

**SAGINAW VALLEY
MEDICAL CONTROL AUTHORITY
PRACTICE PARAMETER**

**WIDE COMPLEX TACHYCARDIA
WITH PULSE**

- I. Assessment Information**
 - A. Specific Objective Findings:
 - 1. Vital Signs:
 - a. Level of Consciousness
 - b. Adequacy of perfusion: pulse rate, quality and blood pressure.
 - 2. Unstable patient-as defined by any of the following:¹
 - a. Significant chest pain or dyspnea
 - b. Hypotension (systolic BP<90 mmHg)
 - c. Acute pulmonary edema
 - d. Decreased level of consciousness
 - B. Possible dysrhythmias:
 - 1. V-tach
 - 2. SVT with abarency
 - 3. Atrial Fibrillation/Atrial Flutter with abarency

FIRST RESPONDERS

II. Management

- A. Establish and maintain airway, provide oxygenation and support ventilation with BVM-OPA/NPA as needed.
- B. Position of comfort-loosen tight clothing and belts.
- C. Obtain vital signs(blood pressure, pulse and respiratory rate).

BASIC LIFE SUPPORT

- D. Arrange for ALS intercept
- E. Consider Superglottic Airway, if not breathing.
- F. Initiate transport toward ALS intercept, if transporting unit.

ADVANCED LIFE SUPPORT

- G. Monitor **EKG**; obtain **12-Lead**

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H. IV/IO NORMAL SALINE @ TKO

NOTIFY RECEIVING FACILITY

J. UNSTABLE WIDE COMPLEX

TACHYCARDIA(ventricular rate >150)

1. If conscious, consider sedation, (**VALIUM 5-10MG or VERSED 2.5-5MG IV/IO over 1-3minutes**), to control patient discomfort if necessary.

2. **SYNCHRONIZED CARDIOVERSION²@**
 - a) 100 joules; check pulse and rhythm
 - b) 200 joules; check pulse and rhythm
 - c) 300 joules; check pulse and rhythm
 - d) 360 joules; check pulse and rhythm

3. **If CARDIOVERSION is UNSUCCESSFUL**
 - a) **AMIODARONE 150MG IV/IO over 10 min.**
May repeat **AMIODARONE (150mg IV)**
every 10 minutes as needed.

 - b) **REPEAT cardioversion**

4. **If CARDIOVERSION is SUCCESSFUL**
 - a) **AMIODARONE 150MG IV/IO over 10 min.**
May repeat **AMIODARONE (150mg IV)**
every 10 minutes as needed.

5. Administer **MAGNESIUM SULFATE 2gm IV/IO** for suspected torsades de pointes.

6. If airway remains unsecured: **Intubation**

CONTACT MEDICAL CONTROL

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- K. Possible orders post-radio contact(UNSTABLE):**
1. Repeat **CARDIOVERSION**

 2. **MAGNESIUM SULFATE 2 GMS** slow IV/IO flushed with IV running wide open for suspected torsades de pointes.

¹ Synchronized cardioversion preceeds drug therapy for hemodynamically unstable patients.

² Biphasic equipment energy levels may be different, but the cycle is the same. Follow manufacturers guidelines. Check pulse and rhythm after each cardioversion.

MDCIS/EMSCC Approved on: _____
MCB/MCA Approved on: <u>17OCT08</u>
Supersedes Version Dated: <u>01NOV03</u>
Effective Date: _____
Revised on: <u>13OCT08</u>

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