



3. Pulseless Electrical Activity

Non-shockable cardiac arrest that is pulseless (with MAP < 30 mmHg if invasive measurement in situ)

- ➊ Press the red emergency button
- ➋ Who is the “hands-off” leader? Assign roles
- ➌ Start CPR and assessment cycle
 - Give adrenaline 1 mL, 1 in 10,000 (Consider MAP/CVP/capnograph)
 - Massive haemorrhage ? Go to ⇒ CHKLST 4
 - Examine drains and give packed red cells rapidly if CVP low
 - Assess rhythm/pulse every 2 minutes (Pause pacing if present and ensure not VF)

If: VF/VT resume CPR and Go to ⇒ CHKLST 1
- ➍ Check all infusions (consider drug error)
- ➎ Is transducer height correct? Palpate for central pulse.
- ➏ Make 777 adult emergency chest opening call (see over)

Have 2 staff scrubbed and preparing for re-sternotomy (use CHKLST 13)
- ➐ Obtain ABG to exclude hypoxia, hyperkalaemia, hypoglycaemia
 - If hyperkalaemia Go to ⇒ CHKLST 5
 - Consider the other Hs and Ts (see across, do a blood gas)

Critical CHANGES

If VF/VT develops: GO TO ⇒ CHKLST 1

During CPR

Airway	Assess and secure with ETT
Ventilation	Ventilate at 8-10 breath/min and assess capnograph
Circulation	Confirm IV or IO access, IV fluids wide open
IABP	Switch to pressure trigger
Assign roles	See CHKLST 13 – roles for chest re-opening

DRUG DOSES and treatments

Give drugs via central line if available

Adrenaline: 10 mL of 1 in 10,000 bolus 1.0 mL (100 mcg) and increase bolus size to 2 mL, 5 mL, 10 mL depending on effect

5Hs & 5Ts

Hypovolaemia (CVP Low)	Tension pneumothorax (CVP High)
Hypoxia (CHKLST 6)	Tamponade (CVP High)
Hyper/hypokalaemia/ metabolic disorders	Toxins (narcotic, β/Ca Channel blocker, local anaesthetic)
Hypoglycaemia	Thrombosis pulmonary (CVP High)
Hypothermia/hyperthermia	Thrombosis coronary



777 Emergency chest reopening call

- **SAY** 'There is an emergency in Cardiovascular ICU – ward 48 and the emergency chest opening team is required'
- State whether the intensivist and the surgeon need to be called by the call center (if either or both are not present they need to be called – preferably by you if time allows but if not by the call centre)
- Indicate whether you need the perfusionist to attend

Delegate one person to ensure that there are 4 units of red cells on the CVICU for this patient, if there are not order them urgently from the blood bank x24014

Call Centre Calls the Following Staff

Personnel on Group Page

Level 4 Anaesthetic Registrar

Charge nurse manager

CTSU Surgical Registrar

CTSU Theatre Nurse 1st on call (m-f 20:30 – 07:30 + w/e)

CTSU Theatre Nurse Co-ordinator (m-f 07:30 – 20:30)

Contact Centre makes Separate Phone Calls (unless told not to) to

Surgeon (on call)

CVICU Consultant

Perfusionist if requested