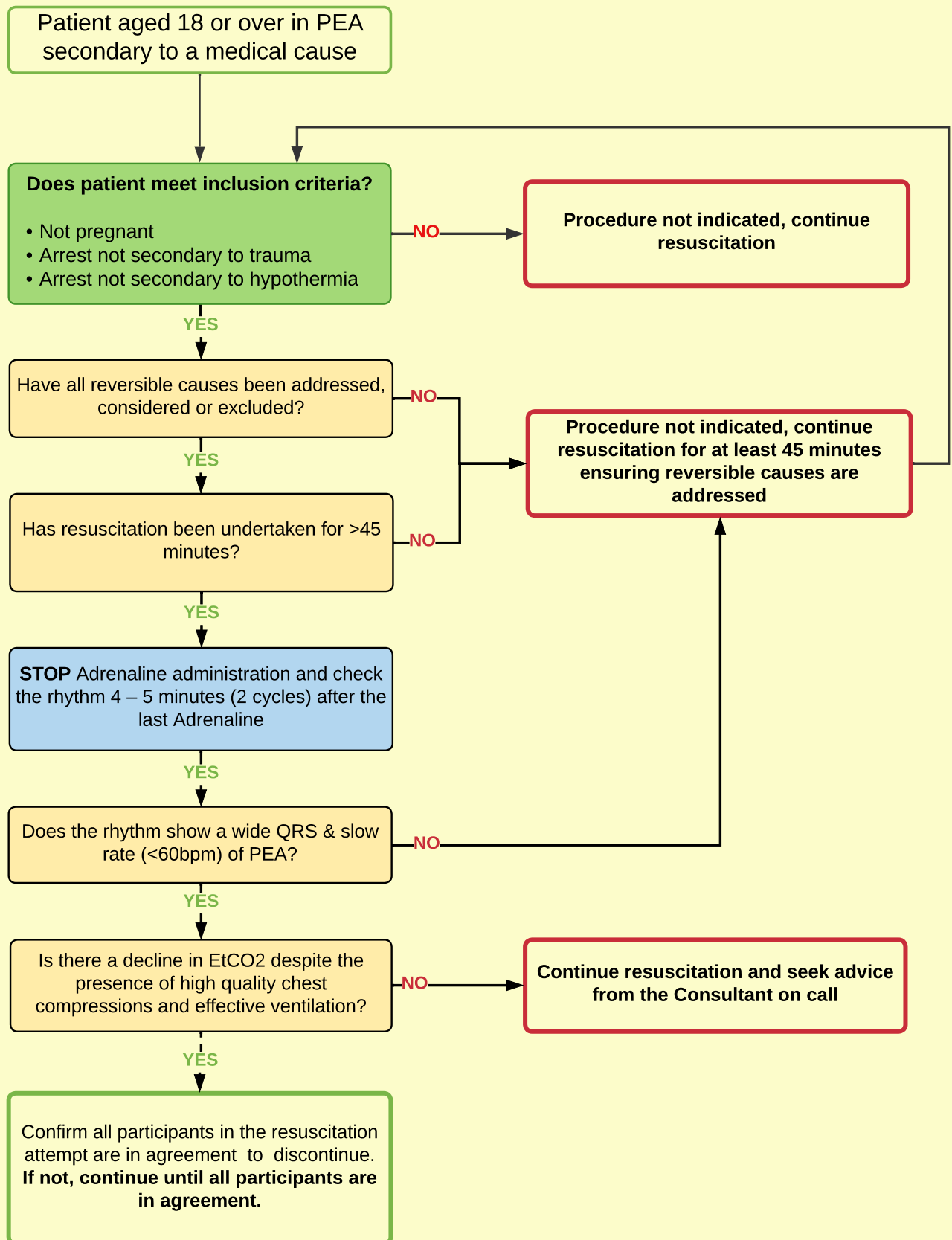




Critical Care Clinical Practice Guideline

CESSATION OF ADVANCED LIFE SUPPORT IN PEA





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CESSATION OF ADVANCED LIFE SUPPORT IN PEA

Cessation of ALS

The purpose of this guideline is to assist the CCP in the identification of patients who due to significantly deranged physiology following prolonged cardiac arrest are unlikely to survive the cardiac arrest in the pre hospital setting.

The ERC 2015 guidelines define futile medical treatment as a treatment that “offers no reasonable hope of recovery or improvement” or from which “the patient is permanently unable to experience any benefit”. Resuscitation is considered futile when the chances of good quality survival are minimal. CPR that has no chance of success in terms of survival or acceptable quality of life is pointless and may violate the right for mercy and dignity in the face of death (1).

The decision to use this guideline must be treated with the utmost gravity and careful consideration of the patient’s circumstances, including but not limited to the duration of the ALS attempt, reversible causes and comorbidities. It should be worked through with all clinicians present.

Indications:

- Resuscitation initiated as the result of a medical event.
- Where resuscitation has been continued for >45 minutes with a minimum 20 minutes of ALS **AND** the current rhythm is PEA.

Contraindications:

- In the presence of Hypothermia.
- Pregnant patients.
- Children.
- Traumatic cardiac arrest

Important Points

The PCR and CCPBase documentation must reflect, in detail, the reasoning behind the cessation of the resuscitation attempt.

As a part of this guideline, an echocardiogram should be performed If the CCP equipped and trained. If this is not possible however, the CMP can still be applied. It must be documented if there is cardiac standstill on ultrasound, or if it has not been possible to perform the procedure.

On call Topcover can always be contacted if there are any problems or concerned with terminating resuscitation attempts in this patient group.