

Southern Illinois Regional EMS System

CC-4 RETURN OF SPONTANEOUS CIRCULATION/ROSC

BLS

Patient Assessment and Initial Care protocol

- Manage and support ABCs
- Oxygenate or ventilate to maintain O₂ saturation >94%
 - Ventilate 10-12 BPM
- Monitor condition and vital signs- treat per appropriate protocol
- Attempt ALS intercept and transport to PCI capable facility
- Frequently reassess for presence/loss of pulse

ILS/ALS

Continue to monitor perfusion/oxygenation

- Oxygenate or ventilate to maintain O₂ saturation >94%
 - Maintain ETCO₂ between 35-45 mmHg (if available)
- IV/IO NS TKO
- Treat hypotension
 - If lungs are clear, administer fluid bolus
 - 500 mL increments to systolic of 90 mmHg
 - (ALS) Consider **Dopamine** in consultation with Medical Control
 - Start at 5 mcg/kg/min; slowly titrate up to 20 mcg/kg/min until blood pressure is maintained above 90 mm/Hg systolic.
- Obtain 12 Lead ECG
- Consider treatable causes: Hs and Ts
 - Follow other treatment protocols as indicated
 - Chest Pain
 - Heart Failure/Pulmonary Edema
 - Etc.
- Contact Medical Control
- Consider transport to PCI capable facility