

# Southeast Michigan Regional Protocol

Genesee, HEMS (Wayne), Lapeer, Macomb, Oakland, and Washtenaw/Livingston MCA's

## General Cardiac Arrest Protocol

This protocol should be followed for all cardiac arrests. Once arrest is confirmed emphasis should be on avoiding interruptions in CPR. When an ALS unit is present follow this general cardiac arrest protocol until a rhythm is determined. Once this is done, see the appropriate rhythm specific protocol.

**Note:** Primary cardiac arrest in the pediatric patient is rare. Most arrests are secondary to respiratory failure. When transport time is short the airway may be maintained with basic airway management techniques. Intubation attempts should be performed in such a manner as to keep CPR interruptions to a minimum, Medications given during arrest are best given IV or IO. Avoid endotracheal administration unless IV or IO are unavailable. Refer to Pediatric Drug Dosage Chart and Equipment Chart.

### **Pre-Radio**

MFR/EMT/SPECIALIST

1. If unwitnessed arrest perform 2 minutes of CPR or,
2. If witnessed, apply AED if available and, if indicated, follow AED protocol.

PARAMEDIC

3. If unwitnessed arrest perform 2 minutes of CPR.
4. Apply cardiac monitor and treat rhythm according to appropriate protocol.

MFR/EMT/SPECIALIST/PARAMEDIC

5. Confirm Arrest: if pulseless, continue CPR.
6. Establish a patent airway, maintaining C-Spine precaution if indicated, using appropriate airway adjuncts and high flow oxygen.
7. Reassess ABC's as indicated by rhythm or patient condition change. Pulse checks should take no more than 10 seconds.

SPECIALIST/PARAMEDIC

8. Intubate the patient. Avoid significant interruptions in CPR.
9. Start an IV NS KVO at the most proximal location, with the largest appropriate size IV catheter. If IV is unsuccessful (after a maximum of three attempts) start an IO line in both adult and pediatric patients. Endotracheal administration of medication should be avoided unless other options do not exist.

### **Post-Radio**

PARAMEDIC

10. Consider termination of resuscitation per local MCA protocol.