

PEDIATRIC ASYSTOLE/PULSELESS ELECTRICAL ACTIVITY



1. Perform CPR for 2 minutes.
2. Administer **O₂** with **Bag Valve Mask** and consider establishing advanced airway (ETT or advanced supraglottic airway).
3. Apply monitor/defibrillator.
4. Establish IV/IO access.
5. Administer **epinephrine** at 1:10 000, 0.01 mg/kg IV/IO or 1:1 000, 0.1 mg/kg ET diluted in 3 ml NS. Repeat q 3-5 minutes.
6. Perform rhythm assessment.
7. Perform CPR for 2 minutes.
8. Identify and treat possible causes:
 - ✓ Hypovolemia
 - ✓ Hypoxia
 - ✓ Hydrogen Ion (acidosis)
 - ✓ **Hypoglycemia**
 - ✓ Hypo/hyper kalemia
 - ✓ Tension pneumothorax
 - ✓ Tamponade, cardiac
 - ✓ Toxins
 - ✓ Thrombosis pulmonary
9. Continue CPR, rhythm assessment, and epinephrine sequence until ROSC or termination.
10. Transport patient ASAP.