# Cardiac Arrest – Asystole/Pulseless Electrical Activity (PEA)

## ADULT

### BLS Procedures

Initiate Cardiac Arrest Management (CAM) Protocol

Airway management per VCEMS policy

### ALS Standing Orders

**Assess for and treat underlying cause**

**IV/I/O access**
- PRESTO Blood Draw

**Epinephrine**

- **0.1 mg/mL**
  - Administer ASAP goal ≤6 minutes
  - **IV/I/O** 1 mg (10 mL) q 6 min
  - May repeat x 2 for max of 3 doses during initial arrest.
  - If ROSC then re-arrest an additional 3 doses may be administered.

**Normal Saline**
- **IV/I/O bolus**- 1 Liter

**ALS Airway Management**
- If unable to ventilate by BLS measures, initiate appropriate advanced airway procedures in accordance with policy 710.

### Base Hospital Orders only

**Tricyclic Antidepressant Overdose**
- **Sodium Bicarbonate**
  - **IV/I/O** – 1 mEq/kg
  - Repeat 0.5 mEq/kg q 5 min

**Beta Blocker Overdose**
- **Glucagon**
  - **IV/I/O** – 2 mg up to 10 mg when available

**Calcium Channel Blocker Overdose**
- **Calcium Chloride**
  - **IV/I/O** – 1 g
  - Repeat x 1 in 10 min
- **Glucagon**
  - **IV/I/O** – 2 mg up to 10 mg when available

**History of Renal Failure/Dialysis**
- **Calcium Chloride**
  - **IV/I/O** – 1 g
  - Repeat x 1 in 10 min
- **Sodium Bicarbonate**
  - **IV/I/O** – 1 mEq/kg
  - Repeat 0.5 mEq/kg q 5 min x 2

**Beta Blocker Overdose**
- **Glucagon**
  - **IV/I/O** – 0.1 mg/kg up to 10 mg when available

**Calcium Channel Blocker Overdose**
- **Calcium Chloride**
  - **IV/I/O** – 20 mg/kg
  - Repeat x 1 in 10 min
- **Glucagon**
  - **IV/I/O** – 0.1 mg/kg
  - May give up to 10mg if available

**History of Renal Failure/Dialysis**
- **Calcium Chloride**
  - **IV/I/O** – 20 mg/kg
  - Repeat x 1 in 10 min
- **Sodium Bicarbonate**
  - **IV/I/O** – 1 mEq/kg
  - Repeat 0.5 mEq/kg q 5 min x 2

## PEDIATRIC

### BLS Procedures

Initiate Cardiac Arrest Management (CAM) Protocol

Airway management per VCEMS policy

### ALS Standing Orders

**Assess for and treat underlying cause**

**IV/I/O access**
- PRESTO Blood Draw

**Epinephrine**

- **0.1 mg/mL**
  - Administer ASAP goal ≤6 minutes
  - **IV/I/O** 0.01 mg/kg (0.1 mL/kg) q 6 min
  - May repeat x 2 for max of 3 dose during initial arrest.
  - If ROSC then re-arrest an additional 3 doses may be administered.

**Normal Saline**
- **IV/I/O bolus**- 20 mL/kg

**ALS Airway Management**
- If unable to ventilate by BLS measures, initiate appropriate advanced airway procedures in accordance with policy 710.

### Base Hospital Orders only

**Tricyclic Antidepressant Overdose**
- **Sodium Bicarbonate**
  - **IV/I/O** – 1 mEq/kg
  - Repeat 0.5 mEq/kg q 5 min

**Beta Blocker Overdose**
- **Glucagon**
  - **IV/I/O** – 0.1 mg/kg up to 10 mg when available

**Calcium Channel Blocker Overdose**
- **Calcium Chloride**
  - **IV/I/O** – 20 mg/kg
  - Repeat x 1 in 10 min
- **Glucagon**
  - **IV/I/O** – 0.1 mg/kg
  - May give up to 10mg if available

**History of Renal Failure/Dialysis**
- **Calcium Chloride**
  - **IV/I/O** – 20 mg/kg
  - Repeat x 1 in 10 min
- **Sodium Bicarbonate**
  - **IV/I/O** – 1 mEq/kg
  - Repeat 0.5 mEq/kg q 5 min x 2

### Additional Information:

- If sustained ROSC (> 30 seconds), activate VF/VT alarm and initiate post arrest resuscitation as outlined in Policy 733: Cardiac Arrest management and Post Arrest Resuscitation.
- For termination of resuscitation, transport decisions, and use of base hospital consult reference Policy 733: Cardiac Arrest Management and Post Arrest Resuscitation.
- If patient is **hypothermic** – only ONE round of medication administration prior to Base Hospital contact. Field determination of death is discouraged in these patients and they should be transported to the most accessible receiving facility.

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VCEMS Medical Director