



**INLAND COUNTIES  
EMERGENCY MEDICAL AGENCY  
POLICY AND PROTOCOL MANUAL**

**Reference No. 14030**  
Effective Date: 05/01/24  
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**BRADYCARDIAS - ADULT**

**STABLE BRADYCARDIA**

**I. FIELD ASSESSMENT/TREATMENT INDICATORS**

- Heart rate less than 60 bpm.
- Signs of adequate tissue perfusion.

**II. BLS INTERVENTIONS**

- Recognition of heart rate less than 60 bpm.
- Reduce anxiety, allow patient to assume position of comfort.
- Administer oxygen as clinically indicated.

**III. LIMITED ALS (LALS) INTERVENTIONS**

- Establish vascular access if indicated. If lungs sound clear, consider bolus of 300 cc NS, may repeat.
- Monitor and observe for changes in patient condition.

**IV. ALS INTERVENTIONS**

- Establish vascular access if indicated. If lungs sound clear, consider bolus of 300 ml NS, may repeat.
- Place on cardiac monitor, obtain rhythm strip for documentation and upload to ePCR with a copy to receiving hospital. If possible, obtain a 12-lead ECG to better define the rhythm.
- Monitor and observe for changes in patient condition.

**V. REFERENCES**

<u>Number</u>	<u>Name</u>
11010	Medication - Standard Orders
11020	Procedure - Standard Orders

**UNSTABLE BRADYCARDIA**

**I. FIELD ASSESSMENT/TREATMENT INDICATORS**

- Signs of inadequate tissue perfusion/shock, ALOC, or ischemic chest discomfort.

**II. BLS INTERVENTIONS**

- Recognition of heart rate less than 60 bpm.
- Reduce anxiety, allow patient to assume position of comfort.

- Administer oxygen as clinically indicated.

### III. LIMITED ALS (LALS) INTERVENTIONS

- Establish vascular access if indicated by inadequate tissue perfusion.
  - Administer IV bolus of 300 ml NS, may repeat one (1) time.
  - Maintain IV rate at TKO after bolus.
- Monitor and observe for changes in patient condition.

### IV. ALS INTERVENTIONS

- Perform activities identified in the BLS and LALS Interventions.
- Place on cardiac monitor, obtain rhythm strip for documentation and upload to ePCR with a copy to receiving hospital. If possible, obtain a 12-lead ECG to better define the rhythm.
- Administer Atropine per ICEMA Reference #11010 - Medication -Standard Orders.
- If Atropine is ineffective, or for documented MI, 3<sup>rd</sup> degree AV Block with wide complex and 2<sup>nd</sup> degree Type II AV Block, utilize Transcutaneous Cardiac Pacing, per ICEMA Reference #11020 Procedure - Standard Orders.

#### ➤ BASE HOSPITAL MAY ORDER THE FOLLOWING:

For End Stage Renal Disease (ESRD) patients on dialysis with suspected hyperkalemia And hemodynamic instability, with documented sinus bradycardia, 3<sup>rd</sup> degree AV block and 2<sup>nd</sup> degree Type II AV Block, slow junctional and ventricular escape rhythms, or slow atrial fibrillation, administer Calcium Chloride per ICEMA Reference # 11010- Medication-Standard Orders

- Contact base hospital if interventions are unsuccessful.

### V. REFERENCES

<u>Number</u>	<u>Name</u>
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