

Pediatric: Tachycardia With Pulses and Poor Perfusion

EMR

- ABC and vital signs
- Airway management with **oxygen** therapy maintaining a SaO₂ of 94-98% through titration
- AED

EMR STOP

EMT

- Cardiac Monitor
- 12 Lead EKG, if available

EMT STOP

EMT IV

ADVANCED EMT

- Vascular access
- Normal Saline 20 ml/kg IV bolus; may repeat once

EMT IV / ADVANCED EMT STOP

Key Points/Considerations

- Call Medical Control as soon as possible
- Newborn/Infant SVT if pulse greater than 220 bpm; child over 1 year of age SVT if pulse greater than 180 bpm, with no discernable p-waves
- The most common causes of Sinus Tachycardia in children are fever and dehydration
- UNSTABLE includes cardio-respiratory compromise, hypotension, or altered level of consciousness
- Do not treat asymptomatic tachycardia. Contact Medical Control.