus.				X	
COOLING MEASURES: if temperature > 100.4°F (38°C). Remove clothing. Consider SEPSIS P44.	X	X	X	X	
Supraventricular Tachycardia (SVT) (QRS < 0.10 seconds) Heart Rate > 220 for ages < 2 or Heart Rate >180 for ages > 2. Absent or abnormal P waves					
VAGAL MANEUVERS: Consider if child has normal perfusion. • Infants and young children: ice water to face • Older children: Valsalva				X	
ADENOSINE: 0.1 mg/kg rapid IV/IO, up to 6 mg, if poor distal perfusion but is responsive. If no change, repeat at 0.2 mg/kg IV/IO, up to 12 mg. Maximum total dose 18 mg.				X	
SYNCHRONIZED CARDIOVERSION: 0.5 J/kg. If no response, repeat at 1 J/kg, repeat at 2 J/kg, then repeat at 4 J/kg.				X	
Wide Complex Tachycardia with Pulses (QRS ≥ 0.09 seconds) and Heart Rate > 150					
ADENOSINE: 0.1 mg/kg rapid IV/IO, up to 6 mg, if poor distal perfusion but is responsive. If no change, repeat at 0.2 mg/kg IV/IO, up to 12 mg. Maximum total dose 18 mg.				X	
MIDAZOLAM: 0.1 mg/kg IV/IO. Max single dose 2 mg. May be repeated once.				X	
SYNCHRONIZED CARDIOVERSION: 1 J/kg. If no response, repeat at 2 J/kg.				X	
ANTIARRHYTHMIC: choose **ONE** • **LIDOCAINE:** 1 mg/kg IV/IO, may be followed by 20-50 mcg/kg per minute. Repeat bolus if infusion delay is >15 minutes after the initial dose. • **AMIODARONE:** 5 mg/kg in 100 mL NS infused IV/IO over 20 minutes.				X	
SYNCHRONIZED CARDIOVERSION: 2 J/kg.				X	
BASE CONTACT: if rhythm unchanged.					X

NOTE:

1. Use standard size pediatric pads for cardioversion for children <10 kg. These should be placed on the anterior chest in a sternal-apical location. If pediatric paddles/pads are not available, use adult pads placed anterior posterior on the chest wall.
2. If the defibrillator is not able to deliver the indicated energy level, use the lowest setting

available.