

PERFORMANCE CHECKLIST – WIDE COMPLEX TACHYCARDIA

	C O M P L E T E	P R O M P T E D	N O T D O N E		CORE COMP
Initial Assessment				Introduces self to patient	IP
				Places pt on monitor	PC
				Identifies wide complex on monitor, orders ECG	PC, MK
				Elicits AMPLE history	PC
				<i>Lung exam:</i> Clear bilaterally	PC
				<i>CV exam:</i> S4 gallop, strong peripheral pulses	PC
				<i>Neuro exam:</i> alert and oriented	PC IP
				Identifies patient as hemodynamically stable	MK, PC
				Places pacer/defib pads due to risk of deterioration	MK, PC
Treatment				Administers antidysrhythmic Amiodarone 150mg or Lidocaine 1mg/kg	MK
				Synchronized cardioversion	MK PC
				Explains procedure to patient	PC
				Obtains informed consent	PC
				Prepares airway equipment before sedating	PC
				Sedates patient before procedure	PC
				Synchronizes before delivering shock	PC
				Orders repeat ECG after cardioversion	PC
				Re-evaluates patient's vitals	PC
					PC
Work-Up				CBC, CMP, Mg	PC
				TSH	PC
				CIEs	PC
				Interprets initial ECG as VT	PC, MK
				CXR	PC
				Interprets post-cardioversion ECG correctly	MK
				Can list 3 etiologies for ventricular arrhythmias	PC
Reassessment/Treatment				Re-examines pulses, vitals with change in status	PC
				Identifies patient as hemodynamically unstable	PC
				Performs electrical cardioversion	PC
				Starts infusion of antidysrhythmic agent	PC MK
Disposition				Cardiology consultation	SBP, ICS
				Admit to CCU	SBP