



## MEDICAL DIRECTIVE –

### Advanced Life Support (ALS): Tachycardia with a Pulse

Approved by/Date: **Medical Advisory Committee – June 23, 2015**

#### Authorizing physician(s)

- LHO - Code Blue, Emergency Department & Critical Care Physicians
- LHB - Emergency Department and Critical Care Physicians
- LHPP - Emergency Department Physicians

#### Authorized to who

Registered Nurses (RN)/Registered Respiratory Therapists (RRT) that have the knowledge, skill and judgment and hold competency in the Lakeridge Health Advanced Life Support competency validation program. Competency validation on theory and practical simulation testing must be completed every two years. Must maintain current Advanced Cardiac Life Support (ACLS) provider status (new or renewal course every 2 years).

#### Patient Description / Population

Patients with symptomatic Ventricular Tachycardia (VT) or Supraventricular tachycardia (SVT), defined as a heart rate greater than 150 beats per minute (bpm) and a systolic blood pressure [SBP] less than 90 mmHg plus one or more of the following additional signs and symptoms: acute altered mental status, ongoing chest pain, congestive heart failure, or other signs of shock (dizzy, diaphoretic etc.) Adult patients or patients that appear to be 16 years of age or older.

#### Medical Directive Description/Physician's Order

1. Notify physician STAT
2. Obtain ECG and 12 lead to confirm rhythm interpretation
3. Administer Amiodarone (IV) 150 mg mixed in 100 mL D5W minibag and infuse over ten minutes. Continuously monitor the patient utilizing cardiac monitor. **May repeat Amiodarone (IV) once as necessary prior to physician arrival.**
4. Where the patient appears unstable, apply pads in case of need for cardioversion by the physician. **Note: Cardioversion is not within RN/RRT scope of practice**

[See Appendix A](#)

**Specific conditions/circumstances that must be met before the Directive can be implemented**

The physician must not be immediately available.

**Contraindications to the implementation of the Directive**

1. Documented allergies to the medication being administered
2. Rhythm confirmed to be Sinus Tachycardia
3. Patient is Vital Signs Absent (VSA)
4. Patient capable of consent refuses treatment or substitute decision maker refuses on behalf of the patient. **Note: If a patient or substitute decision maker refuses treatment contact the physician immediately to determine plan of care.**

**Identify relevant Delegated Control Act or Added Skill associated with this Directive**

N/A

**Documentation requirements**

Documentation of initiation of the “Tachycardia with a Pulse” medical directive must be provided on the physician order sheet and in the health professional’s documentation section of the patient chart. Documentation on the Code Blue Record as required.

**Review/Evaluation Process (how often/by who)**

The medical directive will be reviewed every 2 years by the Section Chief of Critical Care and the Adult Resuscitation Committee.

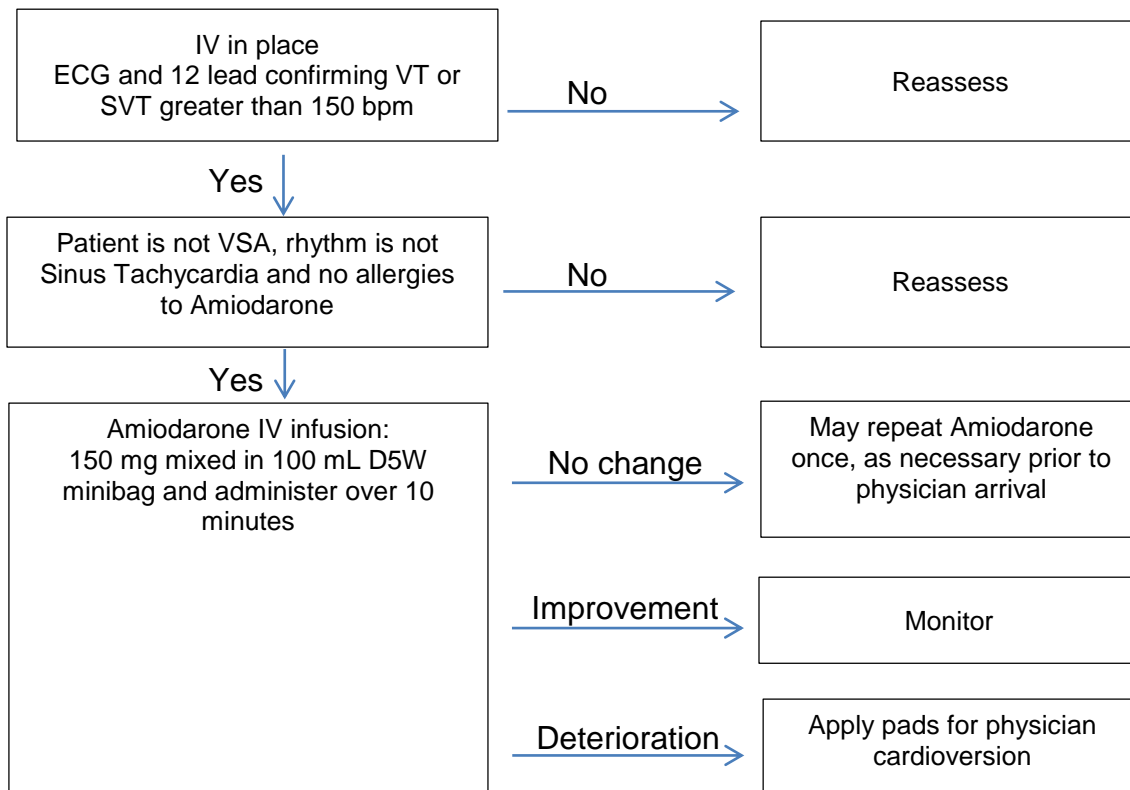


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#### Appendix A: Advanced Life Support (ALS): Tachycardia with a Pulse





Lakeridge  
Health

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## **MEDICAL DIRECTIVE – Advanced Life Support (ALS): Tachycardia with a Pulse**

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### **Related Documents**

Resuscitation Status Policy  
IV Monographs for Amiodarone

### **References**

American Heart Association (2010). Retrieved February 2011 <http://acls-algorithms.com/>

College of Nurses of Ontario (2009). Legislation and Regulation RHPA: Scope of practice, controlled acts model. Reference document - Retrieved July 28, 2009, from College of Nurses of Ontario Web site: [http://www.cno.org/docs/policy/41052\\_RHPAscope.pdf](http://www.cno.org/docs/policy/41052_RHPAscope.pdf)