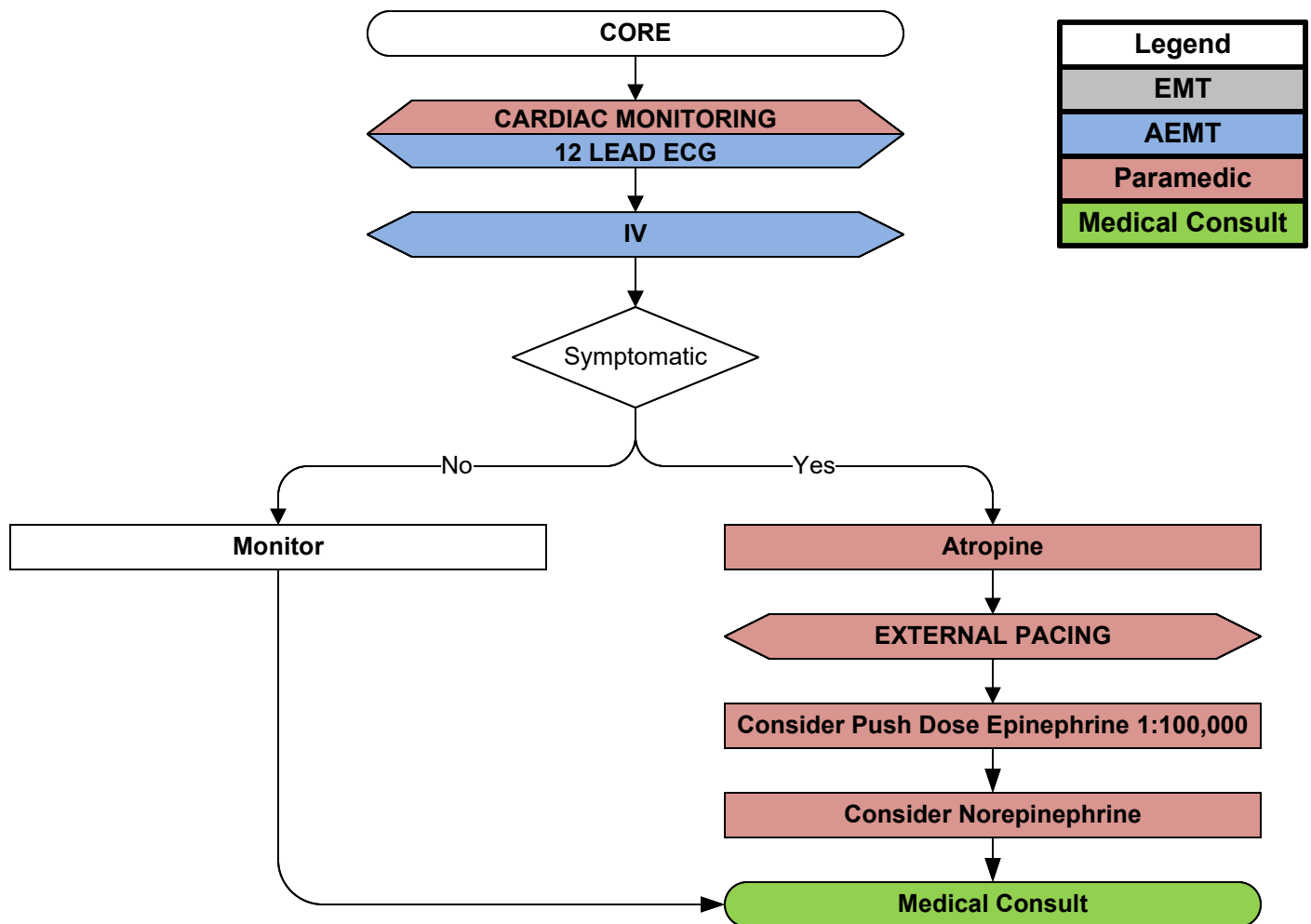


BRADYCARDIA

History: ○ Medications ○ Beta-Blockers ○ Calcium channel blockers ○ Clonidine ○ Digitalis ○ Pacemaker ○ SAMPLE ○ Thyroid problem ○ Cardiac history	Signs and Symptoms: ○ HR < 60/min ○ Diaphoresis ○ Chest pain ○ Respiratory distress ○ Hypotension/orthostasis ○ Altered mental status ○ Syncope	Differential: ○ Acute myocardial infarction ○ Hypoxia ○ Hypothermia ○ Sinus bradycardia ○ Medication side effect ○ Hypothyroidism ○ History of athletic lifestyle ○ Spinal cord lesion ○ Sick sinus syndrome ○ AV blocks (1°, 2°, or 3°) ○ Head injury (elevated ICP) or Stroke
---	---	--



Pearls:

- Symptomatic bradycardia is defined as a pulse rate of < 60 bpm with a SBP < 90 mmHg, shortness of breath, altered mental status, and /or other signs of hypoperfusion.
- Treatment of choice for 2° type II and 3° AV heart blocks with serious signs/symptoms is external pacing. Consult medical control if serious signs/symptoms do not exist.
- Transplanted hearts will not respond to Atropine: external pacing is the treatment of choice.
- If hypotension exists, treat bradycardia first. If hypotension persists once HR is normalized, treat hypotension.
- A 12 lead ECG is essential in assessing for cardiac ischemia.
- The use of Lidocaine or Amiodarone is contraindicated in patients with heart block or bradycardiac with PVCs.