



# Bradycardia - Adult

Consider treating if persistent bradyarrhythmia (HR < 50 bpm) causing:

- Hypotension
- Acutely altered mental status
- Signs of shock
- Ischemic chest discomfort
- Acute heart failure

Atropine 1 mg IV/IO  
Repeat 3-5 minutes - max 3 mg

Atropine is ineffective with heart transplant.

If atropine ineffective:

- Transcutaneous pacing  
AND/OR
- Dopamine 5-20 mcg/kg/min  
OR
- Epinephrine 0.1 - 0.5 mcg/kg/min.  
Titrate to max 2 mcg/kg/min

Review/obtain 12-lead ECG if transport will not be delayed.

Identify and treat underlying cause:

- Myocardial ischemia/infarction
- Drugs/toxicologic (i.e. calcium-channel blockers, beta-blockers, digoxin)
- Hypoxia
- Electrolyte abnormalities (i.e. hyperkalemia)

This guideline does not substitute for sound clinical judgment.

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Original \_\_\_/\_\_\_/\_\_\_ Reviewed 5/14/25 Revised 5/8/24 Posted 6/3/25 Standards and Practice Committee