

# Southeast Michigan Regional Protocol

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

## Ventricular Fibrillation or Pulseless Ventricular Tachycardia

If AED is applied prior to ALS arrival, perform CPR and reassess the rhythm as indicated. After each intervention resume CPR immediately and reassess the rhythm after 2 minutes.

**All defibrillations will be at the device's maximum energy.**

### **Pre-Radio**

#### **PARAMEDIC**

1. Follow the General Cardiac Arrest Protocol.
2. Defibrillate  
Continue CPR for 2 minutes and reassess rhythm.
3. Intubate the patient. Avoid significant interruptions of CPR.
4. Defibrillate  
Continue CPR for 2 minutes and reassess rhythm.
5. Start an IV NS KVO at the most proximal location. If IV is unsuccessful start an IO line.  
Endotracheal administration of medication should be avoided unless other options do not exist.
6. Once an IV line is established, administer Epinephrine 1 mg 1:10,000 IV/IO, (10 ml). Repeat every 3-5 minutes. May be administered before or after defibrillations.
7. Defibrillate  
Continue CPR for 2 minutes and reassess rhythm.
8. Administer Amiodarone 300 mg IV/IO. May be administered before or after defibrillations.
9. Administer Magnesium Sulfate 2 gm IV/IO for torsades de pointes.
10. Defibrillate  
Continue CPR for 2 minutes and reassess rhythm.
11. Administer Amiodarone 150 mg IV/IO. May be administered before or after defibrillations.
12. Defibrillate  
Continue CPR for 2 minutes and reassess rhythm. Repeat defibrillation as indicated.