

All patients without a valid DNR order and/or obvious signs of death (lividity, rigor mortis, decomposition, or transection) begin resuscitation efforts.

CPR for 2 minutes with indicated Study Device.

Monitor:

- Do not stop compressions while attaching
- If asystole, confirm in 2 leads

Epinephrine:

- 1 mg 1:10,000 IVP/IO every 3-5 min.
- OR**
- 2 mg 1:1,000 ETT every 3-5 min.

Atropine:

- 1 mg IVP/IO every 3-5 min., max. 3 doses
- OR**
- 2 mg high dose ETT every 3-5 min., max. 3 doses

Termination. After 30 min. of resuscitation efforts if no return of spontaneous circulation, contact medical control to cease efforts.

Notes:

Consider possible cause –

- Hypoxia
- Hyper/hypokalemia
- Pre-existing acidosis
- Drug overdose
- Hypothermia
- Hypovolemia
- Tension pneumothorax

Steve Stroman, MD, FACEP, FAAEM, EMT-P
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