

Monterey County EMS System Policy



Protocol Number: CP-1
Effective Date: 7/1/2025
Review Date: 6/30/2028

CARDIAC ARREST-ASYSTOLE/PEA-PEDIATRIC

BLS CARE

Follow Routine Medical Care Protocol (MP-2) Consider and treat potential causes of the patient's condition.

Begin CPR.

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

Apply AED immediately when available AED pads must not touch after placement on the patient.
Anterior- Posterior placement for pads preferred.

Continue CPR for two minutes.

AED rhythm check and assess for spontaneous circulation.

Continue resuscitation efforts if no return of spontaneous circulation.

- REVERSIBLE CAUSES**
- Hypovolemia
 - Hypoxia
 - Hydrogen ions (Acidosis)
 - Hypo/Hyperkalemia
 - Hypothermia
 - Tablets/Toxins
 - Tamponade
 - Tension pneumothorax
 - Thrombosis (MI/CVA)
 - Thrombembolism

- CPR
- Oxygen-High Flow-BVM
- Cardiac Monitor
- Monitor EtCO2 (Mandatory)

CPR
2 minutes

- 2 Rescuers: 15:2 for 10 cycles
- 1 Rescuer: 30:2 for 5 cycles

Check rhythm
No pulse-Continue CPR

Rotate personnel providing chest compressions every 2 minutes.
Apply AED/defibrillator as soon as it is available.
Anterior-posterior pad placement preferred.

Consider possible causes and provide appropriate treatment for identified cause

- IV/IO
- NS 20 ml/kg bolus (May repeat 1 time)
- Epinephrine 1:10,000 0.01 mg/kg (May repeat every 3-5 minutes)

Go to CP-2
V. Fib/Pulseless V. Tach

Shockable Rhythm?

No

Organized rhythm and pulse present?

Go to CP-7
RosC

- Continue CPR (20 minutes minimum)
- Continue epinephrine 1:10:000 0.01 mg/kg

Persistent asystole or PEA?

Consider Termination of CPR
Base Physician Contact
Required for termination of CPR and field pronouncement

Transport to closest ED

Termination of CPR
May be considered for:
Persistent asystole or bradycardic PEA (rate less than 40/min)
and
EtCO2 <10 mmHg
and
No other intermittent cardiac rhythms
and
CPR provided for at least 20 minutes with three (3) doses of epinephrine
Base physician contact required