

**Assess appropriateness for clinical condition.
Heart rate typically $\geq 150/\text{min}$ if tachyarrhythmia.**

Identify and Treat Underlying Cause

- Maintain patient airway; assist breathing as necessary
- Oxygen (if O_2 sat $< 94\%$)
- Cardiac monitor to identify rhythm; monitor blood pressure and oximetry

Persistent Tachyarrhythmia Causing:

- Hypotension?
- Acutely altered mental status?
- Signs of shock?
- Ischemic chest discomfort?
- Acute heart failure?

**Synchronized
Cardioversion***

- Consider sedation
- If regular narrow complex, consider adenosine

**Wide QRS?
0.12 second**

- IV access and 12-lead ECG if available.
- Consider adenosine only if regular and monomorphic.
- Consider antiarrhythmic infusion.
- Consider expert consultation.

- IV access and 12-lead ECG if available.
- Vagal maneuvers.
- Adenosine (if regular)
- β -Blocker or calcium channel blocker.
- Consider expert consultation.