P 3 Bradycardia – Unstable

Age < 30 days: HR < 100 | Age > 30 days < 1 yr: HR < 80 | Age > 1 year: HR < 60 bpm with hypotension, acutely altered mental status, shock, ischemic chest discomfort, or acute heart failure.

START

❶ **Call for help and a code cart/defibrillator**
- **Ask: *"Who will be the crisis manager?"***

❷ **Turn FiO_2 to 100%**
- Verify oxygenation/ventilation adequate
  - If ongoing Hypoxia, go to ▷ Pedi CHKLST 10

❸ **Give atropine**

❹ **Stop surgical stimulation (if laparoscopy, desufflate)**

❺ **If atropine ineffective:**
- Start epinephrine or dopamine infusion

  -or-
- Start transcutaneous pacing

❻ **Consider...**
- Turning off volatile anesthetics if patient remains unstable
- Assessing for drug induced causes (e.g., beta blockers, calcium channel blockers, digoxin)
- Calling for pediatric cardiology consultation (Amion, Remis). Evaluate for myocardial ischemia.

DRUG DOSES and treatments

Atropine:	0.02mg/kg IV, may repeat up to 3 mg total
Epinephrine:	2 – 10 mcg/kg/min IV

OVERDOSE treatments

Beta-blocker:	Glucagon: 0.05 mg/kg IV, then 0.07 mg/kg/h IV fusion
Calcium channel blocker:	Calcium Chloride Infusion: 10-20 mg/kg IV

TRANSCUTANEOUS PACING instructions

1. Place pacing electrodes front and back
2. Connect 3-lead ECG from pacing defibrillator to the patient
3. Turn monitor/defibrillator to PACER mode
4. Set PACER RATE (ppm) to desired HR (Adjust based on clinical response once pacing is established)
5. Start at 60 mA of PACER OUTPUT and increase until electrical capture (pacer spikes aligned with QRS complex)
6. Confirm effective capture
   - Electrically: assess ECG tracing
   - Mechanically: palpate femoral pulse (carotid pulse unreliable)

During RESUSCITATION

Airway:	Assess and secure
Circulation:	• Confirm adequate IV or IO access • Consider IV fluids wide open

All reasonable precautions have been taken to verify the information contained in this publication. The responsibility for the interpretation and use of the materials lies with the reader. Revised Jan 2013 (011613.1)
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