



PALS Cardiac Arrest Guide



Immediate Treatment of Pediatric Arrest:

- Call for help!
- Start CPR – 100-120 compressions/minute
- If no advanced airway, use compression/ventilation ratio of of:
 - 15:2 if 2 rescuers (pre-puberty)
 - 30:2 if 2 rescuers (post-puberty onset) or if 1 rescuer
- If advanced airway, give rescue breaths every 2-3 seconds
- If defibrillation needed, deliver 1st shock at 2J/kg, second and subsequent shock at least 4J/kg
- Drug therapy (IV or IO):
 - Epinephrine (for asystole, PEA, or tachycardia/fibrillation) 0.01 mg/kg every 3-5 min
 - Amiodarone (for fibrillation or pulseless VT) 5mg/kg up to 3 doses (max 300 mg for 1st dose, max 150 mg for 2nd and 3rd doses)
 - Lidocaine 1 mg/kg
- Check for reversible causes:
 - Hypovolemia –treat with IV fluids
 - Hypoxia – treat with oxygen, respiratory support
 - Acidosis – treat with respiratory support and sodium bicarbonate
 - Hypoglycemia – treat with glucose
 - Hypothermia – warm patient
 - High or low potassium – correct potassium levels
 - Tension pneumothorax or tamponade – physician treats with decompression or pericardiocentesis
 - Toxins – identify and treat based on drug or ingestion
 - Thrombosis (pulmonary or cardiac) – identify cause and physician treats