

SECTION: C-2a

TITLE: Adult Cardiopulmonary Arrest – BLS and AEMT Algorithms

REVISED: November 1, 2017

Box #1:
If adequate CPR is being performed upon arrival :

1. Confirm cardiopulmonary arrest.
2. Transition to high performance Cardiopulmonary Resuscitation (AKA “Pit Crew”, see appendix 30) while applying AED pads
3. Move on to, “**Box 4.**”

Box #2:
Sudden, witnessed arrest in the presence of EMS:

1. Perform high performance Cardiopulmonary Resuscitation (AKA “Pit Crew”, see appendix 30) only long enough to apply AED pads.
2. Move on to, “**Box 4.**”

Box #3:
If inadequate CPR, or no CPR at all, is being performed upon arrival:

1. Initiate/Perform high performance Cardiopulmonary Resuscitation (AKA “Pit Crew”, see appendix 30)
2. During CPR:
 - a. Apply AED pads
3. Move on to, “**Box 4,**” after approximately 2 minutes/200 compressions CPR completed

Box #4:

1. Place patient on firm surface with good workable space as soon as possible/feasible-
2. AED Analysis of Rhythm and check blood glucose

Shock Advised:	<u>NO</u> Shock Advised/No Pulse	<u>NO</u> Shock Advised/ has Pulse (ROSC)
<ol style="list-style-type: none"> a) Clear patient. a) Shock @ manufacturer’s recommendation. b) Immediately resume HP-CPR without pause for rhythm check. c) OPA/NPA and BVM as appropriate d) Advanced airway management as appropriate (AEMT) e) Vascular Access as appropriate (AEMT) 	<ol style="list-style-type: none"> a) No shock indicated. b) Immediately resume HP-CPR. c) OPA/NPA and BVM as appropriate d) Advanced airway management as appropriate (AEMT) e) Vascular Access as appropriate(AEMT) 	<ol style="list-style-type: none"> a) Provide hemodynamic support b) Evaluate for POST-arrest/TTM care c) Advanced airway management as appropriate (AEMT) d) Vascular Access as appropriate(AEMT) e) Update ALS f) Monitor closely for re-arrest

Adult Cardiopulmonary Arrest – BLS/AEMT

Protocol C-02a

Adult Cardiopulmonary Arrest – BLS/AEMT

Continue the high performance Cardiopulmonary Resuscitation (AKA “Pit Crew”, see appendix 30) sequence until:

1. Transfer to a higher level of care occurs.
2. Patient regains a pulse
 - a. Initiate supportive care (i.e. oxygen via non-rebreather or BVM assisted breaths if necessary.)
3. Resuscitative efforts are terminated (See Appendix 26 “IN-FIELD DEATH/POST/DNR”)