History
- Respiratory arrest
- Cardiac arrest

Signs and Symptoms
- Return of spontaneous circulation

Differential
- Continue to address specific differentials associated with the original dysrhythmia

Contra Costa County Emergency Medical Services
Post Resuscitation (ROSC)

- Repeat primary assessment
- Optimize ventilation and oxygenation
  - Maintain SpO2 ≥ 94%
  - Maintain respiratory rate between 6 – 10/minute for EtCO2 35 – 45
  - DO NOT HYPERVENTILATE
- Monitor vital signs
- Advanced airway placement, if indicated
- Obtain 12-Lead ECG
- Establish IO/IV
  - If systolic BP < 90
    - Normal Saline bolus 500ml IV/IO
    - May repeat as needed if lungs are clear
    - Maximum 2L
- Transport to STEMI Receiving Center
- Symptomatic Bradycardia?
  - Yes
    - Consider sedation if advanced airway in place
      - Midazolam 2.5mg IV/IO
      - May repeat in 3 – 5 minutes as needed
      - Monitor for hypotension
  - No
    - Consider pain control if advanced airway in place
      - Fentanyl 25 – 100mcg IV/IO
      - May repeat 25mcg every 20 minutes as needed
      - Maximum 200mcg
- Notify receiving facility.
- Contact Base Hospital for medical direction, as needed.

Approved STEMI Receiving Centers
- John Muir – Concord
- John Muir – Walnut Creek
- Kaiser – Walnut Creek
- San Ramon Regional
- Sutter Delta
- Highland – Oakland
- Kaiser – Oakland
- Kaiser – Vallejo
- Marin General
- Summit – Oakland
- Valley Care – Pleasanton

Effective Jan. 2020

Notify receiving facility.
Contact Base Hospital for medical direction, as needed.