CONFIRM UNRESPONSIVENESS AND CHECK ABCS
If pulseless begin CPR

MONITOR

CONFIRM V-FIB/V-TACH

DEФBRILLATE 2 J/KG

CPR FOR 2 MINUTES

CHECK RHYTHM

VF/VT?

DEFBRILLATE 4 J/KG

CONSIDER ADVANCED AIRWAY

CPR FOR 2 MINUTES

ESTABLISH VASCULAR ACCESS
Epinephrine 0.1 ml/kg (0.01mg/kg) IV/IO 1:10,000
Repeat every 3 to 5 minutes

CHECK RHYTHM

DEFBRILLATE @ 4 J/KG

CPR FOR 2 MINUTES

Amiodarone 5 mg/kg IV/IO
May repeat X2
(Max dose 300 mg)

CHECK RHYTHM

DEFBRILLATE @ 4 J/KG

CPR FOR 2 MINUTES

TRANSPORT AND CONTACT MEDICAL CONTROL AS APPROPRIATE

PULSE PRESENT?

NO

SEE APPROPRIATE SMO

YES

TRANSPORT AND CONTACT MEDICAL CONTROL AS APPROPRIATE

1 – Pediatric CPR rates: 1 rescuer = 30 compressions: 2 ventilations
2 rescuers = 15 compressions: 2 ventilations

2 – Consider endotracheal drug administration, if vascular access unavailable
Epinephrine 0.1 ml/kg (0.1 mg/kg) ET 1:1,000

Copyright 2016 Chicago EMS Medical Directors Consortium
Written: 3/98
Reviewed: 6/00; 12/01; 3/09; 8/11; 3/12; 10/15
Revised: 6/00; 1/02; 3/09; 6/11; 3/12; 10/15
MDC Approval: 4/98; 6/00; 1/02; 4/7/09; 6/7/11; 3/6/12; 10/5/15
IDPH Approval: 1/99; 6/00; 5/02; 7/9/09; 9/29/11; 1/31/13; 2/25/16
Implementation: 8/1/99; 10/00; 1/1/03; 1/1/10; 4/1/12; 2/1/13; 3/1/16

ALS H-4