VERP Explorer A Visual Micro-Foraging Analysis Tool LAM Eye-tracking Vmax search motifs Help + gawande_vtvf_q2_p1.png gawande_vtvf_q2_p1.idf 0.10 0.98 3.74 319 0.99 25.87 103 16.291 secs Q / C Q / C epsilon Scene max: 100 Condition: Shockable pulseless cardiac arrest. 5: Cardiac Arrest – VF/VT 1,800 -Objective: Restore pulse, hemodynamic stability. 1,600 -During CPR: Top Priority = Early Defibrillation. Airway ([bag mosk oit if ventilation adequate]). distance function Call for h Breathing (100% FIO). Circulation (confirm a fragment) or ID access). Get de 1,400 - Consider M Assign roles for: Chest ons, defibrillation, alreay, code cars, time keeping. vegesler access, document O min Orders should be explicated and expensed. edit recoil with minimal 1,200 - Sho alpha Epin CPR 1,000 max: 100 step: 1 confirm shockable).** Shock Epineph 800 - CPR x alpha patch Mican be given to replace the first prisecond rhythm (confirm shockable).** Check p Shock Amindance dosing 200 mg N/10 once, then consider additional Amilod 100 mg N/10-once. time stats · CPR > Lidocaine can be given if Amiodarone unavailable: 400 -1 to 1.5 mg/kg first close, three 0.5 to 0.75 mg/kg (N/IC). maximum 3 doses or 3 mg/kg. Macmestum dosine: Consider giving (leading dose 1 to 2 gm (W/O)) for torsades de pointes. * In patient without an advanced allows: Cycle of CPR = 30 compressions at a rate of 100/min, followed by two breaths. Give 5 cycles of CPR where "CPR K 2 ** If Aystole/PEA develops at any point, GO TO Carciac Arrest: Asystole/PEA checklist ** If pulse at any point, begin post-resuscitation care. 200 400 600 800 1,000 1,200 1,400 1,600 time:0 saccades 113