

SUPRAVENTRICULAR TACHYCARDIA															
ADULT	PEDIATRIC (≤ 34Kg)														
BLS															
<ul style="list-style-type: none"> <li>• <b>Universal Protocol #601</b></li> <li>• Pulse Oximetry               <ul style="list-style-type: none"> <li>- O<sub>2</sub> administration per Airway Management Protocol #602</li> </ul> </li> </ul>	Same as Adult														
ALS															
<p><b>Stable</b></p> <ul style="list-style-type: none"> <li>• Attempt vagal maneuvers</li> <li>• <b>Adenosine</b> 6 mg IV followed by 20 mL NS bolus</li> <li>• <b>Adenosine</b> 12 mg followed by 20 mL NS bolus               <ul style="list-style-type: none"> <li>○ May repeat once</li> </ul> </li> </ul> <p><b>Unstable</b></p> <ul style="list-style-type: none"> <li>• Synchronized cardioversion (see notes)</li> <li>• <b>Midazolam</b> up to 2 mg slow IV or 5 mg IN (split into two doses 2.5 mg each nostril) to pre-medicate prior to cardioversion</li> </ul>	<p><b>Stable</b></p> <ul style="list-style-type: none"> <li>• Attempt vagal maneuvers</li> <li>• <b>Adenosine</b> 0.1 mg/kg IV followed by 20 mL NS bolus</li> <li>• <b>Adenosine</b> 0.2 mg/kg IV followed by 20 mL NS bolus</li> </ul> <p><b>Unstable</b></p> <ul style="list-style-type: none"> <li>• Synchronized cardioversion (see notes)</li> <li>• <b>Midazolam</b> 0.1 mg/kg slow IV/IN, not to exceed 2 mg to pre-medicate prior to cardioversion</li> </ul>														
Base Hospital Orders Only															
<ul style="list-style-type: none"> <li>• As needed</li> </ul>															
Notes															
<ul style="list-style-type: none"> <li>• Obtain 12-lead ECG before and after conversion if possible</li> <li>• Preferred IV site for Adenosine administration is in a proximal vein with a large bore catheter</li> <li>• Vascular access may be omitted prior to cardioversion if in extremis</li> <li>• Typical SVT in adults is a QRS &lt; 0.12 seconds</li> <li>• Typical SVT in pediatric patients is a QRS &lt; 0.09 seconds with rates &gt;180 for children and &gt;220 in infants</li> <li>• Avoid Adenosine in atrial fibrillation and atrial flutter</li> <li>• Synchronized/Unsynchronized Sequences (if synchronized mode is unable to capture use unsynchronized cardioversion)</li> <li>• Use manufacturer recommended energy settings if different from below</li> </ul>															
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