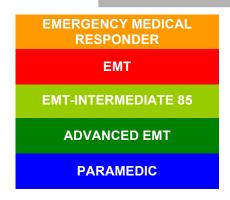


EMS System for Metropolitan Oklahoma City and Tulsa 2022 Medical Control Board Treatment Protocols



Approved 9/14/22, Effective 10/1/22, Replaces All Prior Versions

4N – EleGARD[®] HEAD UP CPR ADULT



Indication:

Adult non-traumatic cardiac arrest (includes isolated hanging or strangulation)

Contraindications:

Spontaneous circulation
Traumatic cardiac arrest
Patient size/body habitus prevents correct positioning
Sternotomy less than 6 months old – by history or best estimate if history unconfirmed

Technique:

- 1. Move patient to area allowing approximately 3 feet of space in all directions (if applicable).
- 2. Position EleGARD® near the patient's head. DO NOT apply c-collar when using EleGARD®
- 3. Power on EleGARD® device by depressing the #1 button.
- 4. 'Coordinate lifting the patient's torso (to no more than approximately 45 degrees) and sliding the lower edge of EleGARD® under the patient until that edge comes to the approximate line of the patient's tailbone, with the patient's head being cradled within the head rest of EleGARD®.
- 5. Lower the patient and EleGARD® together, aligning the patient with their armpits above the compression backplate (yellow board) ensuring the neck rest is at the base of the neck. This may involve pulling EleGARD® back while lowering to ensure proper alignment. While not always possible, the goal for completion of steps 4 & 5 is within 10 seconds.
- 6. Place a superglottic airway with a ResQPOD® and continue ResQPUMP® CPR. Once ResQPOD® is in place on the airway, press #2 button and continue with 2 minutes of CPR. Begin manual CPR if the ResQPUMP® is either not available or not effective.



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Protocol 4N: EleGARD® Head Up CPR, Adult, (cont.)

Technique (cont.):

- 7. Adjust patient position as necessary. DO NOT stop CPR until the timer flashes indicating the end of the 2-minute CPR cycle.
- 8. Activate the head/neck/upper trunk elevation sequence by depressing the #3 button. The sequence is automatic once the #3 button is depressed and will take 2 minutes. The battery lights will illuminate in an upward cascade as the head/neck/upper trunk are being elevated. Limit any interruptions in compressions while EleGARD® is elevating. Continue standard resuscitative measures.
- 9. In instances of ROSC and a mean arterial blood pressure of 65mmHg or greater or a systolic blood pressure of 90mmHg or greater, the head of the patient should remain elevated in the head-up device. In instances where the mean arterial pressure is below 65mmHg or systolic BP below 90 mmHg, the head-up device should be lowered to the lowest position in the device.
- 10. If transporting, lift EleGARD® horizontally just enough to slide a Mega Mover under the patient's torso. Lift the patient's legs to assure Mega Mover extends the complete length of the patient. Before and after any patient move, check patient positioning for correctness in EleGARD®.
- 11. When patient transfer of care occurs or termination of resuscitation occurs, EleGARD[®] is lowered to its resting position by depressing the gray "DOWN" button.
- 12. Complete decontamination of EleGARD® and ready its next use following departmental/OMD instructions.





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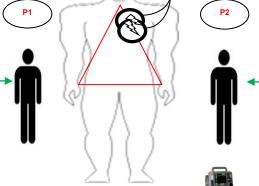
4N - RESUSCITATION TEAM ROLES EleGARD® HEAD UP CPR-ADULT

TREATMENT PRIORITIES PRIOR TO PRIMING PHASE < 2 MINUTES:

- 1. Circulatory Support
 - Apply ResQCPR®, and place EleGARD®
 - Continuous chest compression: 110/min standard CPR
 - Place i-gel® with ResQPOD®, inline EtCO2/waveform capnography, & OGT
 - Once i-gel®, and ResQPod® in place: 80 chest compression decompression cycles/min ResQCPR® with ResQPUMP®
 - ➤ Prior to priming phase, rhythm analysis, and timely defibrillation (if indicated)
 - Start priming phase by pressing button # 2
 - Priming phase is 2 min uninterrupted CPR with, i-gel®, ResQPod®, ResQPUMP®, and EleGARD®
- 2. Oxygenation/Ventilation support
 - Avoid hyperventilation in rate & volume

Use waveform capnography **mandatory use if patient intubated Position 3 (P3) always at patient's head Position 4 (P4) post EleGARD® Position 4 (P4) initial location always Preps and places i-gel[®], ResQPOD[®] deployment always outside CPR outside CPR "triangle" inline EtCO2/waveform capnography, "triangle" • States "EleGARD® is ready" when ready inline airway filter (if using), and BVM Assist P3 with prepping/placing i-gel® to deploy Assist with placing posterior Places EleGARD® & OGT (after EleGARD® is in place) defibrillation pad • 8-10 ventilations without pause in compressions Post ELeGARD® **Initial Location Deployment** Airway Bag Position 2(P2) always on patient's left Position 1 (P1) always on patient's right • Starts metronome for P1 (if attached • Starts chest compression and voices to to the monitor) start metronome (chest compressions at • Places anterior defibrillation pad, 110 compressions/minute using hands positions posterior defibrillation pad so

- Helps guide EleGARD® (grabs LUCAS back plate to guide under axillae)
- Initiates ResQPUMP® CPR once ResQPOD® is placed on i-gel®



Anterior-Posterior Pad Placement (1st defibrillator) 2nd defibrillator per protocol 4E

- that P3 can access during patient lift, and attaches cable to LP15
- Straddles patient, grabs both arms and lifts patient's torso so EleGARD® can be placed
- When EleGARD® is placed, events EleGARD®, and pre-charges monitor
- Does not interrupt priming phase

Post Deployment of EleGARD® Follow

- Protocol 4B Resuscitation Team Roles
- 4N EleGARD® HEAD UP CPR ADULT