

	PEDIATRIC CARDIAC PC-03	BRADYCARDIA	Page 1 of 1 Last Revision: 04/01/2017
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History and Physical:

Historical Findings	Physical Findings
<ul style="list-style-type: none"> ▪ Medical etiology 	<ul style="list-style-type: none"> ▪ Weak, dizzy ▪ Chest pain ▪ Pulmonary edema ▪ AMS ▪ Hemodynamically unstable ▪ Any patient with a heart rate of <ul style="list-style-type: none"> ▪ < 80/min in an infant ▪ < 60/min in a child

Assessment:

- Cardiac Assessment

Clinical Management Options:

Interventions	Pharmacology
<ul style="list-style-type: none"> ▪ Continuous CPR if, <ul style="list-style-type: none"> ○ Infant/Child less than 8 years of age with pulse <60/min and signs of poor perfusion. ▪ BVM ventilation with O₂, OPA/NPA ▪ ResQPod (>10 kg), if available <ul style="list-style-type: none"> ○ Remove immediately if ROSC occurs ▪ O₂ via most appropriate method 	