



# CARDIAC ARREST



## Escambia County, Florida – 1<sup>st</sup> Responder Medical Protocol

### ASSESSMENT

- A. ABC's with C-Spine protection.

***Notify EMS immediately that patient is in cardiac arrest.***

- B. Begin CPR (See [Basic Life Support Protocol](#)).

1. Oxygenate the patient with 100% O<sub>2</sub> via Bag-Valve-Mask device, in preparation for the arrival of advanced life support.
2. If you and your department are authorized by the Medical Director to perform Automated External Defibrillation, [AED Protocol](#), while another responder obtains the following information:
  - How long has the patient been unresponsive?
  - When was patient last seen by family or others?
  - Was arrest witnessed?
  - Was adequate CPR begun immediately?
3. Determine physical status of the patient:
  - Pupillary reaction
  - Skin temperature

- C. If family offers information regarding a current "Do Not Resuscitate", obtain the written order, verify order is correctly completed and notify EMS. (See [DNR Protocol](#).)

***If CPR has been started, DO NOT discontinue CPR.***


- D. Observe for signs of obvious death: If these are present, notify EMS immediately.



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Approved by:

  
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### TREATMENT

- A. If there is any doubt in your mind whether or not to resuscitate, **begin resuscitation and contact EMS.**
- B. Continue CPR with minimal interruptions. Use Bag-Valve-Mask device with 100% oxygen, in preparation for the arrival of advanced life support.
- C. Check pulses with and without CPR.
- D. Rotate positions so one person is not overworked.
- E. If you and your department are authorized to operate the AED, follow the [AED Protocol.](#)
- F. Notify EMS ASAP that patient is in cardiac arrest.
- G. Provide history and further information to EMS Crew on their arrival.
- H. Observe the scene's integrity for possible crime-scene investigation. Do not move or touch anything unless it is absolutely necessary to do so. If you must do so, make a mental note to tell the police.

### REPORT


- A. Report as indicated in [General Supportive Care Protocol.](#)
  - **Expected treatment request from the EMS crew:**
  - Continue CPR.



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