ROSC after cardiac arrest

Universal patient assessment and treatment

Manage airway & do not hyperventilate

Initiate therapeutic hypothermia if there is no contraindication
Check patient temperature, if possible
Give 30 cc/kg (up to 2 liters) ice-cold (4°C) normal saline bolus as a rapid infusion AND/OR place ice packs to neck, axillae, groin

1. Treat shivering with opioid IV/IO
2. If pulses lost after initiation of TIH, follow universal pulseless arrest algorithm and continue cooling

5. If hypotensive, call base for dopamine order

12 lead ECG to identify STEMI if present

Transport to a hospital with TIH program and capacity for coronary intervention

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Return of spontaneous circulation (ROSC) criteria:
- Pulse and measurable blood pressure
- Increase in ETCO₂ on capnography

Contraindications to TIH:
- Purposeful response to painful stimuli
- Age < 12 years
- Active bleeding
- Traumatic arrest
- Definite pregnancy
- Temperature < 34°C (93.2°F) or suspected hypothermia

Document:
- Time of arrest (or time last seen normal)
- Witnessed vs. unwitnessed arrest
- Initial rhythm shockable vs. non-shockable
- Bystander CPR given
- Time of ROSC
- GCS after ROSC
- Initial temperature if TIH patient

Consider and Contact Base For Other Indications For Cooling:
- Drowning
- Hanging or asphyxiation
- Hyperthermia