**SKILL: TRANSCUT ANEOUS PACING**

**LEARNER NAME: DATE: / /**

*\*\*Learner expected to introduce him/herself and ask for consent at all times*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No** | **PERFORMANCE** | **Possible Points** | **Points Obtained** | **Competent** | **Omitted** |
|  |  |  |  |  |  |
|  | **Patient Assessment** |  |  |  |  |
|  | Preparation |  |  |  |  |
|  | Attach ECG monitor and pulse oximeter |  |  |  |  |
|  | Establish IV |  |  |  |  |
|  | Determine need for pacing |  |  |  |  |
|  | Rule out reversible causes and contra- indications |  |  |  |  |
|  | Correctly check and assemble all equipment:  a. Cardiac monitor and defibrillator  b. Pacemaker and electrodes  c. ALS supplies |  |  |  |  |
|  | Sedation and analgesia PRN |  |  |  |  |
|  | **Pacing** |  |  |  |  |
|  | Applies pacing electrodes correctly  (anterior-posterior or sternum-apex) as per  manufacturer’s recommendations |  |  |  |  |
|  | Attach pacing cable |  |  |  |  |
|  | Switch *pacing* function on (demand/fixed) |  |  |  |  |
|  | Adjust pacing rate to 60 - 80/min |  |  |  |  |
|  | Adjust ECG amplitude to correct size |  |  |  |  |
|  | Activate pacing button (*Start* pacing) |  |  |  |  |
|  | Increase current output (mA) until electrical capture occurs |  |  |  |  |
|  | Palpate right femoral pulse to confirm presence/absence of mechanical capture |  |  |  |  |
|  | Whilst palpating R. femoral pulse, increase current until mechanical capture is achieved |  |  |  |  |
|  | Increase the output by an additional 10% of the threshold value |  |  |  |  |
|  | **Reassess full ABC** |  |  |  |  |
|  | If patient is still hypotensive, increase rate (stepwise, max 100) and reassess blood pressure (current may need to be increased when rate is increased) |  |  |  |  |
|  | Continue increasing the rate in a stepwise fashion, titrating to BP |  |  |  |  |
|  | If still hypotensive while pacing at 100bpm, begin titrating inotropic support |  |  |  |  |

References:

* PHECC

**Overall assessment of learner’s performance:**

**NOT YET COMPETENT**

**COMPETENT**

Assessor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Qualification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_