



ORANGE COUNTY EMERGENCY MEDICAL SERVICES
INTERFACILITY TRANSPORT STANDING ORDERS/TREATMENT CRITERIA
INTERFACILITY TRANSPORT ALS STANDING ORDERS: CARDIAC
RHTYHMS

#: IFT- SO-2b
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Org. Date: 08/2015
Revised: 4/01/2017

BRADYCARDIA - SYMPTOMATIC

Adult/Adolescent;

1. Initiate Transcutaneous Pacing (see Procedure PR-100)
 - A. If capture of cardiac rhythm successful, transport while being paced.
 - B. If capture of cardiac rhythm not successful, give:
 - ▶ *Atropine 0.5 mg IV or IM, may repeat in 3 minutes as necessary to maintain rhythm*
 - C. Initiate or continue rapid transport to pre-determined destination after first dose given.

Pediatric:

1. Initiate adequate ventilation and oxygenation
2. If not improved with ventilation and oxygenation, give:
 - ▶ *Atropine 0.02 mg/kg IV or IM, may repeat in 3 minutes as necessary to maintain rhythm*
3. Initiate or continue rapid transport to pre-determined destination after first dose given and allowed two minutes to circulate.

SUPRAVENTRICULAR TACHYCARDIA

ADEQUATE PERFUSION

Adult/Adolescent:

1. Obtain 12 lead ECG
2. Valsalva maneuver, if no response, give:
 - ▶ *Adenosine 12 mg rapid IV, may repeat 12 mg rapid IV (if rhythm is regular)*
3. Initiate or continue rapid transport to pre-determined destination after first dose given and allowed two minutes to circulate.

Pediatric:

1. Support ventilation and oxygenation
2. Initiate or continue rapid transport to pre-determined destination.

POOR PERFUSION

(hypotension, altered mental status, shock, chest pain, respiratory distress with rales)

Adult/Adolescent:

1. Synchronized cardioversion, biphasic
2. If patient did not cardiovert and lungs clear to auscultation, give:
 - ▶ *250mL saline bolus*
3. Initiate or continue rapid transport to pre-determined destination if cardioverts or while saline infusing.

Pediatric:

1. Normal saline bolus 20 mL/kg, may repeat 20 mL/kg twice
2. Initiate or continue rapid transport to pre-determined destination while saline infusing.

VENTRICULAR TACHYCARDIA (WIDE COMPLEX) WITH PULSES

ADEQUATE PERFUSION

Adult/Adolescent:

1. Support ventilation and oxygenation, monitor closely for deterioration.
2. Initiate or continue rapid transport to pre-determined destination

Pediatric:

1. Support ventilation and oxygenation and transport.
2. Initiate or continue rapid transport to pre-determined destination.

POOR PERFUSION

(hypotension, altered mental status, shock, chest pain, respiratory distress with rales)

Adult/Adolescent:

1. Synchronized cardioversion, biphasic
2. If does not cardiovert, give:
 - ▶ *Amiodarone 150 mg slow IV/IO, may repeat once in 5 minutes*
3. Repeat synchronized cardioversion, biphasic, after each amiodarone dose has circulated two minutes.
4. Initiate or continue rapid transport to pre-determined destination.

Pediatric:

1. Synchronized cardioversion, biphasic 1 J/kg
2. If does not cardiovert, give:
 - ▶ *Amiodarone 5 mg/kg slow IV/IO, may repeat once in 5 minutes*
3. Repeat synchronized cardioversion, biphasic, 2 J/kg after each amiodarone dose has circulated two minutes.
4. Initiate or continue rapid transport to pre-determined destination.

Approved:

Review Dates: 11/16
Final Date for Implementation: 04/01/2017
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