



CARDIAC ARREST-ASYSTOLE/PEA-PEDIATRIC

BLS CARE

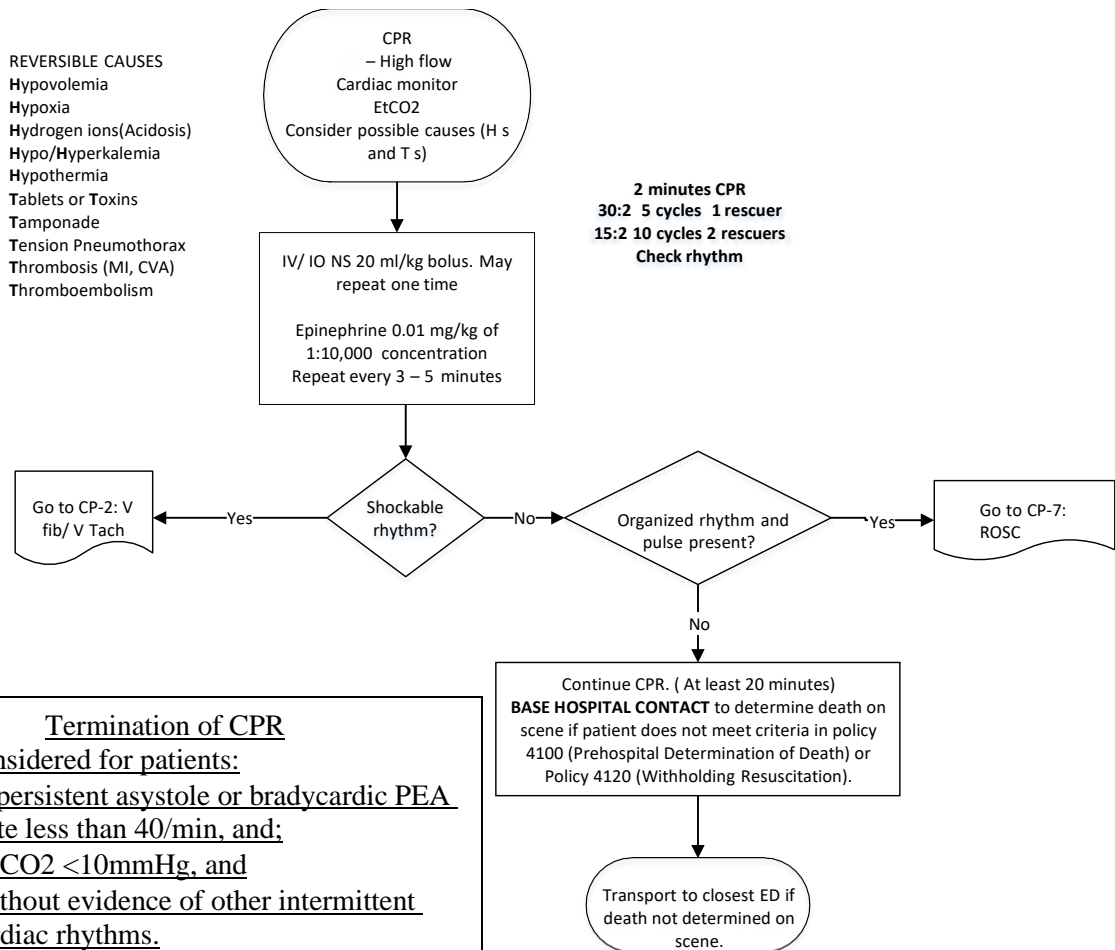
Routine Medical Care.

Consider and treat potential causes of the patient's condition.

CPR. Rotate personnel performing compressions to prevent rescuer fatigue in order to maintain adequate chest compressions. Follow AHA guidelines for rate and depth of chest compressions and rate of ventilations. Minimize time of interruption of chest compressions.

Apply AED immediately when available. Minimize time of interruption of chest compressions. AED pads must not touch after placement on the patient. Consider Anterior-Posterior placement for pads.

Continue CPR



Termination of CPR

May be considered for patients:

- In persistent asystole or bradycardic PEA (rate less than 40/min, and;
- ETCO2 <10mmHg, and
- Without evidence of other intermittent cardiac rhythms.
- The patient shall have received a minimum of 20 minutes of CPR and three (3) rounds of epinephrine.

Base hospital contact is required.