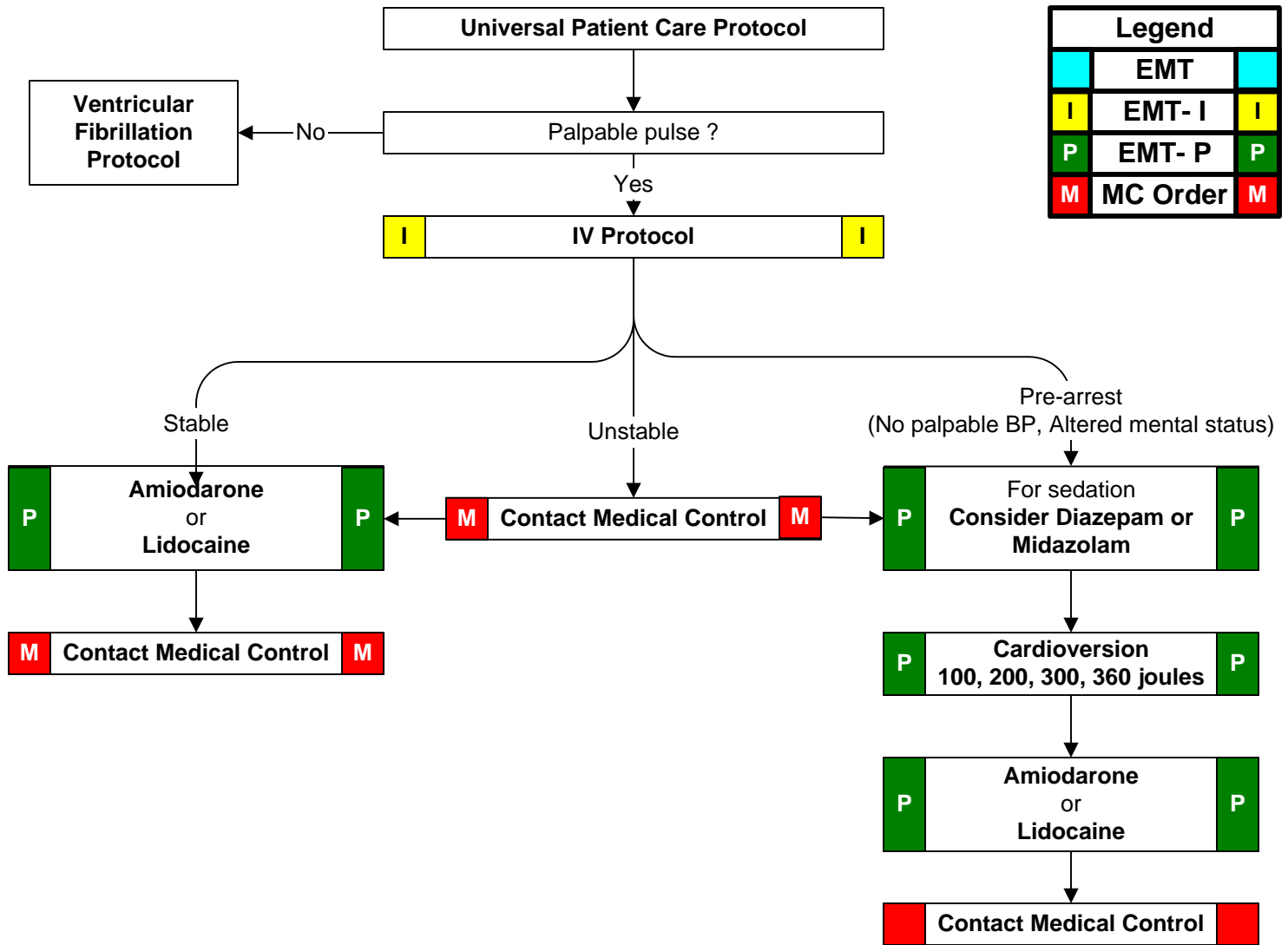


|   |  |   |
|---|--|---|
| <b>History:</b> <ul style="list-style-type: none"> <li>• Past medical history / medications, diet, drugs.</li> <li>• Syncope / near syncope</li> <li>• Palpitations</li> <li>• Pacemaker</li> <li>• Allergies: lidocaine / novacaine</li> </ul> | <b>Signs and Symptoms:</b> <ul style="list-style-type: none"> <li>• Ventricular tachycardia on ECG (Runs or sustained)</li> <li>• Conscious, rapid pulse</li> <li>• Chest pain, shortness of breath</li> <li>• Dizziness</li> <li>• Rate usually 150 - 180 bpm for sustained V-Tach</li> </ul> | <b>Differential:</b> <ul style="list-style-type: none"> <li>• <b>Artifact / Device failure</b></li> <li>• <b>Cardiac</b></li> <li>• <b>Endocrine / Metabolic</b></li> <li>• <b>Drugs</b></li> <li>• <b>Pulmonary</b></li> </ul> |
|---|--|---|



**Pearls:**

- **Exam: Mental Status, Skin, Neck, Lung, Heart, Abdomen, Back, Extremities, Neuro**
- For witnessed / monitored ventricular tachycardia, try having patient cough or deliver a precordial thump.
- Polymorphic V-Tach (Torsades de Pointes) may benefit from the administration of magnesium sulfate.