Approved 9/2/26, Effective 1/15/27 replaces all prior versions

4G VENTRICULAR FIBRILLATION & PULSELESS VENTRICULAR TACHYCARDIA ADULT & PEDIATRIC

TREATMENT PRIORITIES:

1. Continuous chest compressions
   - Apply ResQCPR® within 2 minutes
   - 80/min ResQCPR®
   - 110/min standard CPR
2. Timely defibrillation
3. Evaluate and treat underlying cause(s)
4. Timely vasopressor administration
5. Timely antiarrhythmic administration
6. Resuscitation per Protocols 4A & 4B

EMERGENCY MEDICAL DISPATCHER

EMERGENCY MEDICAL RESPONDER

EMT

EMT-INTERMEDIATE 85

ADVANCED EMT

PARAMEDIC

PARAMEDIC

MANUAL DEFIBRILLATION:
PAUSE CPR FOR A SINGLE SHOCK. LIMIT DEFIBRILLATION COMPRESSION PAUSE TO MAXIMUM OF 10 SECONDS.
ADULT: IF PT ESTIMATED WEIGHT < 100 kg ESCALATING DEFIBS AT 200J, 300J, 360J
FOURTH & SUBSEQUENT DEFIBS UTILIZING DOUBLE SEQUENTIAL EXTERNAL DEFIBRILLATION PER PROTOCOL 4E

ADULT: IF PT ESTIMATED WEIGHT ≥ 100 kg FIRST DEFIB AT 360 JOULES
SECOND & SUBSEQUENT DEFIBS UTILIZING DOUBLE SEQUENTIAL EXTERNAL DEFIBRILLATION PER PROTOCOL 4E

PEDIATRIC: INITIAL DEFIB 2 JOULES/kg, SECOND & SUBSEQUENT DEFIBS 4 JOULES/kg

COUNT AED DEFIBRILLATIONS PRIOR TO DETERMINING MANUAL DEFIBRILLATION SETTING

VASOPRESSOR ADMINISTRATION:
ADULT: EPINEPHRINE 1 mg IVP/IOP. REPEAT EVERY 3-5 MINUTES. MAXIMUM CUMULATIVE DOSE 3mg
PEDIATRIC: EPINEPHRINE 0.1mg/mL (1:10,000) at 0.01 mg/kg (0.1 mL/kg) IVP/IOP. REPEAT EVERY 3-5 MINUTES

ANTIARRHYTHMIC ADMINISTRATION:
ADULT: AMIODARONE 300 mg IVP/IOP. REPEAT AT 150 mg IVP/IOP IN 5 MINUTES. MAXIMUM CUMULATIVE DOSE 450 mg.
EPINEPHRINE 1 mg IVP/IOP WITH EVERY AMIODARONE ADMINISTRATION

ADULT: MAGNESIUM SULFATE 1 gram IVP/IOP IF TORSADES (POLYMORPHIC PULSELESS VENTRICULAR TACHYCARDIA)

PEDIATRIC: AMIODARONE 5 mg/kg IVP/IOP SINGLE DOSE.
EPINEPHRINE 0.01 mg/kg (1:10,000. 0.1 mL/kg) WITH AMIODARONE ADMINISTRATION.

IF SUCCESSFUL CONVERSION TO SUSTAINED PULSATILE RHYTHM (RETURN OF SPONTANEOUS CIRCULATION):
ADULT: AMIODARONE 150mg IVPB (ADD TO 100mL NS BAG, INFUSE OVER 10 MINUTES)
PEDIATRIC: OLMC CONSULT