

**Ventricular Tachycardia with a Pulse / Wide Complex Tachycardia of Uncertain Type (Adult)****Paramedic**

1. For patients with Unstable Ventricular Tachycardia with a pulse:
  - a. Perform synchronized cardioversion using 100 joules.
  - b. Repeat synchronized cardioversion as necessary using 200, 300, 360 joules.
2. Administer Amiodarone 150 mg, diluted in 100 ml D<sub>5</sub>W over 10 minutes IV infusion.

**● Paramedic STOP****Medical Control Options**

*If Amiodarone fails to convert the dysrhythmia:*

1. Perform synchronized cardioversion using 100 joules.
2. Synchronized cardioversion may be repeated as necessary using 200, 300, 360 joules.
3. Administer Magnesium Sulfate 2 gm, IV bolus, diluted in 10 ml of Normal Saline (0.9% NS), over 2 minutes.
4. In cases of suspected hyperkalemia or Calcium Channel Blocker overdose, administer Calcium Chloride (CaCl<sub>2</sub>) 1 gm, **slowly**, IV bolus. Follow with a crystalloid fluid flush.
5. For pre-existing acidosis, administer Sodium Bicarbonate 44-88 mEq IV bolus.
  - a. Repeat Sodium Bicarbonate 44 mEq, IV, every 10 minutes.

**Key Points / Considerations**

1. **Refer to considerations above in the Dysrhythmia (Adult) protocol.**
2. Calcium Chloride and Sodium Bicarbonate should be given in separate IV lines or separated by a flush of at least 20 ml of crystalloid fluid.