Adult Bradycardia with a Pulse
Assessment and Treatment

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Healthcare Certifications

STEP #1

ASSESS APPROPRIATENESS FOR CLINICAL CONDITION

Heart rate typically <50/min if bradyarrhythmia.

STEP #2

IDENTIFY AND TREAT THE UNDERLYING CAUSE...

- Maintain patent airway;
  - → Assist breathing as necessary
- Oxygen (if hypoxemic)
- Cardiac monitor to identify rhythm
  - → Monitor blood pressure and oximetry
- IV access
- 12-Lead ECG if available; don't delay therapy
- Consider possible hypoxic and toxicologic causes

STEP #3

IS PERSISTENT BRADYARRHYTHMIA CAUSING...

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

YES

ATROPINE (0.5 mg IV)

If Atropine ineffective:
- **TRANSCUTANEOUS PACING**
  and/or
- **DOPAMINE INFUSION**
  and/or
- **EPINEPHRINE INFUSION**

CONSIDER:

- Expert consultation
- Transvenous pacing

NO

MONITOR AND OBSERVE

Doses and Details

ATROPINE IV DOSE
First Dose
- 0.5 mg bolus
- Repeat every 3-5 min.
- Maximum: 3 mg.

DOPAMINE IV INFUSION
Usual Infusion Rate
- 20 mcg/kg/min
- Titrate to pt. response; taper slowly

EPINEPHRINE IV INFUSION
Usual Infusion Rate
- 2-10 mcg/min infusion
- Titrate to pt. response