

Approach to Bradycardia

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The core differential diagnosis for bradycardia: **drugs, lytes, ischemia**

- 1) Get an ECG to look for ischemia, heart block, other
- 2) Check if patient is symptomatic
- 3) Give atropine 0.5 mg IV for symptomatic bradycardia
- 4) Start an epinephrine drip
- 5) Start pacing and consult cardiology
 - Transcutaneous with your defibrillator -> often has poor capture
 - Transvenous at right internal jugular or left subclavian -> often has better capture

<i>HE DIES Mnemonic</i>
Hypothyroid
Elevated ICP
Drugs
Ischemia
Electrolytes
Sick Sinus Syndrome

Quick Facts

- Every patient with bradycardia needs lytes checked
- In your ED learn how to put the defibrillator in pacing mode
- Heart block types:
 - o 1st degree with PR interval >200 ms
 - o 2nd degree
 - Type 1: sequentially elongating PR followed by dropped beat
 - Type 2: Intermittent dropped beats (this is the bad one)
 - o 3rd degree with asynchronous atrial and ventricular activity with an escape rhythm