

INSTRUCTOR NOTES - WIDE COMPLEX TACHYCARDIA

Questions to facilitate debriefing:

What is the differential for a WCT?

- VT vs. SVT with aberrancy
- Better to assume VT if unsure
 1. WCT is VT in 80% (unselected populations)
 2. WCT is VT in 95% of pts with prior MI
 3. Treatment of VT with SVT meds is potentially dangerous, while the reverse is not true

What is the next question to ask?

- STABLE OR UNSTABLE?
- Stable: No evidence of hemodynamic compromise
- Unstable: Awake, with a palpable pulse, but...
 1. hypotension
 2. angina
 3. heart failure
 4. altered level of consciousness
- Arrest: pulseless, unresponsive

What are the causes of ventricular tachycardia?

- 1. Ischemic heart disease**
2. Electrolyte disturbances
 - Hypokalemia
 - Hypomagnesemia
 - (more likely to cause VT when also taking antiarrhythmic meds)
3. QT prolonging drugs
 - Antiarrhythmics
 - Erythromycin
 - fluoroquinolones
- 4.