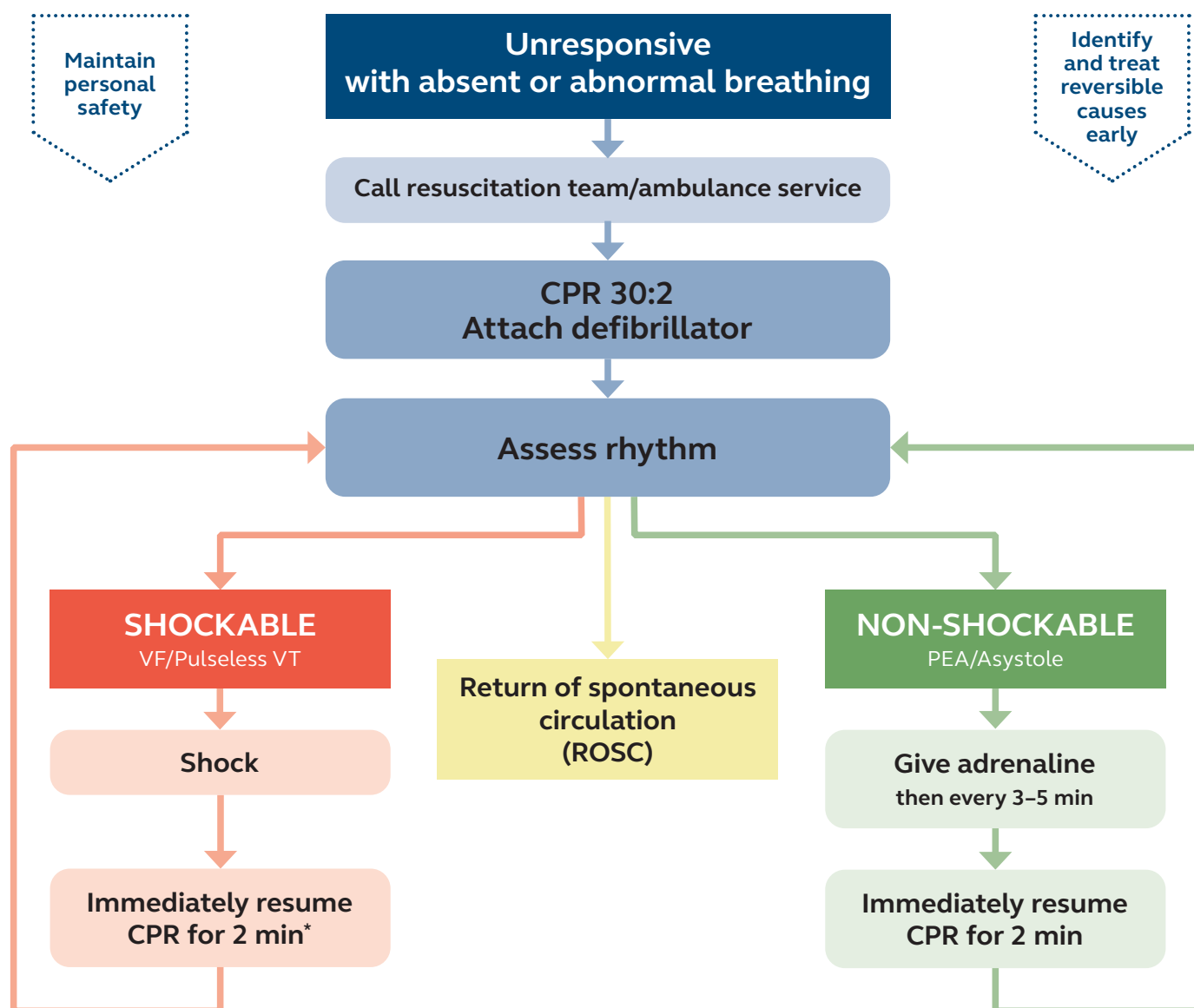


Adult advanced life support



High-quality chest compressions and ventilations, and:

- Ensure optimal defibrillator pad placement
- Give oxygen
- Continuous compressions if tracheal tube or SGA
- Use waveform capnography
- Minimise interruptions to chest compressions
- Early IV access (IO if IV not possible)

* Give 1st adrenaline after 3 shocks, then every 3-5 minutes

* Give amiodarone after 3 shocks

Reversible causes:

- Hypoxia
- Hypovolaemia
- Hyper-hypokalaemia, -calcaemia, -magnesaemia, hypoglycaemia (metabolic)
- Hypo-hyperthermia
- Thrombosis (coronary/pulmonary)
- Tension pneumothorax
- Toxins
- Tamponade (cardiac)

Consider:

- Changing pads to antero-posterior after 3 shocks
- Mechanical chest compressions to facilitate transfer/treatment
- Ultrasound to identify reversible causes
- Extracorporeal CPR and/or coronary angiography/PCI

Immediately after ROSC:

- ABCDE assessment
- Aim SpO₂ 94-98% and normal PaCO₂
- SBP > 100 mmHg
- 12-lead ECG
- Identify and treat cause
- Temperature control