VENTRICULAR FIBRILLATION / PULSELESS VENTRICULAR TACHYCARDIA – ALS

1. Confirm unresponsiveness and check CABs. If pulseless begin CPR and ICCA.
2. Cardiac monitor.
3. Confirm V-fib/V-tach.
4. Defibrillate according to manufacturer’s guidelines.
5. CPR for 2 minutes. Establish vascular access IV/IO.
7. Defibrillate according to manufacturer’s guidelines.
8. CPR for 2 minutes.
9. Epinephrine 1:10,000 (1 mg/10 ml) IVP. Repeat q 3-5 min.
10. Establish advanced airway. Apply capnography*.
12. Defibrillate according to manufacturer’s guidelines.
13. CPR for 2 minutes.
14. Amiodarone 300 mg IVP.
15. Confirm V-fib/V-tach.
16. Defibrillate according to manufacturer’s guidelines.
17. Contact Medical Control from scene.

For patients with ROSC, see Adult Post-Cardiac Arrest Care & Therapeutic Hypothermia procedure.

* If ETCO₂ < 10 mmHg, attempt to improve CPR quality.
1 – Repeat Amiodarone dose 150 mg IVP after 5th defibrillation ONLY IF patient remains pulseless and in shockable rhythm.