PEDIATRIC NARROW COMPLEX TACHYCARDIA - ALS

PRMC

Monitor

Pulse present?

YES

Probable Sinus Tach
Infant rate: Usually <220 bpm
Child rate: Usually <180 bpm

Probable SVT

Consider cause and initiate specific treatment (see chart)

Probable cause?

NO

See VF/VT or PEA protocol

Able to establish vascular access?

NO, or Cardiac compromise

YES

Adenosine 0.1 mg/kg IV/IO
(maximum first dose 6 mg)
Follow with Normal Saline bolus 2-5 ml
May repeat Adenosine dose
Adenosine 0.2 mg/kg IV/IO
(maximum dose 12 mg)
Follow with Normal Saline bolus 2-5 ml

If Adenosine fails to convert, reevaluate rhythm

Consider cardioversion
Assess pain severity and treat per pain management protocol

Synchronized cardioversion
0.5 J/kg to 1 J/kg

Transport and contact Medical Control as appropriate

Repeat cardioversion
2 J/kg as needed