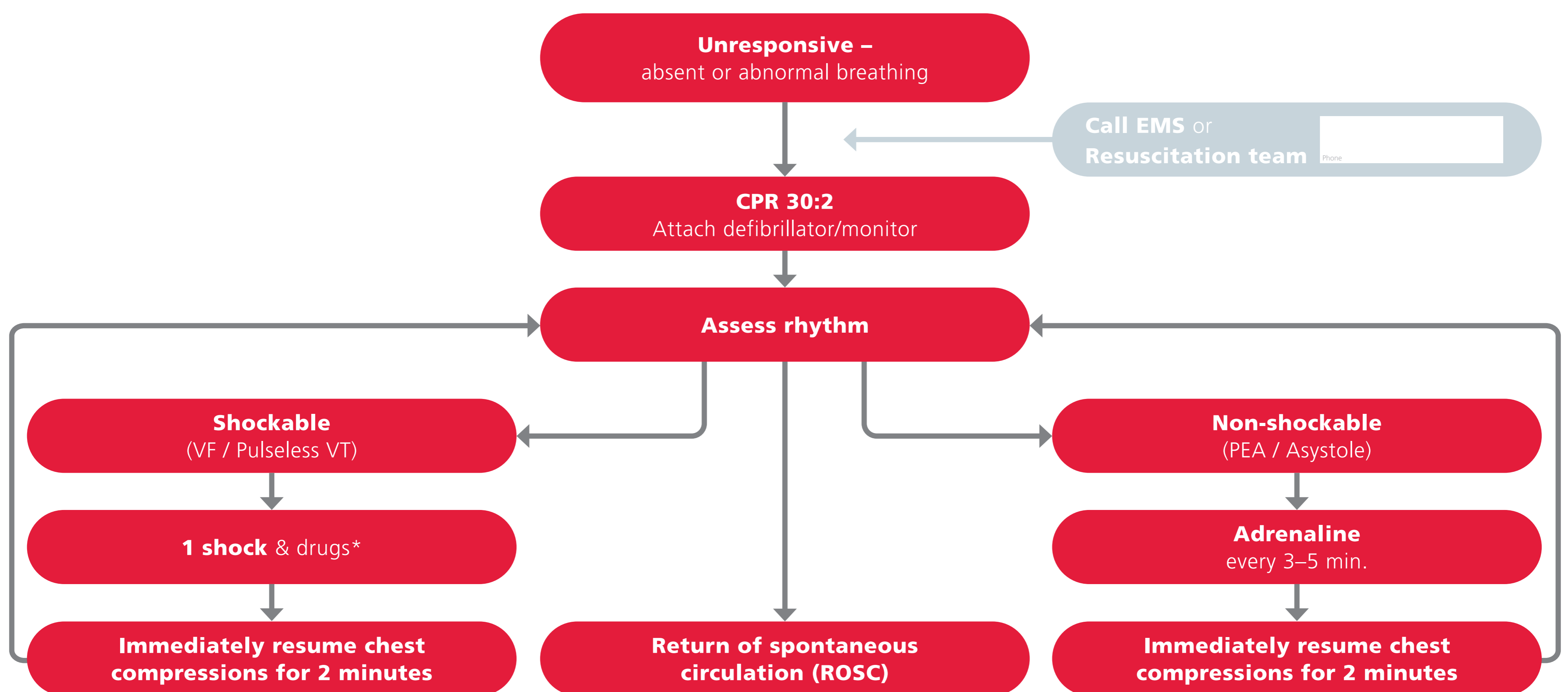


ADVANCED LIFE SUPPORT



HIGH-QUALITY CHEST COMPRESSIONS & VENTILATION and

- Optimal defibrillator pad placement
- Give oxygen
- Continuous compressions if tracheal tube or supraglottic airway
- Use waveform capnography
- Minimise interruptions to chest compressions
- Early i.v. access (or i.o. access if i.v. is not possible)

*Drugs

- First **Adrenaline** after 3 shocks, then every 3–5 min
- **Amiodarone** after 3 shocks

AFTER ROSC

- Use an **ABCDE** approach
- Aim for **SpO₂** of **94–98%** & normal **PaCO₂**
- Aim **SBP >100 mmHg**
- **12 Lead ECG**
- **Identify and treat cause**
- **Temperature control**

CONSIDER

- **Change electrodes** to the **anterior-posterior** position after 3 shocks.
- **Mechanical chest compressions** to facilitate transport/treatment
- **Extracorporeal CPR** and/or coronary angiography/percutaneous coronary intervention

IDENTIFY AND TREAT REVERSIBLE CAUSES

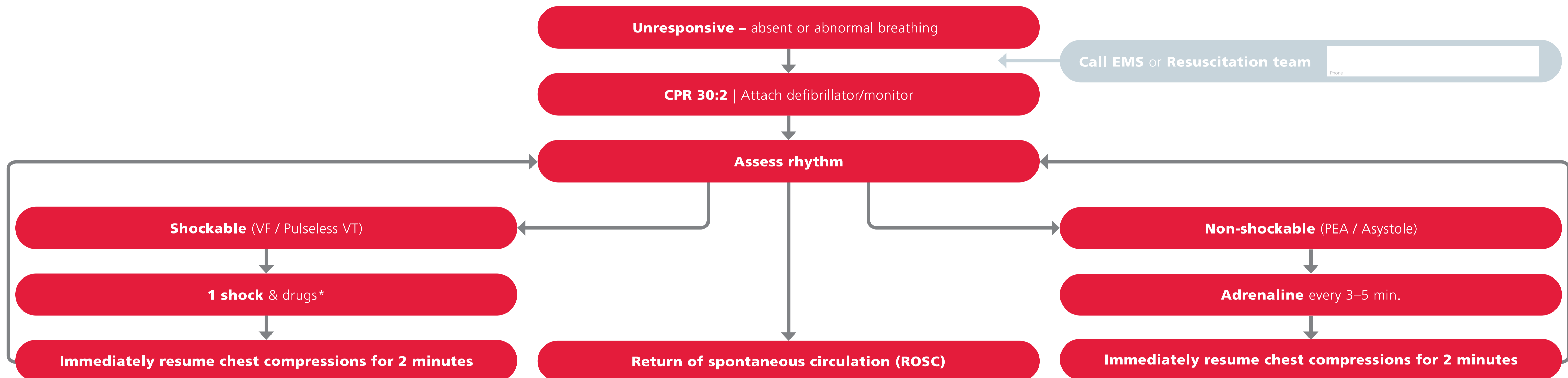
- Hypoxia
- Hypovolaemia
- Hypo-/hyperkalemia/metabolic
- Hypo-/hyperthermia
- Toxins
- Tamponade (cardiac)
- Tension pneumothorax
- Thrombosis (coronary / pulmonary)

(Consider ultrasound imaging to identify reversible causes.)



How can corpuls support you in your mission?

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