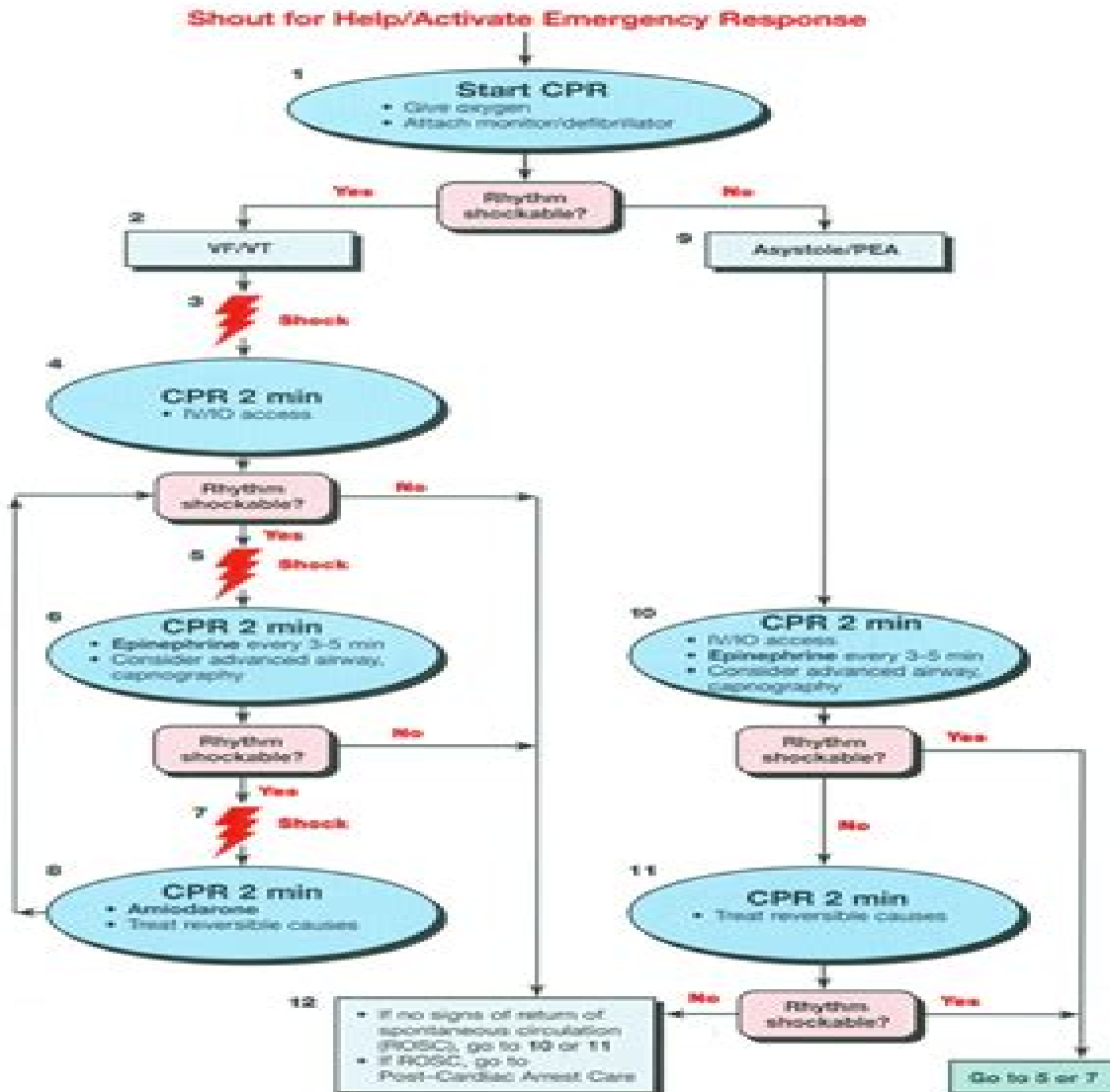


Cardiac Arrest Algorithm



American Heart Association®

Adult Advanced Cardiovascular Life Support



CPR Quality

- Push hard (≥2 inches [5 cm]) and fast (>100/min) and allow complete chest recoil
- Minimize interruptions in compressions
- Avoid excessive ventilation
- Rotate compressor every 2 minutes
- If no advanced airway, 30:2 compression-ventilation ratio
- Quantitative waveform capnography
 - If P_{etCO_2} <10 mm Hg, attempt to improve CPR quality
 - Intra-arterial pressure
 - If relaxation phase (diastolic) pressure <20 mm Hg, attempt to improve CPR quality

Return of Spontaneous Circulation (ROSC)

- Pulse and blood pressure
- Abrupt sustained increase in P_{etCO_2} , typically >40 mm Hg
- Spontaneous arterial pressure waves with intra-arterial monitoring

Shock Energy

- Biphasic: Manufacturer recommendation (eg, initial dose of 120-200 J; if unknown, use maximum available. Second and subsequent doses should be equivalent, and higher doses may be considered.
- Monophasic: 360 J

Drug Therapy

- Epinephrine IV/IO Dose: 1 mg every 3-5 minutes
- Vasopressin IV/IO Dose: 40 units can replace first or second dose of epinephrine
- Amiodarone IV/IO Dose: First dose: 300 mg bolus. Second dose: 150 mg.

