Cardiac Arrest — Persistent Shockable Rhythm

For patients in cardiac arrest whose rhythm is persistent or recurrent ventricular fibrillation (VF) or ventricular tachycardia (VT), paramedics will make base hospital contact after thirty minutes of resuscitation efforts on scene.

The intent of allowing prolonged scene time for a patient with persistently shockable rhythms is to allow additional time for optimal CPR. For this, base hospital contact should be for the purpose of receiving orders for EITHER continuing resuscitation on scene OR continuing resuscitation while transporting the patient to the hospital.

There are rare circumstances of persistently shockable rhythms for which further resuscitation efforts are futile and the patient should be determined to be dead on scene. In these cases, determination of death will be made only after consultation with the base hospital physician.