

# Pediatric Traumatic Arrest

## Field Treatment - BLS

Field Primary Survey

CPR

Supplemental O<sub>2</sub> high flow

Spinal immobilization PRN

Control external hemorrhage with direct pressure. Shock position PRN

## Field Treatment - ALS

Good airway management. Consider simplest effective method. Ventilate with bag-valve with 100% oxygen. Consider intubation while enroute.

Cardiac monitor:

‡ Asystole - Contact Base Hospital for Declaration of Death (see below)

‡ Defibrillate V-FIB or V-TACH. Complete Traumatic Arrest Protocol before referring to other cardiac protocols

Transport via Ground unless ROSC

Bilateral Needle Thoracostomy

Vascular Access IV / IO

Fluid Bolus - 20 ml/kg. Repeat twice

Contact Base Hospital for further orders

**Traumatic Asystole (particularly in children) is not a survivable condition, and in the absence of the obvious signs listed above, the presence of traumatic asystole is enough to immediately contact the base hospital for a declaration of death.**