Acls case scenarios answers

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9 ACLS Cases**

- Cardiac arrest due to acute coronary syndrome (ACS)
- Cardiac arrest due to arrhythmia
- Cardiac arrest due to respiratory failure
- Cardiac arrest due to hypovolemia
- Cardiac arrest due to hypoxia
- Cardiac arrest due to hyperthermia
- Cardiac arrest due to hypothermia
- Cardiac arrest due to drugs or toxins
- Cardiac arrest due to traumatic injury

10 Core ACLS Cases

- Cardiac arrest due to ACS (includes STEMI, NSTEMI, unstable angina, and ACS with cardiogenic shock)
- Cardiac arrest due to arrhythmia (includes ventricular fibrillation (VF), ventricular tachycardia (VT), pulseless electrical activity (PEA), and asystole)
- Cardiac arrest due to respiratory failure (includes COPD, asthma, pneumonia, and aspiration)
- Cardiac arrest due to hypovolemia (includes hemorrhage, dehydration, and hypovolemic shock)

- Cardiac arrest due to hypoxia (includes apnea, airway obstruction, and respiratory failure)
- Cardiac arrest due to hyperthermia (includes heat stroke and malignant hyperthermia)
- Cardiac arrest due to hypothermia (includes accidental hypothermia and therapeutic hypothermia)
- Cardiac arrest due to drugs or toxins (includes opioids, cocaine, and alcohol)
- Cardiac arrest due to traumatic injury (includes blunt chest trauma, penetrating chest trauma, and head injury)
- Cardiac arrest due to other causes (includes sepsis, metabolic abnormalities, and endocrine disorders)

How to Pass the ACLS Test

- Study the material thoroughly.
- Practice the algorithms and skills regularly.
- Take a practice test to identify areas for improvement.
- Get feedback from an experienced instructor.
- Stay calm and focused during the test.

How to Remember ACLS Algorithms

- Use visual aids, such as flowcharts or diagrams.
- Break the algorithms into smaller steps.
- Use mnemonic devices or acronyms.
- Practice the algorithms repeatedly.

4 T's in ACLS

- Tension pneumothorax
- Tamponade
- Toxins

Thrombosis

5 T's in ACLS

- Tension pneumothorax
- Tamponade
- Toxins
- Thrombosis
- Traumatic arrest

ABCS of ACLS

- **A**irway
- Breathing
- Circulation
- **D**isability
- Exposure

ACLS Algorithm

- Perform CPR
- Check rhythm
- Defibrillate if indicated
- Give medications
- Provide advanced airway management

Drug No Longer Used in ACLS

Lidocaine

Is ACLS Harder Than BLS?

Yes, ACLS is more complex and requires more advanced skills than BLS.

Is ACLS Hard to Pass?

With proper preparation and practice, most people can pass the ACLS test. However, it is not an easy test.

Is It Possible to Fail ACLS?

Yes, it is possible to fail the ACLS test.

How to Get Better at ACLS

- Take an ACLS course.
- Practice the algorithms and skills regularly.
- Get feedback from an experienced instructor.
- Attend refresher courses.

Breath Ratio in ACLS

• 30 compressions to 2 breaths

Most Important in ACLS

- Maintaining effective CPR
- Defibrillating promptly when indicated
- Giving medications appropriately

H's and T's in ACLS

- H's: Hypovolemia, Hypoxia, Hydrogen ion (acidosis), Hyperkalemia, Hypoglycemia
- **T's:** Tension pneumothorax, Tamponade, Toxins, Thrombosis, Traumatic arrest

Shockable ACLS Rhythms

- Ventricular fibrillation (VF)
- Pulseless ventricular tachycardia (VT)

When to Check Pulse During ACLS

- After every 2 minutes of CPR
- After each defibrillation attempt

5 H's in Full

- History of present illness
- History of past medical problems
- Home medications
- Hospitalization history
- Habits (e.g., smoking, alcohol use)

Newest Version of ACLS

• ACLS 2020

ACLS Update for 2024

• The next ACLS update is scheduled for 2024.

ABCD in BLS

- Airway
- Breathing
- Circulation
- Disability

AED in ACLS

Automated external defibrillator

Heart Code ACLS

 A training program for ACLS providers offered by the American Heart Association

Joules to Shock VFIb

• 200 joules

Is Vtach Shockable?

• Yes, pulseless VT (ventricular tachycardia) is shockable.

Epinephrine in ACLS

• 1 mg IV or IO every 3-5 minutes

Why Is Atropine Not Used in ACLS?

 Studies have shown that atropine is not effective in improving survival in cardiac arrest.

5 H's and 5 T's

- **5 H's:** Hypovolemia, Hypoxia, Hydrogen ion (acidosis), Hyperkalemia, Hypoglycemia
- **5 T's:** Tension pneumothorax, Tamponade, Toxins, Thrombosis, Traumatic arrest

2 Main Drugs Used in Resuscitation

- Epinephrine
- Amiodarone

Types of ACLS

- Initial ACLS (for providers who are not already trained in ACLS)
- Renewal ACLS (for providers who are already trained in ACLS)
- Pediatric ACLS (for providers who care for children)

Number of ACLS

• 10 core ACLS cases

ABCS of ACLS

- Airway
- Breathing
- Circulation
- Disability
- Exposure

ACLS Protocols

 Step-by-step instructions for managing cardiac arrest and other emergencies

Number of ACLs Can You Tear?

• 3 ACLs

Difference Between ACL and ACLs

- ACL (anterior cruciate ligament) is a single ligament in the knee.
- ACLs (access control lists) are a security feature in computer systems.

Number of ACLs Can a User Set at One Time?

Varies depending on the system and user permissions

Walking with 2 Torn ACLS

• Not recommended. It can cause further damage to the knee.

Number of Breaths in ACLS

• 2 breaths after every 30 compressions

Can Someone Have 2 ACLS?

• Yes, it is possible to have tears in both ACLs.

H and T in ACLS

- H's: Hypovolemia, Hypoxia, Hydrogen ion (acidosis), Hyperkalemia, Hypoglycemia
- **T's:** Tension pneumothorax, Tamponade, Toxins, Thrombosis, Traumatic arrest

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Joules to Shock VFIb

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Four Shockable Rhythms

- Ventricular fibrillation (VF)
- Pulseless ventricular tachycardia (VT)
- Pulseless electrical activity (PEA)
- Asystole

How Often to Shock in ACLS

• Every 2-3 minutes after the first shock

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