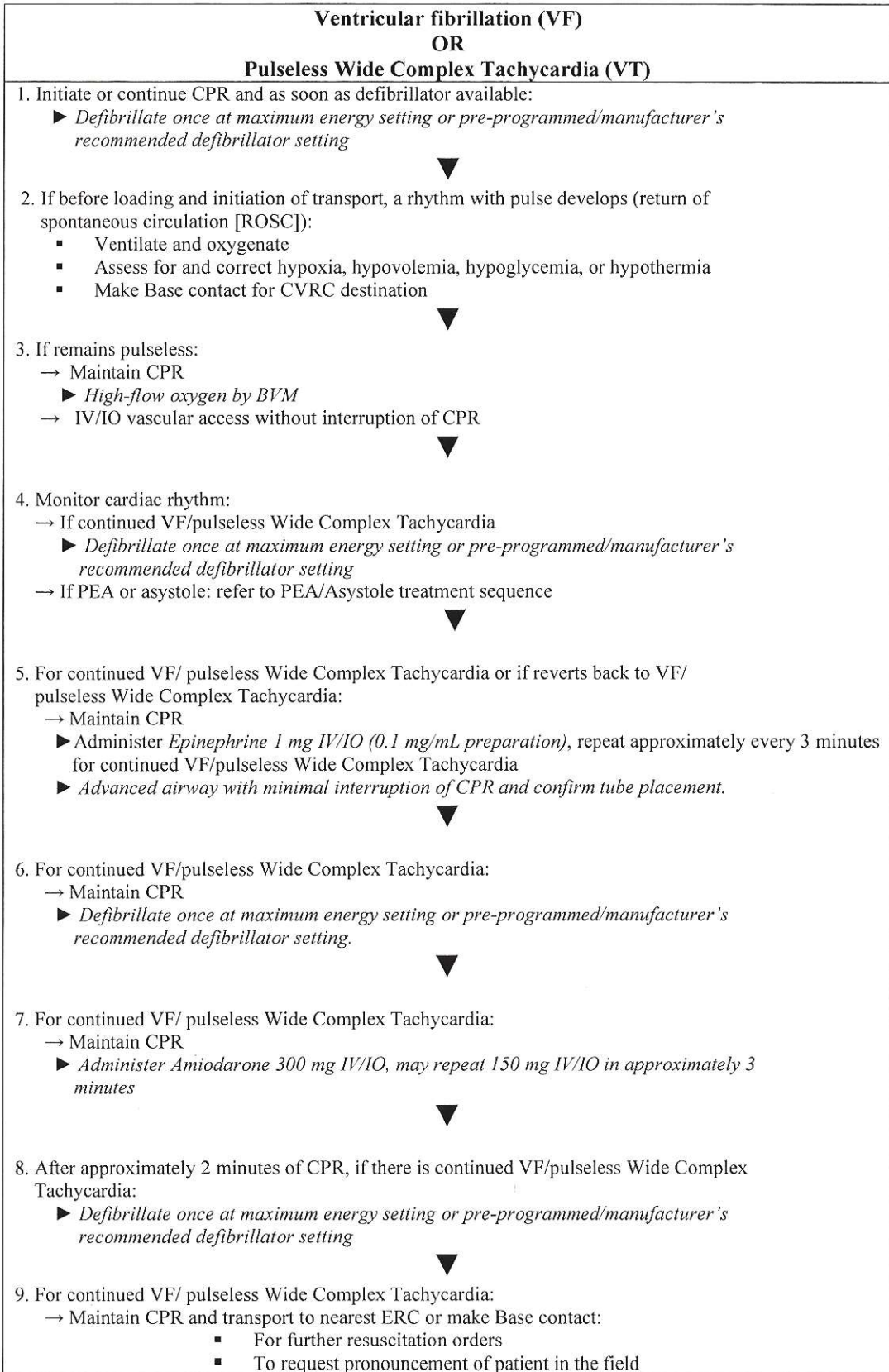




CARDIOPULMONARY ARREST – ADULT / ADOLESCENT NON-TRAUMATIC

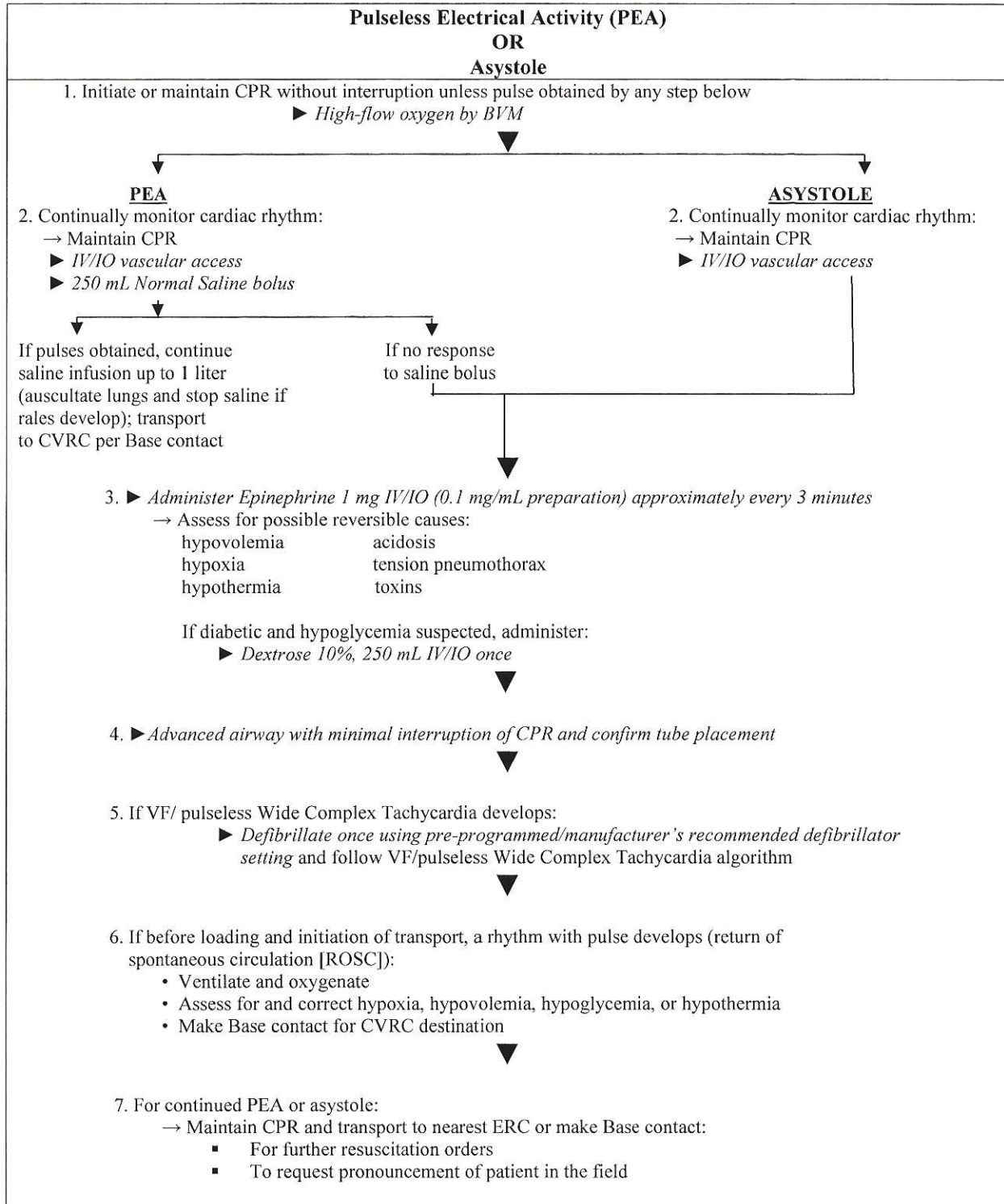


Approved:

Review Dates: 11/01/16
 Final Date for Implementation: 04/01/2017
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CARDIOPULMONARY ARREST – ADULT / ADOLESCENT NON-TRAUMATIC



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TREATMENT GUIDELINES:

- Agonal gasps are not adequate breathing and when accompanied with a pulseless state the patient should be considered to be in full cardiopulmonary arrest.
- If the patient has an implanted pacemaker or defibrillator/pacemaker, place electrode pads to either side and not directly on top of the implanted device.
- If the patient has a medication patch in place on the chest area, remove the patch and wipe the area clean before attaching an electrode pad.
- If a patient is wearing a LifeVest®
 - Proceed with standard evaluation and treatment measures.
 - Initiate CPR unless the vest device is broadcasting “press the response buttons,” “electrical shock possible, do not touch patient,” or “bystanders do not interfere.”
 - Follow standard treatment as described in algorithms above and remove the LifeVest® and monitor/treat the patient with the standard monitor-defibrillator.
 - To remove the LifeVest®, first pull out or disconnect the battery, then remove the garment from the patient.
 - Take vest, modem, charger, and extra battery to the hospital.
- If Base Hospital orders push-dose epinephrine for refractory hypotension, refer to ALS Procedure # 230 (Push-Dose Epinephrine) for technique in performing procedure.

Approved:

A handwritten signature in blue ink, appearing to read "S. Nathaniel", written over a horizontal line.

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