

ADULT RAPID ATRIAL FLUTTER/FIBRILLATION (NARROW COMPLEX TACHYCARDIA)

HPI	Signs & Symptoms	Differential Diagnosis
<ul style="list-style-type: none"> Medications: Digoxin, diet pills, decongestants, thyroid supplements Drugs: caffeine, cocaine, amphetamines PMH of palpitations 	<ul style="list-style-type: none"> HR >100 Irregular narrow complex Chest pain Shortness of breath AMS Hypotension Lack of P waves Dizziness 	<ul style="list-style-type: none"> SVT Sinus tachycardia Junctional tachycardia Acute Coronary Syndrome Hypoxia Hyper/o-kalemia Hypoglycemia Toxins/Overdose Heart failure

	EMR	EMT	PM
1. Provide Adult Routine Medical Care - treat life threatening problems with airway, breathing circulation and disability.	•	•	•
2. Obtain ECG and 12 lead, transmit to receiving facility, and monitor Capnography.		•	•

UNSTABLE: Altered Mental Status, MAP < 65 or SBP < 90

3. Consider sedation for conscious patients MIDAZOLAM: 2 mg IVP/IO, repeat 2 min., max. 10 mg	•
4. Synchronized cardioversion per manufacturer's guidelines.	•
5. For Pain Management : FENTANYL: 1 mcg/kg IVP/IN/IO/IM, max single dose 100 mcg, repeat every 10 min., max total dose 200 mcg	•

STABLE: GCS 15, MAP >65, SBP >90, skin warm/dry

3. Instruct patient to perform vagal maneuver	•	•
4. VERAPAMIL: 5 mg IVP, slowly over 5 min., may repeat 15 min. (if SBP ≥ 90), max. 10 mg		•

PEARLS:

- Vagal maneuvers include: coughing, bearing down, attempting to blow the plunger out of a 10mL syringe.
- As it is difficult to ascertain onset of atrial flutter/fibrillation rhythm, risk of stroke needs to be considered prior to cardioversion.

CARDIOVERSION DOSING CHART:

Zoll	LifePak	Phillips
120J	100J	100J
150J	200J	150J
200J	300J	200J
	360J	