

GENERAL ASSESSMENT OF PATIENTS WITH SIGNIFICANT CARDIAC ARRHYTHMIAS

CARDIO PULMONARY RESUSCITATION: HIGH QUALITY CPR

- ✓ Push hard (2 in) and fast (greater than equal to 100 bpm), allow complete chest recoil
- ✓ Minimize interruptions in compressions
- ✓ Avoid excessive ventilation
- ✓ Rotate compressors q 2 minutes
- ✓ If quantitative waveform **capnography** < 10 mmHg, attempt to improve CPR quality

REVERSIBLE CAUSES IN CARDIAC ARREST OR ARRHYTHMIA

- ✓ Hypovolemia
- ✓ Hypoxia
- ✓ Hydrogen Ion (acidosis)
- ✓ **Hypothermia**
- ✓ Hypo/hyperkalemia
- ✓ **Hypoglycemia**
- ✓ Tension pneumothorax
- ✓ Tamponade, cardiac
- ✓ Toxins
- ✓ Thrombosis, pulmonary
- ✓ Thrombosis, coronary

INDICATIONS OF PATIENT INSTABILITY

- ✓ Hypotension
- ✓ Acutely altered mental status
- ✓ Signs of shock
- ✓ Ischemic chest discomfort
- ✓ Acute Heart Failure (CHF)