resuscitation: the first five minutes



reuben j strayer emupdates.com

DC3, A through J

anger

is it safe to approach the patient?

personal protective equipment

decontaminate

chemical restraint



is the patient in the right place? is the necessary equipment at bedside? are the right people here or notified?

all for help

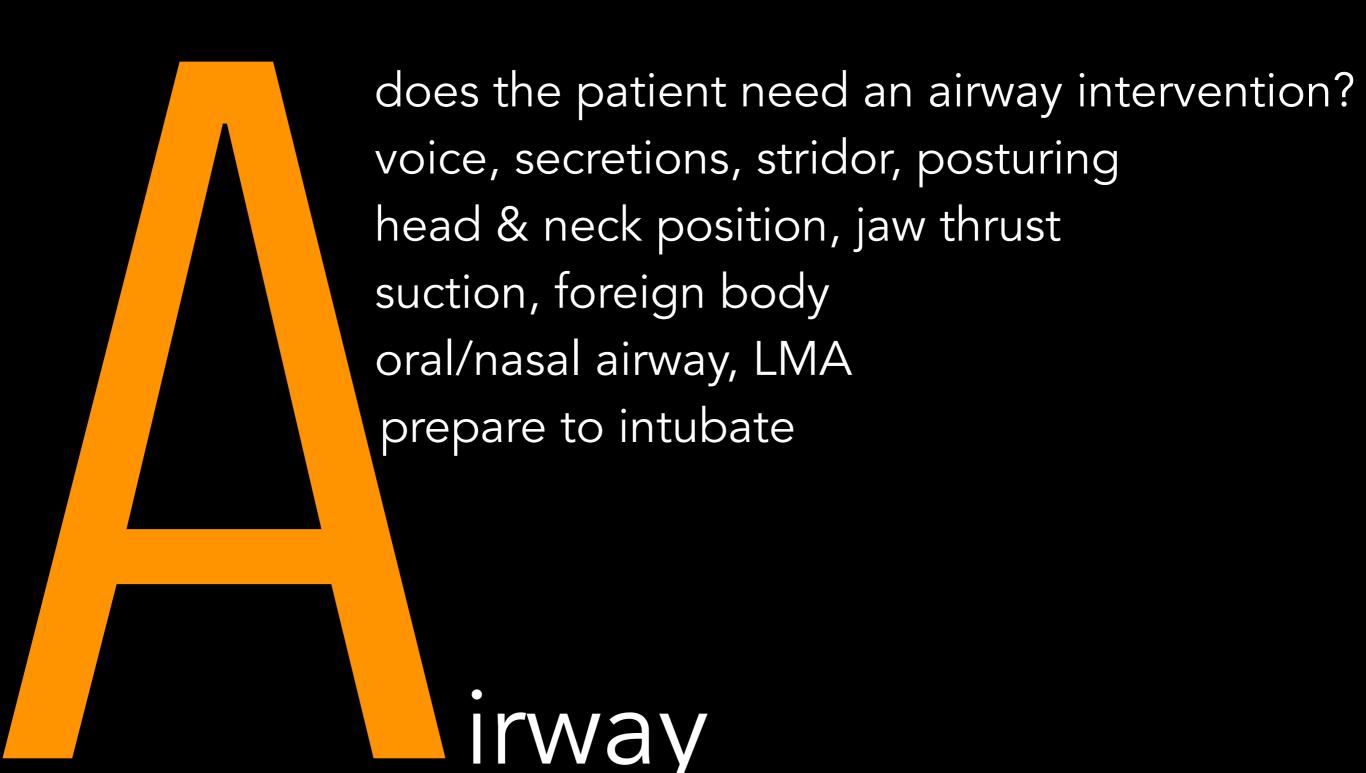


make the room quiet unnecessary personnel to perimeter identify team leader



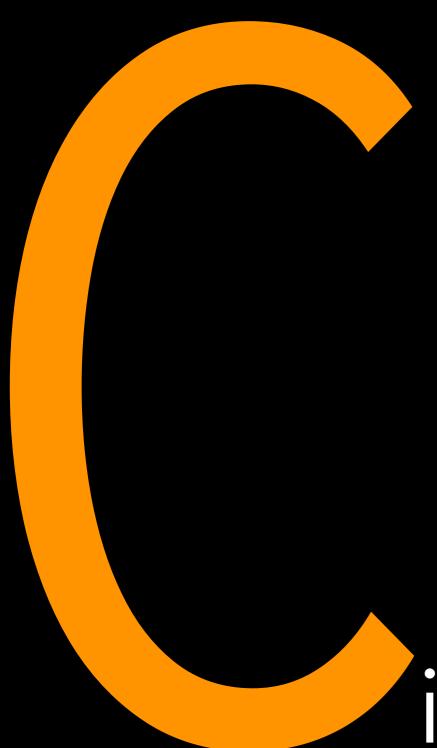
pulse check if unresponsive compressions if no certain pulse analyze rhythm, defibrillate if indicated

