



Tachycardia With Pulses	
ADULT	PEDIATRIC
BLS	
Secure Airway. Assess Vitals. Obtain spO ₂ . Oxygen. Titrate SPO ₂ to 94% or higher. Provide calming measures.	
ALS	
Follow BLS procedures if applicable. Obtain ECG & 12-lead. IV/IO Access <ul style="list-style-type: none"> Consider the origin of tachycardia, administer 250 mL fluid bolus if patient's condition is stable with no associated chest pain or SOB. ETCO ₂ for patients receiving narcotics.	
Narrow QRS – Stable	
SVT - HR Greater than 150	SVT 2yrs and older – HR greater than 180 bpm Under 2yrs – HR greater than 220 bpm
Attempt Valsalva maneuver. Adenosine 6 mg IV/IO <ul style="list-style-type: none"> Rapid push immediately followed with 10 mL NS flush. <p style="text-align: center;">*If no conversion*</p> Adenosine 12 mg IV/IO <ul style="list-style-type: none"> Rapid push immediately followed with 10 mL NS flush. May repeat once if no conversion. 	Attempt Valsalva maneuver. Adenosine 0.1 mg/kg IV/IO <ul style="list-style-type: none"> Rapid push immediately followed by 10 mL NS flush. Total max dose 6 mg <p style="text-align: center;">*If no conversion*</p> Adenosine 0.2 mg/kg IV/IO <ul style="list-style-type: none"> Rapid push immediately followed by 10 mL NS flush. Single max dose 12 mg May repeat once if no conversion.
Wide QRS - Stable	
Amiodarone 150 mg IV/IO <ul style="list-style-type: none"> Infusion over 10 minutes May repeat once if patient remains stable. 	Provide supportive care, watch for signs of Unstable Tachycardia
Unstable – ALOC or Signs of Shock	
Synchronized Cardioversion 200j <ul style="list-style-type: none"> May repeat as necessary. Consider sedation prior to cardioversion. Midazolam 2 mg IV/IO/IN	Synchronized Cardioversion 1j/kg <ul style="list-style-type: none"> May repeat at 2j/kg, as necessary. Consider sedation prior to cardioversion. Midazolam 0.1 mg/kg IV/IO/IN <ul style="list-style-type: none"> Single max dose 2 mg
Special Considerations	
<ul style="list-style-type: none"> Utilize half dose of Adenosine, if accessing PICC or Central line. Utilize capnography if administering Midazolam. 	

Base Hospital Orders

Contact Base Hospital for treatment exceeding written protocol
Contact Base hospital for consultation of uncertain rhythm

Effective Date: xx/xx/xxxx
Next Review Date: xx/xx/xxxx

DRAFT