

Post-Cardiac Arrest Care Algorithm



ROSC

RESPIRATORY OPTIMIZATION

Spontaneous Breathing?

NO

YES

PaCO₂ or EtCO₂ +5 mm Hg
Dog = 32-43 mm Hg?
Cat = 26-36 mm Hg?

NO

IPPV

YES

YES

Titrate Supplemental Oxygen

NO

FiO₂ ≥ 0.6

SpO₂ > 98%
PaO₂ > 100 mm Hg
Hyperoxemic

SpO₂ = 94-98%
PaO₂ = 80-100 mm Hg
Normoxemic

SpO₂ < 94%
PaO₂ < 80 mm Hg
Hypoxemic

SAP > 200 mm Hg
MAP > 120 mm Hg
Hypertensive

SAP = 100-200 mm Hg
MAP = 80-120 mm Hg
Normotensive

SAP < 100 mm Hg
MAP < 80 mm Hg
Hypotensive

1 ↓ Pressor

2 Treat Pain

3 Anti-hypertensive

ScvO₂ ≥ 70%?
Lactate < 2.5 mmol/L?

YES

Transfuse

NO

1 Hypovolemia?
CVP < 10 cm H₂O?

YES

IV fluids

2 Vasodilation?
↓ CRT, Injected MM?

YES

Vasopressor

3 ↓ Contractility?

YES

+ Inotrope

4 PCV < 25%?

YES

HEMODYNAMIC OPTIMIZATION

NEUROPROTECTION

ICU

Consider:

- Hypothermia if comatose
- Mannitol / HTS if neuro signs
- Seizure prophylaxis