ardiac arrest



oxygenate: NC, face mask, NIV ventilate: bag mask, LMA SpO₂, RR, resp effort, auscultate lungs thoracostomy albuterol, epinephrine, nitroglycerine portable chest xray

reathing



vascular access

monitor

HR, BP, pulses, JVP, skin & perfusion

IVF, blood

12-lead ECG

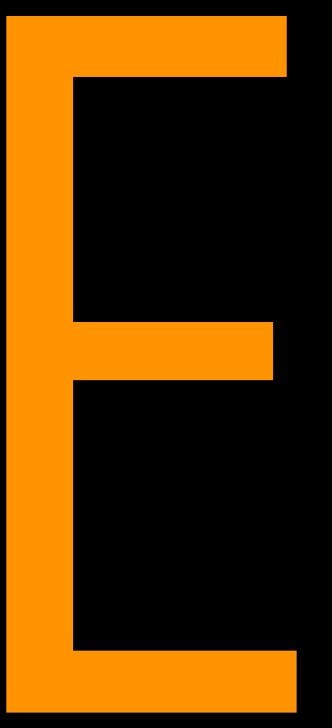
Ca for hyperK

irculation

level of consciousness / mentation pupils movement at 4 extremities capillary blood glucose / D50

STAT head CT

isability



remove all clothing & check pockets visualize every inch of skin

trauma
rash
alert bracelet
medication patches
ID, medical history, medications

rectal temp initiate active cooling or warming

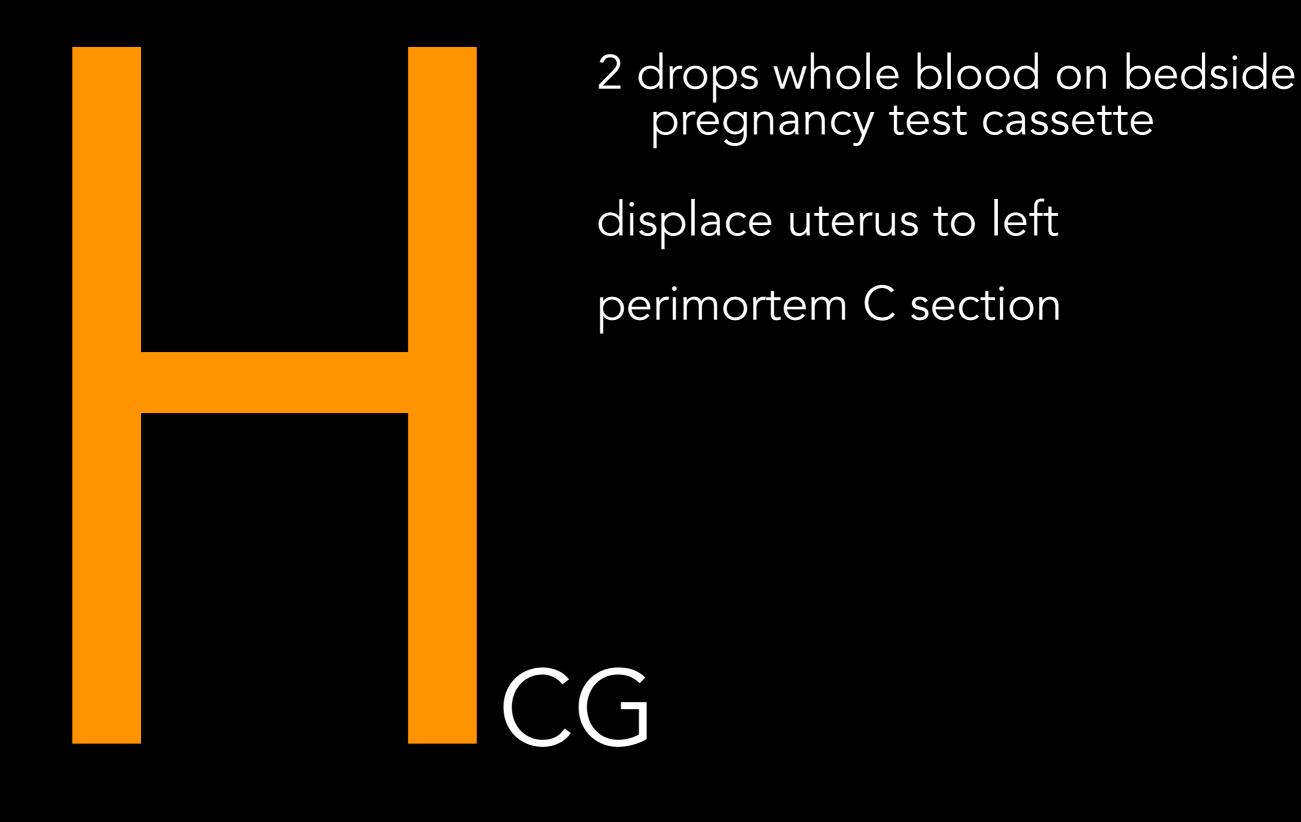
xposure

collateral history (ask EMS)
advanced directives
