

Protocol 700-C1-P

Cardiac Arrest

Rev: 2/18

**BLS Treatment**

- ❖ Treat life threats. (See Procedure 701 *Life Threats*)
- ❖ Confirm DNR Status
- ❖ CPR per current County guidelines. Minimize delays and interruptions
- ❖ Apply AED and use as indicated
- ❖ Prepare for transport/transfer of care.

**ALS Treatment**

- ❖ Treat life threats. (See Procedure 701 *Life Threats*)
- ❖ Cardiac Monitor and determine rhythm
- ❖ Identify possible causes\*

<b>*Causes of Cardiac Arrest</b>	
<ul style="list-style-type: none"> <li>• Hypovolemia</li> <li>• Hypoxemia</li> <li>• Hydrogen Ion (Acidosis)</li> <li>• Hyper/Hypokalemia</li> <li>• Hypothermia</li> </ul>	<ul style="list-style-type: none"> <li>• Tox (OD/Drugs)</li> <li>• Tamponade (Cardiac)</li> <li>• Tension Pneumothorax</li> <li>• Thrombosis (MI, PE)</li> </ul>

- Treat according to Table 1
- Known dialysis patients with possible hyperkalemia
  - **Sodium Bicarbonate** 1 mEq/kg IV/IO
  - **Calcium Chloride** 20 mg/kg IV/IO.
- Penetrating Chest Trauma
  - Consider Tension Pneumothorax (see Procedure 702 *Pleural Decompression*)
- ❖ If ROSC achieved:
  - Maintain SpO<sub>2</sub> ≥ 95% using lowest concentration of O<sub>2</sub> possible
  - Ventilate to achieve an end tidal CO<sub>2</sub> of 35 – 45 mmHg **Warning:** Avoid hyperventilation
  - Maintain SBP ≥ 90 mmHg.
    - IV fluids, **Normal Saline** 20 cc/kg bolus
    - **Epinephrine** 0.01 mg/kg IV/IO every 3 minutes as needed.
    - If the patient's SBP is ≥ 90 mmHg, there is no need for any further circulatory support.
  - Manage post-arrest arrhythmias as needed.
  - Obtain a 12 lead ECG and transmit as indicated.
- ❖ Consider transporting hypothermic, drug-overdosed, or electrocuted patients.

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**Table 1**

Asystole	Pulseless Electrical Activity (PEA)	Ventricular Fibrillation or Pulseless Ventricular Tachycardia
<ul style="list-style-type: none"> <li>❖ <b>Epinephrine</b> <ul style="list-style-type: none"> <li>➢ (1:10,000) 0.01mg/kg IVP/IO</li> <li>➢ Repeat q3-5minutes for duration of arrest.</li> </ul> </li> <li>❖ Consider <b>Normal Saline</b> <ul style="list-style-type: none"> <li>➢ 20 ml/kg fluid challenge.</li> <li>➢ May repeat as indicated,</li> </ul> </li> <li>❖ If no response consider termination of resuscitative efforts (see Policy 613, <i>Determination of Death in the Field</i>)</li> </ul>	<ul style="list-style-type: none"> <li>❖ <b>Epinephrine</b> <ul style="list-style-type: none"> <li>➢ (1:10,000)0.01mg/kg IVP/IO</li> <li>➢ Repeat q3-5minutes for duration of arrest.</li> </ul> </li> <li>❖ Consider <b>Normal Saline</b> <ul style="list-style-type: none"> <li>➢ 20 ml/kg fluid challenge.</li> <li>➢ May repeat as indicated,</li> </ul> </li> <li>❖ If electrical HR &lt;40 BPM due to blunt trauma, consider determination of death prior to initiating resuscitation (see Policy 613, <i>Determination of Death in the Field</i>)</li> </ul>	<ul style="list-style-type: none"> <li>❖ Defibrillate ASAP</li> <li>❖ <b>Epinephrine</b> <ul style="list-style-type: none"> <li>➢ (1:10,000) 0.01mg/kg IVP/IO</li> <li>➢ Repeat q3-5min</li> </ul> </li> <li>❖ Defibrillate at max. joules as above after 5 cycles of CPR               <ul style="list-style-type: none"> <li>➢ Start at 2 joules/kg then 4 joules/kg</li> </ul> </li> <li>❖ Defibrillate after each medication throughout the arrest</li> <li>❖ <b>Amiodarone</b> <ul style="list-style-type: none"> <li>➢ 5mg/kg mg IVP/IO</li> </ul> </li> <li>❖ If return to supraventricular rhythm, consider:</li> <li>❖ <b>Normal Saline</b> 250ml bolus</li> </ul>

**Documentation**

- ❖ Cardiac Arrest is a System Quality Indicator (See Policy 101 *Quality Improvement Program and System Evaluation* and Policy 502 *San Benito County Patient Care Record (PCR) and Transfer of Care Document*)
  - ❖ Minimum documentation elements include:
    - Primary or Secondary Impression (esituation.11 or esituation.12)= *“Cardiac Arrest -Non-traumatic”*
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|---|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Bystander CPR (PUB-1)</li> <li><input type="checkbox"/> AED prior to arrival (CAR-1)</li> <li><input type="checkbox"/> First Arrival time to rescuer CPR</li> <li><input type="checkbox"/> Initial rhythm recorded</li> <li><input type="checkbox"/> EtCO2 readings (initial and continuous)</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Defibrillation (number and dose)</li> <li><input type="checkbox"/> Intubation (see #6)</li> <li><input type="checkbox"/> ROSC (y/n) (CAR-2)</li> <li><input type="checkbox"/> Survival to ED discharge(CAR-3)</li> <li><input type="checkbox"/> Survival to hospital discharge (CAR4)</li> </ul> |
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