

# WIDE COMPLEX TACHYCARDIA

QRS complex >120 msec

HR > 100 bpm

**Brugada Criteria**

- Concordance present in precordial leads? (Are all QRS complexes completely upright or downward?)
- R to S interval >100 msec in one precordial lead?
- A-V dissociation?
- Morphology criteria for VT present in both V1-V2 and V6?

If yes to any, **VT** but if no to all **SVT**

P before each QRS?  
QRS following each P?  
P wave upright in Lead 2?

**Tachycardia**

Sinus Rhythm?



See separate schema: Sinus Tachycardia

**Tachyarrhythmia**

How wide is the QRS? → <120 msec



See separate schema: Supraventricular Tachycardia

>120 msec

**Wide Complex Tachycardia**

Assess your patient's vitals and mentation

**Regular WCT**

**Irregular WCT**

**Regular WCT**

**Rhythm** **EKG in Lead 2**

- Monomorphic Ventricular Tachycardia (VT)
- SVT with aberrancy
- Antidromic Atrioventricular Tachycardia (AVRT)

**Irregular WCT**

**Rhythm** **EKG in Lead 2**

- Polymorphic VT
- Torsades de Pointes
- Ventricular Fibrillation (VF)