Contra Costa County Emergency Medical Services

Post Resuscitation (ROSC)

**History**
- Respiratory arrest
- Cardiac arrest

**Signs and Symptoms**
- Return of spontaneous circulation

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

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### E
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

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### P
Bradycardia TG

**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

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**Transport to STEMI Receiving Center**

Symptomatic Bradycardia?

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### Symptomatic Bradycardia?

**Yes**

Notify receiving facility.
Contact Base Hospital for medical direction

**No**

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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