



# CCR Code Checklist

This checklist is to be utilized for the **ADULT PATIENT ONLY**

<u>Age and Sex of Pt.</u>	<u>Est. Down Time</u>	<u>CPR Start Time</u>	<u>Bystander CPR Y/N</u>	<u># of AED Shocks PTA</u>	<u>Time Last Seen Conscious</u>
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**While first crew member moves to patient to initiate compressions complete the following:**

- Delegate roles:
  - Compressors (2-3 if resources allow)
  - Airway (medic if available)
  - Access and meds (medic)
  - AED/Monitor (medic if available)
- Obtain above information
- Determine possible cause based on information provided above
- Hover hands over chest during defibrillation
- Rotate compressors every 5 cycles or 200 compressions
- Application of mechanical CPR device (if applicable)

**PERFORM CCR**

**(Patient is over 8 years of age, no suspected overdose, no suspected respiratory cause, no hypothermia, not a near drowning, not a traumatic arrest, no severe burns)**

- Initiate high quality compressions
  - Rate of at least 120 per minute
  - Perform rounds of 200 compressions
- Place high flow oxygen 15 lpm via non-rebreather mask on patient
- Initiate IO or IV access without interrupting compressions
- Administer Epinephrine 1:10,000 1 mg immediately after obtaining access- Give every 3-5 minutes
- Rhythm Analysis after every round of 200 compressions- Defibrillate if VT/VF at recommended Joule dose.
- After 4 rounds of CCR move to next section:

**PERFORM ACLS**

**(Move to this section first if CCR is contraindicated)**

- Start compression to ventilation ratio of 30:2
- Intubate or place king airway without interrupting compressions. After intubation do continuous compressions
- Continue Epinephrine 1:10,000 1 mg every 3-5 minutes
- If VT or VF persists administer Amiodarone 300 mg bolus.
  - Second bolus of Amiodarone is 150 mg bolus if refractory to first dose
- Post arrest care:
  - Dopamine: 2-20 mcg/kg/min for hypotension
  - Amiodarone 1 mg/min IV x 6hrs, then 0.5 mg/min IV x 18hr. (900mg/500 ml D5W).

<u># of Defibrillations + Highest Joule</u>	<u># rounds of Epi</u>	<u>Initial Rhythm</u>	<u>ROSC? Y/N</u>	<u>Rhythm after ROSC</u>	<u>Antiarrhythmic Started? Y/N</u>
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