set expectations
family-witnessed resuscitation

amily & friends



IV/IM morphine 0.1 mg/kg
IV fentanyl 1 mcg/kg
IN fentanyl 2 mcg/kg
IV ketamine 0.15 mg/kg

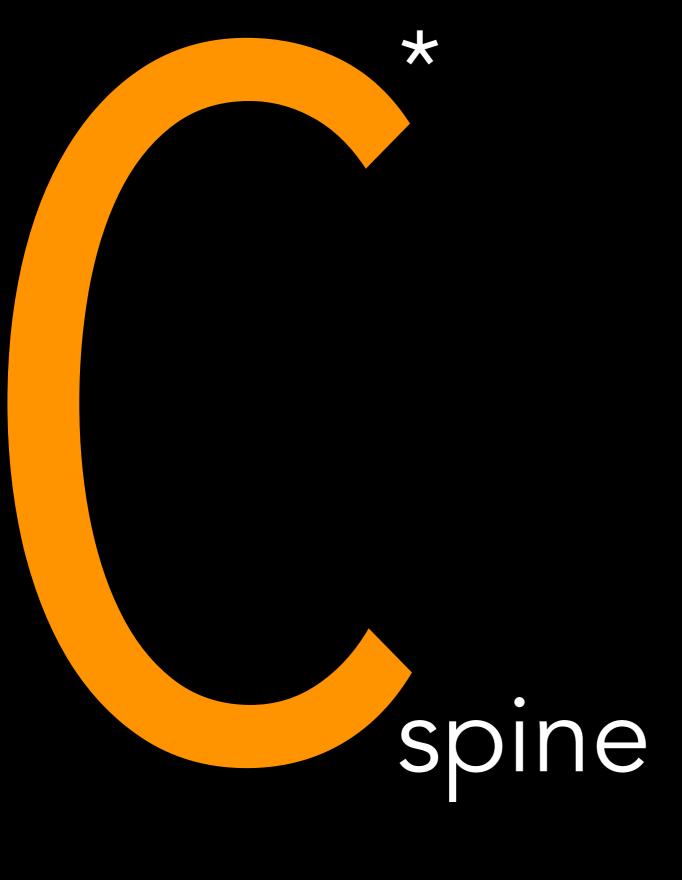


isolate broad spectrum antibiotics source control

nfection

pericardial effusion, ejection fraction RV strain, regional wall motion IVC collapsibility intraperitoneal fluid, aorta, IUP PTX, pulmonary edema, pleural effusion intracranial pressure DVT venous & arterial access

el (ultrasound)



* for oral boards

Danger

Call for help

Calm

Cardiac arrest

Airway

Breathing

Circulation

Disability

Exposure

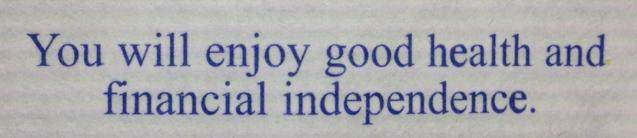
Family/friends

analGesia

HCG

Infection

Jel (ultrasound)



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