

# STABLE PEDIATRIC TACHYCARDIA

## ADEQUATE PERFUSION

Signs & Symptoms			Possible Causes	
<p><b>Sinus Tachycardia</b></p> <ul style="list-style-type: none"> <li>•P wave normal activity</li> <li>Infant &lt;220 beats/min</li> <li>Child &lt;180 beats/min</li> </ul>	<p><b>Supraventricular Tachycardia</b></p> <ul style="list-style-type: none"> <li>•P wave absent</li> <li>•HR not variable</li> <li>•Abrupt rate change</li> <li>Infants ≥220 beats/min</li> <li>Child ≥180 beats/min</li> </ul>	<p><b>Ventricular Tachycardia</b></p> <ul style="list-style-type: none"> <li>•P wave absent</li> <li>•HR not variable</li> <li>•Wide QRS complex</li> </ul>	<ul style="list-style-type: none"> <li>• Hypovolemia</li> <li>• Hypoxia</li> <li>• Acidosis</li> <li>• Hyper/o-kalemia</li> <li>• Hypoglycemia</li> <li>• Hypothermia</li> </ul>	<ul style="list-style-type: none"> <li>• Toxins/OD</li> <li>• Cardiac tamponade</li> <li>• Trauma</li> <li>• PE</li> <li>• Tension pneumo</li> </ul>

	EMR	EMT	PM
1. Provide <a href="#">Pediatric Routine Medical Care</a> - treat life threatening problems with airway, breathing circulation and disability.	•	•	•
2. Obtain ECG, monitor Capnography.		•	•

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

3. Instruct patient to perform vagal maneuver	•	•
4. <b>ADENOSINE:</b> 0.1 mg/kg, max. dose 6 mg, rapid IVP, followed by rapid flush <b>NORMAL SALINE:</b> 5 mL		•

### SUPRAVENTRICULAR TACHYCARDIA

5. If no response in 2 min. - <b>ADENOSINE:</b> 0.2 mg/kg, max. dose 12 mg, rapid IVP, followed by rapid flush <b>NORMAL SALINE:</b> 5 mL	•
6. If no response in 2 min., consider sedation for conscious patients <b>MIDAZOLAM:</b> 0.2 mg/kg IVP/IO, max. single dose 2 mg, may repeat 2 min., max. 10 mg	•
7. <a href="#">Synchronized cardioversion</a> 1 J/kg	•
8. If no immediate response, synchronized cardioversion 2 J/kg	•
9. For <a href="#">Pain Management</a> : <b>FENTANYL:</b> 1 mcg/kg IVP/IN/IO/IM, max single dose 100 mcg, repeat every 10 min., max total dose 200	•

### VENTRICULAR TACHYCARDIA

5. If no response in 2 min. - <b>AMIODARONE:</b> 5 mg/kg, max. dose 150 mg, diluted in 100 mL D5W IVPB, over 10 min.	•
6. If no response in 2 min., consider sedation for conscious patients <b>MIDAZOLAM:</b> 0.2 mg/kg IVP/IO, max. single dose 2 mg, may repeat 2 min., max. 10 mg	•
7. Synchronized cardioversion 1 J/kg	•
8. If no immediate response, synchronized cardioversion 2 J/kg	•
9. For Pain Management: <b>FENTANYL:</b> 1 mcg/kg IVP/IN/IO/IM, max single dose 100 mcg, repeat every 10 min., max total dose 200 mcg	•

#### NOTE:

1. If receiving sedation or pain medication, monitor patient with continuous Capnography
2. Do not delay cardioversion for sedation

**Use Calculator for dosing**