



# EMT-Basic Treatment Protocol 6406

## Pediatric Emergencies Cardiac Arrest Treatment - CAT

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Cardiac arrest in infants and children is usually a result of a depressed respiratory function resulting in decreased cardiac function. Cardiac arrest can be prevented if respiratory failure, shock and/or cardiac failure are quickly recognized and aggressively treated.

**Prior to arrival at a confirmed or suspected cardiac arrest, call for ALS backup.**

- A. Perform **Peds MAMP Protocol 6401**.
- B. Assess breathing and pulse.
- C. If no pulse, complete one minute of ventilation and compressions.
- D. If child is > 1 year old:
  1. Attach AED – analyze rhythm:
    - a. Use anterior – posterior pad placement if using adult electrodes.
    - b. Use standard placement if using pediatric electrodes.
  2. Administer one shock if advised.
  3. Check pulse.
  4. If no pulse present:
    - a. Continue CPR.
    - b. Manage airway and oxygenation per **Airway Management Protocol 6901**.
    - c. Re-analyze rhythm after every 5 cycles of CPR.
      - i. Repeat an additional single shock if advised.
      - ii. If no shock indicated, continue CPR.



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5. If pulse present:
  - a. Assess vital signs – continuously monitor pulse.
  - b. Leave AED attached to patient.
  
- E. If child is < 1 year old:
  1. If no pulse, perform CPR.
  2. Ventilate with 100% oxygen via bag valve mask.
  
- F. Transport – continue treatment en route:
  1. Request ALS backup if not previously done.

2. Contact Medical Command

