



MIAMI TOWNSHIP FIRE & EMS CLERMONT COUNTY, OHIO *PEDIATRIC PROTOCOLS*



UNSTABLE TACHYCARDIA

Historical Findings

1. Age less than or equal to 15 years.
2. Older child may complain of chest pain or rapid heart beat.

Physical Findings

1. Heart rate in infants less than 2 years is usually greater than 220. Heart rate in older children is usually greater than 180.
2. The patient **DOES** display signs of shock with weak or no distal pulse, delayed capillary refill, poor skin perfusion and change in mental status.

EKG Findings

1. Narrow complex tachycardia (SVT)
2. Wide complex tachycardia (V-Tach)

Protocol

1. Initiate contact; reassure, and explain procedures.
2. Assess and secure the patient's airway and provide oxygen per the airway, oxygen and ventilation protocol.
3. Perform patient assessment, obtain vital signs and begin cardiac monitoring.
4. Acquire a 12 Lead ECG and maintain cardiac monitoring at all times.
5. If time permits, initiate IV access with 0.9% normal saline KVO.
6. If the patient is conscious and only on the order of a medical control physician give Versed 0.1 mg/kg (max 5 mg) IV/IM or other medications as directed by medical control.
7. Only on the order of a medical control physician: synchronized cardioversion 0.5 J/kg.
8. If unsuccessful, repeat synchronized cardioversion at 1 J/kg.
9. If unsuccessful, repeat synchronized cardioversion at 2 J/kg.



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10. Reassess ABC's, consider CPR, and transport.