County of San Luis Obispo Public Health Department

Division: Emergency Medical Services Agency Effective Date: 08/01/2019

Protocol #661

TRAUMATIC CARDIAC ARREST	
ADULT	PEDIATRIC (≤34KG)
BLS	
Universal Protocol #601	Same as Adult
Obvious Death	
Non-initiation - Prehospital Determination of Death Policy #125	
Traumatic arrest without signs of life upon EMS arrival  Consider non-initiation – Prehospital	
Determination of Death Policy #125	
Traumatic arrest after EMS arrival	
HPCPR (10:1) and minimize interruptions (< 5)	
seconds)	
ALS Standing Orders	
Traumatic arrest <u>after</u> EMS arrival <u>and</u> < 20 min from nearest hospital	Same as Adult (except as noted below)
Resuscitate and treat for reversible causes	Normal Saline 20 mL/kg IV/IO not to exceed
Do not delay transport	500 mL
o Perform ALS treatments en route	<ul> <li>May repeat x1 if no ROSC</li> </ul>
Normal Saline up to 500 mL     Nov repeat v1 if no POSC	
<ul> <li>May repeat x1 if no ROSC</li> <li>Do not use Epinephrine or Lidocaine unless the</li> </ul>	
arrest is suspected to be of medical origin	
Suspected Tension Pneumothorax see Needle	
Thoracostomy Procedure #705	
Unstable Pelvis see Pelvic Binder Procedure	
#712	
ROSC see General Trauma Policy #660	
Base Hospital Orders Only	
Traumatic arrest after EMS arrival and > 20 min	Same as Adult
from nearest hospital	
Contact SLO Trauma Center for treatment	
and/or destination	
<ul><li>Termination of resuscitation</li><li>As needed</li></ul>	
	tos
Notes  Signs of life to be evaluated include: heart and respiratory rate, heart and lung sounds, pupil size and	
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- reactivity
- Trauma Center is the preferred destination if equal or near equal distance
- Do not delay transport for advanced airway or other treatment modalities
- Consider medical origin in older patients with low probable mechanism of injury
- Unsafe scene or other circumstances may warrant transport despite low potential for survival
- Minimize disturbance of potential crime scene