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I. In General, Dose Depends On Type Of Arrhythmia Being Treated – Ventricular Arrhythmias Generally Require Higher Doses Than Supraventricular/atrial Arrhythmias Ii. Dose Adjustments May Be Required In Some Cases For Renal And/or Hepatic Insufficiency 1. 2th, 2024

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Arrhythmia Developed Five Months After Operation In Relation To Recurrent Empyema. Duration Of Arrhythmia: In 13 Cases, The Arrhythmia Lasted From One Hour To Five Days. In One, Itlasted 11 Days. The Most Persistent Occurred In A Patient Who Had Atrial Flutter Which Was Converted To Atrial Fibrilla Tion. 3th, 2024

# Cardiac Monitoring Of Adult Cardiac Patients In NSW Public ...

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# PROTOCOL 9 CARDIAC ARREST/CARDIAC DYSRHYTHMIA

Defibrillate At 360 Joules And Repeat Defibrillation Every 2 Minutes, If Rhythm Shockable. 2. Administer Epinephrine, 1 Mg, IV/IO Push, Circulate With 2 Minutes Of CPR. 3. Defibrillate At 360 Joules, If Rhythm Shockable. Resume CPR. 4. Adm 2th, 2024

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PA:Ao Ratio Were The Best Screening Tests, With Highest AUCs (0.879, 0.868 And 0.832, Respectively). For Group 2, The Ao-Z-score, PA:Ao And RV:LV Ratios Were The Best Screening Tests, With AUCs Of 0.770, 0.723 And 0.716, Respectively. Conclusion None Of The Screening Tests Was Found To Be A Perfect Early Discriminator For The Cardiac Lesions ... 2th, 2024

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Essentials Of Cardiopulmonary Physical Therapy. W.B. Saunders Company, 2001 Rating Of Perceived Exertion (Modified Borg Scale) Keep Your Exertion Between 3-5/10 Until Your Doctor Clears You For Heavier Work. Created Date: 10/17/2013 12:07:36 PM ... 2th, 2024

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