

Southeast Michigan Regional Protocol

Genesee, HEMS (Wayne), Lapeer, Macomb, Oakland, and Washtenaw/Livingston MCA's

External Pacing (If Available)

External pacing is indicated for patients experiencing symptomatic bradycardia.

Pre-Radio

PARAMEDIC

1. Follow the General Pre-Hospital Care Protocol.
2. Start an IV NS KVO.
3. If time and condition allow, administer Fentanyl 1 mcg/kg IV prior to pacing.
4. Place pacing electrodes in the anterior/posterior position with the negative lead on the anterior side. If this is not possible, then anterior/anterior placement is acceptable.
5. Set pacing rate at 60 bpm and begin pacing.
6. Increase by increments of 5 mA until capture is obtained.

Electrical capture is evidenced by a wide QRS complex immediately following the pacer spike. After capture, check for palpable carotid pulse.

7. If capture is evident but symptoms continue, consider increasing rate to 80 bpm. This may be done prior to medical control contact.
8. If pacer is unable to capture at maximum output, turn off pacer and return to appropriate protocol and contact medical control.