

<b>Cardiac Arrest – VF/VT</b>	
<b>ADULT</b>	<b>PEDIATRIC</b>
<b>BLS Procedures</b>	
Initiate Cardiac Arrest Management (CAM) Protocol Airway management per VCEMS policy	
<b>ALS Prior to Base Hospital Contact</b>	
<p><b>Defibrillate</b></p> <ul style="list-style-type: none"> <li>Use the biphasic energy settings that have been approved by service provider medical director</li> <li>Repeat every 2 minutes as indicated</li> </ul> <p><b>IV or IO access</b></p> <ul style="list-style-type: none"> <li>PRESTO Blood Draw</li> </ul> <p><b>Epinephrine</b></p> <ul style="list-style-type: none"> <li>IV/IO – 0.1mg/mL: 1 mg (10 mL) q 3-5 min</li> </ul> <p><b>Amiodarone</b></p> <ul style="list-style-type: none"> <li>IV/IO – 300 mg – after second defibrillation</li> <li>If VT/VF persists, 150 mg IV/IO in 3-5 minutes</li> </ul> <p><b>ALS Airway Management</b></p> <ul style="list-style-type: none"> <li>If unable to ventilate by BLS measures, initiate appropriate advanced airway procedures</li> </ul> <p>If VF/VT stops, then recurs, perform defibrillation at the last successful biphasic energy setting</p>	<p><b>Defibrillate – 2 Joules/kg</b></p> <ul style="list-style-type: none"> <li>If patient still in VF/VT at rhythm check, increase to 4 Joules/kg</li> <li>Repeat every 2 minutes as indicated</li> </ul> <p><b>IV or IO access</b></p> <ul style="list-style-type: none"> <li>PRESTO Blood Draw</li> </ul> <p><b>Epinephrine 0.1mg/mL</b></p> <ul style="list-style-type: none"> <li>IV/IO – 0.01mg/kg (0.1 mL/kg) q 3-5 min</li> </ul> <p><b>Amiodarone</b></p> <ul style="list-style-type: none"> <li>IV/IO – 5 mg/kg – after second defibrillation</li> <li>If VT/VF-persists, 2.5 mg/kg IV/IO in 3-5 minutes</li> </ul> <p><b>ALS Airway Management</b></p> <ul style="list-style-type: none"> <li>If unable to ventilate by BLS measures, initiate appropriate advanced airway procedures in accordance with policy 710.</li> </ul> <p>If VF/VT stops, then recurs, perform defibrillation at the last successful biphasic energy setting</p>
<b>Base Hospital Orders only</b>	
<p>Tricyclic Antidepressants</p> <ul style="list-style-type: none"> <li>Sodium Bicarbonate <ul style="list-style-type: none"> <li>IV/IO – 1 mEq/kg <ul style="list-style-type: none"> <li>Repeat 0.5 mEq/kg q 5 min</li> </ul> </li> </ul> </li> </ul> <p>Torsades de Pointes</p> <ul style="list-style-type: none"> <li>Magnesium Sulfate <ul style="list-style-type: none"> <li>IV/IO – 2 g over 2 min <ul style="list-style-type: none"> <li>May repeat x 1 in 5 min</li> </ul> </li> </ul> </li> </ul> <p>Consult with ED Physician for further treatment measures <u>ED Physician Order Only</u></p> <p>1. History of Renal Failure/Dialysis</p> <ul style="list-style-type: none"> <li><b>Calcium Chloride</b> <ul style="list-style-type: none"> <li>IV/IO – 1g <ul style="list-style-type: none"> <li>Repeat x 1 in 10 min</li> </ul> </li> </ul> </li> <li><b>Sodium Bicarbonate</b> <ul style="list-style-type: none"> <li>IV/IO – 1 mEq/kg <ul style="list-style-type: none"> <li>Repeat 0.5 mEq/kg q 5 min</li> </ul> </li> </ul> </li> </ul>	<p>Tricyclic Antidepressants</p> <ul style="list-style-type: none"> <li>Sodium Bicarbonate <ul style="list-style-type: none"> <li>IV/IO – 1 mEq/kg <ul style="list-style-type: none"> <li>Repeat 0.5 mEq/kg q 5 min</li> </ul> </li> </ul> </li> </ul> <p>Consult with ED Physician for further treatment measures <u>ED Physician Order Only</u></p> <p>1. History of Renal Failure/Dialysis</p> <ul style="list-style-type: none"> <li><b>Calcium Chloride</b> <ul style="list-style-type: none"> <li>IV/IO – 20 mg/kg over 1 min <ul style="list-style-type: none"> <li>Repeat x 1 in 10 min</li> </ul> </li> </ul> </li> <li><b>Sodium Bicarbonate</b> <ul style="list-style-type: none"> <li>IV/IO – 1 mEq/kg <ul style="list-style-type: none"> <li>Repeat 0.5 mEq/kg q 5 min</li> </ul> </li> </ul> </li> </ul>
<p>Additional Information:</p> <ul style="list-style-type: none"> <li>If sustained ROSC (&gt;30 seconds), perform 12-lead EKG. Transport to SRC</li> <li>After 30 minutes of sustained VF/VT, make base contact for transport decision</li> <li>If patient is <u>hypothermic</u>—only ONE round of medication administration and limit <i>defibrillation to 6 times</i> 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</li> <li>Ventricular tachycardia (VT) is a rate &gt; 150 bpm</li> </ul>	

Effective Date: July 1, 2018  
Next Review Date: June 30, 2020

Date Revised: June 14, 2018  
Last Reviewed: June 14, 2018

  
VCEMS Medical Director