

Cardiac Arrest – Asystole/Pulseless Electrical Activity (PEA)	
ADULT	PEDIATRIC
BLS Procedures	
Initiate Cardiac Arrest Management (CAM) Protocol per VCEMS Policy 733 Airway management per VCEMS Policy 710	
ALS Standing Orders	
<p>IV or IO access</p> <p>Epinephrine 0.1 mg/mL (Administer ASAP)</p> <ul style="list-style-type: none"> IV/IO – 1 mg (10 mL) q 6 min Repeat x 2 for max of 3 doses during initial arrest If ROSC then re-arrest: additional 3 doses may be administered <p>Normal Saline</p> <ul style="list-style-type: none"> IV/IO – 1 Liter bolus <p>Treat underlying causes when identified: <u>Renal Failure / History of Dialysis</u></p> <p>Calcium Chloride</p> <ul style="list-style-type: none"> IV/IO – 1g Repeat x 1 in 10 min <p>Sodium Bicarbonate</p> <ul style="list-style-type: none"> IV/IO – 1 mEq/kg Repeat 0.5 mEq/kg x 2 q 5 min <p><u>Tricyclic Antidepressant Overdose</u></p> <p>Sodium Bicarbonate</p> <ul style="list-style-type: none"> IV/IO – 1 mEq/kg Repeat 0.5 mEq/kg x 2 q 5 min <p><u>Beta Blocker Overdose</u></p> <p>Glucagon</p> <ul style="list-style-type: none"> IV/IO – 2 mg up to 10 mg when available <p><u>Calcium Channel Blocker Overdose</u></p> <p>Calcium Chloride</p> <ul style="list-style-type: none"> IV/IO – 1 g Repeat x 1 in 10 min <p>Glucagon</p> <ul style="list-style-type: none"> IV/IO – 2 mg up to 10 mg when available <p>ALS Airway Management</p> <ul style="list-style-type: none"> Ventilate by BLS measures. If indicated, initiate appropriate advanced airway procedures in accordance with VCEMS Policy 710 	<p>IV or IO access</p> <p>Epinephrine 0.1 mg/mL (Administer ASAP)</p> <ul style="list-style-type: none"> IV/IO – 0.01mg/kg (0.1 mL/kg) q 6 min Repeat x 2 for max of 3 doses during initial arrest. If ROSC then re-arrest and additional 3 doses may be administered <p>Normal Saline</p> <ul style="list-style-type: none"> IV/IO – 20 mL/kg bolus <p>Treat underlying causes when identified: <u>Renal failure / History of Dialysis</u></p> <p>Calcium Chloride</p> <ul style="list-style-type: none"> IV/IO – 20 mg/kg Repeat x 1 in 10 min <p>Sodium Bicarbonate</p> <ul style="list-style-type: none"> IV/IO – 1 mEq/kg Repeat 0.5 mEq/kg x 2 q 5 min <p><u>Tricyclic Antidepressant Overdose</u></p> <p>Sodium Bicarbonate</p> <ul style="list-style-type: none"> IV/IO – 1 mEq/kg Repeat 0.5 mEq/kg x 2 q 5 min <p><u>Beta Blocker Overdose</u></p> <p>Glucagon</p> <ul style="list-style-type: none"> IV/IO – 0.1 mg/kg up to 10 mg when available <p><u>Calcium Channel Blocker Overdose</u></p> <p>Calcium Chloride</p> <ul style="list-style-type: none"> IV/IO – 20 mg/kg Repeat x 1 in 10 min <p>Glucagon</p> <ul style="list-style-type: none"> IV/IO – 0.1 mg/kg up to 10 mg when available <p>ALS Airway Management</p> <ul style="list-style-type: none"> Ventilate by BLS measures. If indicated, initiate appropriate advanced airway procedures in accordance with VCEMS Policy 710
Base Hospital Orders Only	
Consult with ED Physician for further treatment measures	
<p>Additional Information:</p> <ul style="list-style-type: none"> If sustained ROSC (> 30 seconds), activate VF/VT alarm and initiate post arrest resuscitation as outlined in VCEMS Policy 733. For termination of resuscitation, transport decisions, and use of base hospital consult reference VCEMS Policy 733. If patient is <u>hypothermic</u>: Limit treatment to ONE round of medication prior to Base Hospital contact. Field determination of death is discouraged in these patients and they should be transported to the most accessible receiving facility. 	

Effective Date: July 1, 2026

Date Revised: March 12, 2026
Last Reviewed: March 12, 2026



VCEMS Medical Director