



Yolo County Emergency Medical Services Agency

Procedures

Revised Date: September 1, 2018

TRANSCUTANEOUS CARDIAC PACING (TCP)	
Adult	Pediatric
Indication	
Symptomatic Bradycardia with signs and symptoms of inadequate cerebral and cardiac perfusion such as chest pain, hypotension, and/or altered mental status.	
Contraindications	
TCP should not be delayed pending intravenous access or while waiting for atropine to take effect in an unstable patient. TCP should be initiated simultaneously with atropine in this setting. <ol style="list-style-type: none">1. Place pads on the patient2. Set initial TCP rate at 80 BPM3. Note pacer spikes on monitor screen4. Begin output at 10 mA, increasing by 10 mA until electrical capture is noted. Verify mechanical capture with pulses5. Once capture is confirmed, increase output level by 10%6. If capture is maintained but the patient remains symptomatic, consider increasing the rate by 10 BPM until 100 BPM is reached7. Assess vital signs for improvement	
Consider	
<ul style="list-style-type: none">• Consider sedation• Consider alternative causes of the dysrhythmia and treat appropriately prior to initiation of TCP (hypoxia, trauma, drug overdose, electrolyte imbalance, and hypothermia)• The majority of pediatric bradycardia is due to respiratory problems	