

# Cardiopulmonary Cerebral Arrest

## BASIC LIFE SUPPORT

**Airway**-clear obstructions, intubate

**Breathing**-8-10 breaths/minute

### Circulation

- Assess heartbeat
- Chest compressions at 80-120bpm, allow full chest recoil
- Compress ¼ to 1/3 dimension of chest
- Avoid interruptions
- Change compressors every 2 minutes if possible.

## ADVANCED LIFE SUPPORT

- Place ECG-check for shockable rhythm
- Place IVC if possible

shockable

Not shockable

### Ventricular fibrillation or Pulseless Vtach

- Defibrillation: 2-10 joules/kg (external) 2-1 joules/kg (internal)
- Drugs:
  - Epinephrine (.01-.1 mg/kg IV)
    - Or
  - Vasopressin (0.8 mg/kg IV)
  - Amiodarone (5mg/kg IV)
  - Lidocaine (2mg/kg IV)

### Asystole/ bradycardia

- Drug therapy:
  - Atropine (0.04mg/kg IV)-use lower dose if palpable pulse
  - Epinephrine (0.01-.1 mg/kg)
    - OR
  - Vasopressin (0.8Units/kg once)

### Anesthetic - related arrest

Turn off vaporizer, flush circuit  
Reverse drugs

One CPR cycle 30compressions, 2 breaths

5 cycles ~ 2minutes between repeating drugs or after defibrillation