Advanced Airway

- Supraglottic advanced airway or endotracheal intubation
- Waveform capnography to confirm and monitor ET tube placement
- 8-10 breaths per minute with continuous chest compressions

Reversible Causes

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



Acls Algorithms Pocket Guide 2013

LWW

A decorative graphic consisting of a light blue horizontal bar with a rounded right end, and a red circular shape partially visible behind it.

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Emergency & Critical Care Pocket Guide Informed,,Paula Derr,Jon Tardiff,Mike McEvoy,2013-05-17 The most popular pocket reference in emergency nursing now in a new edition The Emergency Critical Care Pocket Guide has been an essential resource for physicians paramedics and nurses for over a decade The newly updated Eighth Edition features Updated information on poisons and emergency medications New ECG rhythm strips Common drugs sections Updated pediatric medications Revised Spanish section Straightforward medical emergency treatments Important Notice The digital edition of this book is missing some of the images or content found in the physical edition **ECG Interpretation: An Incredibly Easy Pocket Guide** LWW,2016-10-11 New at ECG interpretation No need to go it alone keep the basic skills and concepts at your fingertips with ECG Interpretation An Incredibly Easy Pocket Guide Use this enjoyable reference for at a glance reviews of how to use and monitor ECG equipment obtain and interpret rhythm strips and accurately spot and treat arrhythmias Full of helpful charts illustrations and easy to relate to definitions this is the perfect on the spot guide for students new nurses and all those looking for expert guidance on the job Increase on the job or classroom confidence with this must have pocket guide featuring NEW and updated content in quick read bulleted format with easy to remember guidance on topics including o Identifying and interpreting atrial junctional ventricular sinus node and atrioventricular arrhythmias o ECG effects of electrolyte imbalances o ECG effects of antiarrhythmics o Basic and advanced electrocardiography including equipment uses and components o Waveform types and components Dozens of photos drawings and diagrams clearly outline key concepts including 8 step method of ECG evaluation Identifying and monitoring disorders rhythm disturbances and electrolyte imbalances Placement of different types of leads Identifying and solving monitor problems Interventions Administering nonpharmacologic and pharmacologic treatments for arrhythmias including pacemakers ICDs and antiarrhythmics Special features Memory jogger Memory tricks that help you remember key concepts and treatments Through the ages Identifies differences in ECG interpretation and pacemaker needs according to the patient s age Help desk Explanations of monitoring equipment components and functions What causes it Causes of different disorders imbalances and arrhythmias What to look for Tips on identifying and interpreting arrhythmia How it s treated Steps to take for a variety of treatment Nurse Joy and Nurse Jake Expert insights on ECG methods and problem solving End of book guides and tests The Test Zone Practice Q A Quick guide to arrhythmias ACLS algorithms The Pulseless Arrest Tachycardia and Bradycardia Guide to antiarrhythmic drugs Guide to choosing monitoring leads **ACLS, CPR, and PALS** Shirley A. Jones,2014-03-24 Here s all the information you need to respond to cardiac emergencies in one pocket sized book This quick reference guide provides easy to access coverage of all three levels of care infant child and adult plus listings for all drugs required for ACLS and PALS in both adult and pediatric dosages Guidelines for Cardiac Rehabilitation and Secondary Prevention Programs AACVPR,2013-08-02 Guidelines for Cardiac Rehabilitation and Secondary Prevention

Programs Fifth Edition With Web Resource covers the entire scope of practice for cardiac rehabilitation and secondary prevention CR SP programs This text was developed by the American Association of Cardiovascular and Pulmonary Rehabilitation AACVPR and parallels federal guidelines for cardiac rehabilitation programs It contains information on promoting positive lifestyle behavior patterns reducing risk factors for disease progression and lessening the impact of cardiovascular disease on quality of life morbidity and mortality The text has been updated and restructured providing the most current models for designing and updating rehabilitation programs for patients and preventing second episodes In addition to chapter revisions there is new content on behavior modification risk factors and special populations The chapter covering program administration has been completely rewritten to include new regulations and reimbursement standards as well as additional suggestions for new models for CR SP The most recent Core Competencies for Cardiac Rehabilitation and Secondary Prevention Professionals and the Core Components of Cardiac Rehabilitation Secondary Prevention Programs have also been included in their entirety More than 50 leaders in the field of CR SP cardiovascular risk reduction reimbursement and public policy have contributed the latest tools and information enabling cardiac rehabilitation professionals to successfully start new programs or update and enhance existing ones Key features of the fifth edition include the following A new web resource incorporates 24 questionnaires charts consent forms protocols records checklists and logs from the text that can be used when creating or assessing programs Highlighted guidelines in each chapter cover current issues and provide hints and methods for implementing treatment programs and helping patients stay on track Chapter objectives and summaries help readers quickly assess the topics covered and identify the most important points There is strong evidence that participation in outpatient cardiac rehabilitation and secondary prevention programs decreases mortality and recurrent morbidity after a cardiac event Guidelines for Cardiac Rehabilitation and Secondary Prevention Programs Fifth Edition offers procedures for providing patients with low cost high quality programming moving them toward personal responsibility for disease management and secondary prevention over a lifetime This is the definitive resource for developing inpatient and outpatient cardiac rehabilitation programs

