Pediatric Cardiac Arrest
– Advanced Life Support
– 2015 ECC Guidelines

- Identify Cardiac Arrest
- Begin and maintain CPR
- Ventilate with supplemental O2
- Attach monitor/Defibrillator

Is the Rhythm SHOCKABLE?

Ventricular Fibrillation or Pulseless VT

2 Joules/kg

CPR
IV/IO access

Rhythm Shockable?

4 Joules/kg

CPR
- Epinephrine (repeated every 3-5 min)
- Consider advanced airway, (skill of provider - equipment)

Rhythm Shockable?

Increase Dose
Each Defib to A Max of 10 J/kg

CPR
- Amiodarone or Lidocaine
- Find and Treat reversible causes

Asystole/PEA

CPR
- IV/IO access
- Epinephrine every 3–5 min
- Consider advanced airway

Evaluate Rhythm q 2 minutes for shockable rhythm
- Find and Treat Reversible Causes

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Version control: This document is current with respect to 2015 American Heart Association Guidelines for CPR and ECC. These guidelines are current until they are replaced on October 2020.
If you are reading this page after October 2020, please contact ACLS Training Center at support@acls.net for an updated document. Version 2019.12a