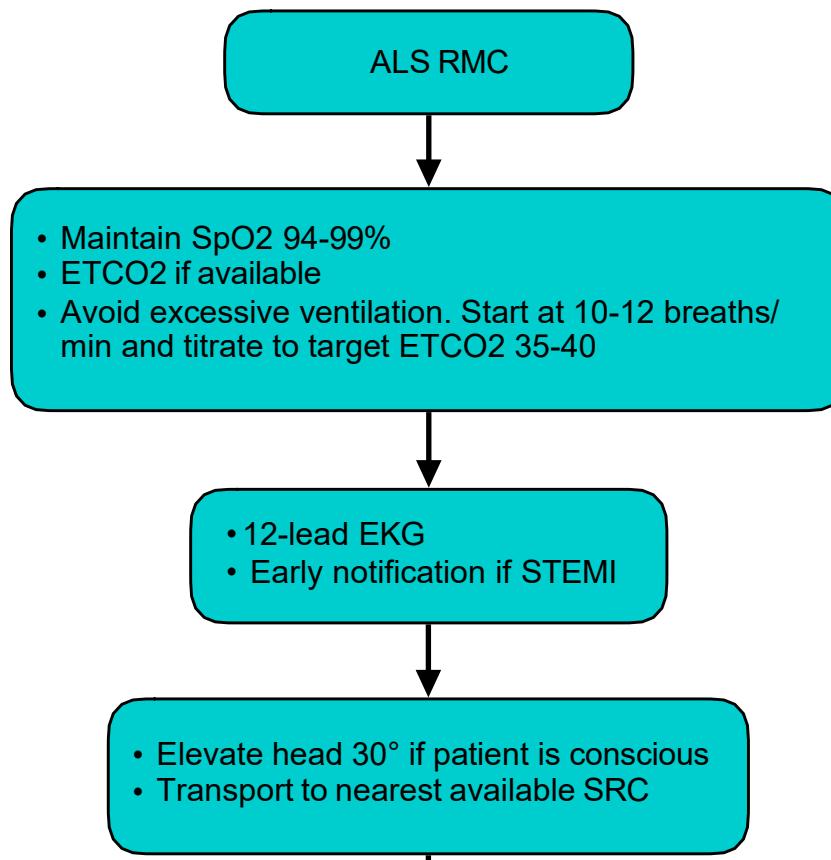


RETURN OF SPONTANEOUS CIRCULATION (ROSC)

Indications

The presence of a palpable pulse and/or blood pressure for at least 30 seconds after cardiac arrest



Critical Information

Treatment of hypotension with push-dose Epinephrine should take precedence over use of atropine for treatment of bradycardia during ROSC

If SBP <90

- **Administer NS 1L bolus IV/IO**
- If no improvement:
Push-dose Epinephrine
 - Mix 1ml Epinephrine (0.1mg/ml concentration) with 9ml NS in a 10ml syringe
 - Administer **Push-dose Epinephrine 1ml IV/IO**
 - **Repeat every 3-5 min**
 - Titrate to maintain SBP >90
 - Monitor BP every 5 minutes

SPECIAL CONSIDERATION

Reversible Causes

- Hypovolemia
- Hypoxia
- Hydrogen Ion (Acidosis)
- Hypo/Hyperkalemia
- Hypothermia
- Tension Pneumothorax
- Tamponade (cardiac)
- Toxins
- Thrombus
- Trauma