

Supraventricular Tachycardia (SVT) (Adult)

Paramedic

1. Unstable SVT
 - 1.1 Perform initial synchronized cardioversion using 100 joules
 - 1.2 Repeat synchronized cardioversion as needed using 200, 300, and 360 joules
2. Stable SVT
 - 2.1 Administer Adenosine 6 mg IV rapidly, followed with a crystalloid fluid flush and observe EKG monitor for 1-2 minutes for evidence of cardioversion
 - 2.2 For persistent SVT, administer Adenosine 12 mg IV rapidly, followed with a crystalloid fluid flush. Repeat after 1-2 minutes if there is no evidence of cardioversion

Paramedic STOP

Medical Control Options

3. For narrow complex-width tachycardia, administer Diltiazem 0.25 mg/kg IV slowly over 2 minutes while continuously monitoring blood pressure
4. Administer Amiodarone 150 mg IV (diluted in 100 ml D₅W) over 10 minutes

Key Points / Considerations