



# **Post-resuscitation Care**

(ROSC and comatose)

## Airway and Breathing

- Maintain SpO<sub>2</sub> 94 98%
- Advanced airway
- Waveform capnography
- Ventilate lungs to normocapnia

#### Circulation

- 12-lead ECG
- Obtain reliable intravenous access
- Aim for SBP > 100 mmHg
- Fluid (crystalloid) restore normovolaemia
- Intra-arterial blood pressure monitoring
- Consider vasopressor/ inotrope to maintain SBP

### **Control temperature**

- Constant temperature 32°C 36°C
- Sedation; control shivering

Likely cardiac cause? No Yes ST elevation on 12 lead ECG? No Yes **Consider Coronary** Coronary angiography ± PCI angiography ± PCI Consider CT brain No Cause for cardiac arrest and/or CTPA identified? Yes Treat non-cardiac cause of Admit to Intensive Care Unit cardiac arrest

#### **ICU** management

- Temperature control: constant temperature 32°C 36°C for ≥ 24 h; prevent fever for at least 72 h
- Maintain normoxia and normocapnia; protective ventilation
- Optimise haemodynamics (MAP, lactate, ScvO<sub>2</sub>, CO/CI, urine output)
- Echocardiography
- Maintain normoglycaemia
- Diagnose/treat seizures (EEG, sedation, anticonvulsants)
- Delay prognostication for at least 72 h

### Secondary prevention

e.g. ICD, screen for inherited disorders, risk factor management

Follow-up and rehabilitation