

# Adult Continuous Compressions Primary Cardiac Arrest

**Inclusion criteria:  $\geq 8$  years old**

Initiate Compressions

Check pulse (<10 sec)  
Attach pads, analyze rhythm (**in paddles mode or AED if Basic or Intermediate**)  
Shock if indicated (No pulse check after shock)

**Age  $\geq 12$**

**As soon as possible:**

**Place Mechanical Compression Device (AutoPulse or LUCAS Device) with designated operator**

200 Compressions at a rate of 100–120 per minute

Simultaneous with compressions:  
IV/IO  
NPA/OPA  
NRB@15lpm  
[EtCO<sub>2</sub>](#) (if available)

**Drugs: Refer to the specific protocol for the presenting rhythm**

At 175 compressions, or if ECD in place at 1m 45sec, pre-charge the monitor to 360J (LP15) or 200J (Zoll)

Analyze rhythm, check pulse (<10 sec)  
Shock if indicated

*No pulse check after shock*

200 Compressions

Repeat previous sequence

200 Compressions

*Continue with 200 compressions, pre-charging and shocking if necessary for the duration of the code or achievement of ROSC*

Airway management:  
Ventilate with a [BVM](#)  
Give asynchronous ventilations at a rate of 8–10 bpm  
and progress to an advanced airway

## **\*\*\*KEY POINT\*\*\***

- All Codes should be run in paddles view to gather information for CodeStat (LP 15)
- If patient is pregnant, manually shift fetus to the left lateral side to restore IVC blood flow back to the heart
- If emesis is present, suction immediately
- Contraindications for Auto Pulse/ LUCAS: Patients who are too large and cannot press the pressure pad down 2 inches, or too small and cannot pull the pressure pad down to touch the sternum.