### INDICATION
- Patients experiencing severe symptomatic bradycardia with signs and symptoms of inadequate cerebral or cardiac perfusion. Symptoms will include:
  - Chest pain.
  - Hypotension.
  - Acute onset of pulmonary edema.
  - Altered mental status.
  - Seizure.

### PROCEDURE

#### ADULT
- Place pads on the patient’s chest according to manufacturer’s recommendations.
- Set initial pacing rate at 80 pulses per minute (ppm).
- Begin output at 10 milliamps (mA). Increase slowly by 10 mA until capture / pulses are noted. Once capture is confirmed, increase mA by 10%.
- If capture is maintained but the patient remains symptomatic of inadequate cerebral or cardiac perfusion (systolic blood pressure <100, ALOC) consider increasing the rate by 10 ppm. Do not exceed 100 ppm.

#### PEDIATRIC
- Use pediatric patches, place pads on the patient’s chest according to manufacturer’s recommendations.
- Set initial pacing rate at 100 ppm.
- Begin output at 5 mA. Increase slowly by 5 mA until capture / pulses are noted.
  - The smaller the child, the lower the required energy for capture.

### KEY CONCEPTS
- Any discomfort associated with pacing, administer fentanyl according to Pain Management AP-13.
- For agitation associated with pacing, administer midazolam according to Sedation AP-14.
- Any movement of patient may increase capture threshold response. Output may have to be slightly increased to compensate. Monitor pulse, blood pressure and level of consciousness closely.