Virginia Beach Department of Emergency Medical Services

Supplemental Protocol

CPR-INDUCED CONSCIOUSNESS (CPR-IC)

PROTOCOL STATEMENT

CPR-Induced Consciousness (CPR-IC) is a phenomenon that occurs when a patient in cardiac arrest displays some level of responsiveness during CPR due to increased cerebral and coronary perfusion. This uncommon situation may require additional interventions outside of routine cardiac arrest management to promote the best possible patient outcome. Clinical interventions to address CPR-IC should be managed according to this protocol.

APPLICABILITY

This guideline is applicable to all Virginia Beach Department of EMS affiliated personnel. Some components of CPR-IC management require implementation by an RSI qualified provider. All providers must remain within their scope of practice at all times.

INDICATIONS

Patient in cardiac arrest with on-going resuscitation and signs of CPR-IC, including but not limited to:

- Purposeful movements
- Verbalization of pain
- Strong muscle or jaw tone impeding airway management
- Coughing
- In-tact gag reflex

CPR-IC is often associated with the following situations, including but not limited to:

- Minimal downtime
- High Quality, Immediate CPR
- CPR performed by LUCAS or other mechanical device

CONTRAINDICATIONS

1. ROSC achieved
    a. Manage with ROSC, AOV, and other appropriate protocols
2. Patient is in cardiac arrest but does not show signs of CPR-IC
    a. Manage with cardiac arrest protocols
3. Situation does not involve cardiac arrest or ROSC
    a. Manage with appropriate general protocols

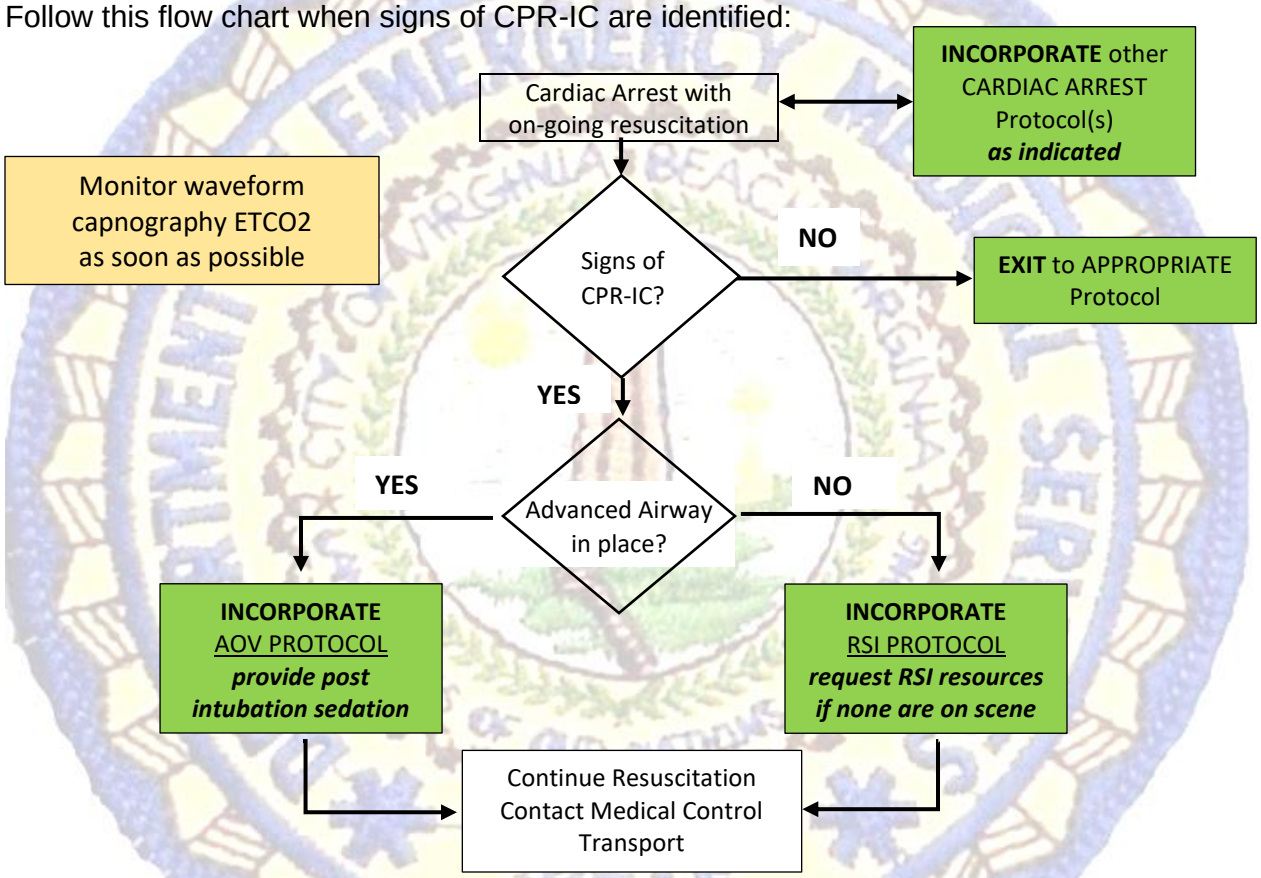
PROCEDURE

Cardiac arrest patients should receive an advanced airway. An advanced airway improves CPR performance by allowing continuous chest compressions in addition to protecting against other complications of an unsecure airway.

Ensure on-going resuscitation including high quality CPR, ventilation, defibrillation, vascular access and cardiac medications per protocol at all times during cardiac arrest.

Do not attempt to forcefully overcome signs of CPR-IC since this may cause complications to the patient and chance of success is low

Follow this flow chart when signs of CPR-IC are identified:



Section/Area: Clinical	
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