

Sierra – Sacramento Valley EMS Agency Treatment Protocol

C-3P (LALS)

Pediatric Bradycardia With Pulses

Approval: Troy M. Falck, MD – Medical Director

Effective: 06/01/2024

Approval: John Poland – Executive Director

Next Review: 04/2027

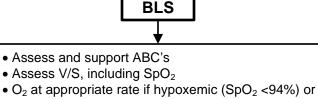
Search For Possible Contributing Factors

- **H**ypovolemia - Hypoxia
- Hydrogen Ion (Acidosis)
- **H**ypo-/hyperkalemia - Hypothermia

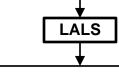
- Tamponade, cardiac Tension pneumo
- Thrombosis, pulmonary
- Thrombosis, cardiac - Toxins

Signs of Cardiopulmonary Compromise

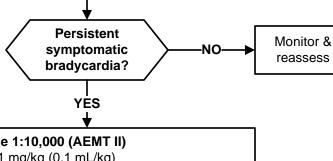
- Acutely altered mental status
- Hypotension
- Signs of shock



- short of breath • Start CPR if HR <60/min with signs of poor perfusion
- despite oxygenation/ventilation



- Cardiac & EtCO₂ monitoring (AEMT II)
- Consider IV/IO NS (may bolus 20 mL/kg)



Epinephrine 1:10,000 (AEMT II)

- IV/IO: 0.01 mg/kg (0.1 mL/kg)
- Repeat every 3-5 mins

Atropine (AEMT II) - if no response to epinephrine

- IV/IO: 0.02 mg/kg
- Min dose: 0.1 mg
- Max single dose: 0.5 mg