Advanced Life Support
Bradycardia Algorithm

- Assess using the ABCDE approach
- Ensure oxygen given and obtain IV access
- Monitor ECG, BP, SpO₂, record 12 lead ECG
- Identify and treat reversible causes (e.g. electrolyte abnormalities)

Assess for evidence of adverse signs:
1. Shock
2. Syncope
3. Myocardial ischaemia
4. Heart failure

No

Yes

Atropine 500 mcg IV

Satisfactory Response?

Yes

No

Risk of asystole?
- Recent asystole
- Möbius II AV block
- Complete heart block with broad QRS
- Ventricular pause > 3s

No

Yes

Interim measures:
- Atropine 500 mcg IV repeat to maximum of 3 mg
- Isoprenaline 5 mcg min⁻¹
- Adrenaline 2-10 mcg min⁻¹
- Alternative drugs*

OR
- Transcutaneous pacing

Seek expert help
Arrange transvenous pacing

* Alternatives include:
- Aminophylline
- Dopamine
- Glucagon (if beta-blocker or calcium channel blocker overdose)
- Glycopyrrolate can be used instead of atropine

No

Observe

Yes

Assess for evidence of adverse signs: