

Southeast Michigan Regional Protocol

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

Wide Complex Tachycardia (Presumed Ventricular Tachycardia)

A guideline for patients with STABLE wide complex tachycardia. **SYNCHRONIZED CARDIOVERSION PRECEEDS DRUG THERAPY FOR HEMODYNAMICALLY UNSTABLE PATIENTS.** Unstable patients may be defined as those having a wide complex tachycardia with: chest pain, shortness of breath, decreased level of consciousness, hypotension, shock, or pulmonary edema.

Pre-Radio

PARAMEDIC

1. Follow the General Pre-Hospital Care Protocol.
2. If time and condition allow, administer Fentanyl 1 mcg/kg IV prior to cardioversion.
3. If the patient is unstable, or becomes unstable, cardiovert immediately beginning at 100 J, increasing to 200 J, 300 J, 360 J. For a biphasic device start at 100J, increasing to 150 J, 200 J..
4. Start an IV NS KVO.
5. Administer Amiodarone (Cordarone) 150 mg IV over 10 minutes.
6. Administer Magnesium Sulfate 2 gm IV/IO for torsades de pointes.

Post-Radio

PARAMEDIC

7. Administer additional Amiodarone (Cordarone) 150 mg IV over 10 minutes.