Simulation Scenarios for Nursing Educators, Second Edition Suzanne Campbell, Karen M. Daley, 2013 Print CourseSmart [Pocket Guide to the American Board of Emergency Medicine In-Training Exam](#) Bob Cambridge, 2013-07-04 Every year emergency medicine resident physicians participate in the American Board of Emergency Medicine ABEM In Training Examination to assess their medical knowledge Preparing for the examination involves assembling several different resources on a wide range of topics Many resources are either too detailed or too superficial limiting their effectiveness Pocket Guide to the American Board of Emergency Medicine In Training Exam is designed specifically for the Emergency Medicine Resident Physician as an aid to reviewing for the In Training exam Pertinent information is organized under the same topics as the examination The concise text and tables deliver information quickly and a rapid review section allows for self assessment In addition the small portable size enables

revision whenever and wherever you are Pocket Guide to the American Board of Emergency Medicine In Training Exam is the only resource you will need for In Training Examination preparation Staying Human during Residency Training Allan D. Peterkin, 2016-06-16 The ultimate survival guide for medical students interns residents and fellows Staying Human during Residency Training provides time tested advice and the latest information on every aspect of a resident's life from choosing a residency program to coping with stress enhancing self care and protecting personal and professional relationships Allan D Peterkin MD provides hundreds of tips on how to cope with sleep deprivation time pressures and ethical and legal issues This sixth edition is not only updated to reflect the latest research and resources but also features new material on the latest issues in residency training including social media use patient centred care the medical humanities and the hidden curriculum of residency Presenting practical antidotes to cynicism careerism and burnout Peterkin also offers guidance on fostering more empathic connection with patients and deepening relationships with colleagues friends and family Acknowledged by thousands of doctors across North America as an invaluable resource Staying Human during Residency Training has helped to shape notions of trainee well being for medical educators worldwide Offering wise compassionate and professional counsel this new edition again shows why it is required reading for medical students and new physicians pursuing postgraduate training *Fast Facts for the Operating Room Nurse* Theresa Criscitelli, EdD, RN, CNOR, Theresa Criscitelli, 2014-12-05 Print CourseSmart **Pocket Medicine** Marc S. Sabatine, 2014 Prepared by residents and attending physicians at Massachusetts General Hospital this pocket sized looseleaf is one of the best selling references for medical students interns and residents on the wards and candidates reviewing for internal medicine board exams In bulleted lists tables and algorithms Pocket Medicine provides key clinical information about common problems in internal medicine cardiology pulmonary medicine gastroenterology nephrology hematology oncology infectious diseases endocrinology and rheumatology This Fifth Edition is fully updated and includes a sixteen page color insert with key and classic abnormal images If you purchased a copy of Sabatine Pocket Medicine 5e ISBN 978 1 4511 8237 8 please make note of the following important correction on page 1 36 Oral anticoagulation Chest 2012 141 e531S EHJ 2012 33 2719 Circ 2013 127 1916 All valvular AF as stroke risk very high Nonvalv AF stroke risk 4 5% y anticoag R 68% stroke use a risk score to guide Rx CHADS2 CHF 1 point HTN 1 A ge 75 y 1 DM 1 prior Stroke TIA 2 CHA2DS2 VASc adds 65 74 y 1 75 y 2 vasc dis MI Ao plaque or PAD 1 1 score 32 R anticoag score 1 R consider anticoag or ASA latter reasonable if risk factor age 65 74 y vasc dis or antithrombotic Rx even if rhythm control SCORE CORRECTED Rx options factor Xa or direct thrombin inhib non valv only no monitoring required or warfarin INR 2 3 w UFH bridge if high risk of stroke if Pt refuses anticoag consider ASA clopi or even less effective ASA alone NEJM 2009 360 2066 Please make note of this correction in your copy of Sabatine Pocket Medicine 5e immediately and contact LWW's Customer Service Department at 1 800 638 3030 or 1 301 223 2300 so that you may be issued a corrected page 1 36 You may also download a PDF of page 1 36 by clicking [HERE](#) All copies of Pocket

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