

**Michigan**  
**Adult Cardiac Protocols**  
VENTRICULAR FIBRILLATION / PULSELESS VT

Date: May 31, 2012

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***Ventricular Fibrillation / Pulseless Ventricular Tachycardia***

If AED is applied prior to ALS arrival, perform CPR and reassess the rhythm as indicated. After each intervention resume CPR immediately and reassess the rhythm after each 2 minute or 5 cycle interval.

For Biphasic devices shock with energy levels following manufacturers' recommendations (120 – 200 J). If unknown use the maximum available. For monophasic devices use 360 J.

**Pre-Medical Control**

**PARAMEDIC**

1. Follow the **Cardiac Arrest – General Protocol**.
2. Defibrillate and then continue CPR for 2 minutes.
3. Repeat defibrillation every 2 minutes as indicated with immediate resumption of compressions. If rhythm changes go to appropriate protocol.
4. Start an IV/IO NS KVO. If IV is unsuccessful after 2 attempts, start an IO line per **Vascular Access & IV Fluid Therapy Procedure**. IO may be first line choice.
5. Administer Epinephrine 1:10,000, 1 mg (10 ml) IV/IO. Repeat every 3-5 minutes. May be administered before or after defibrillations.

<p><b><u>Vasopressin</u></b> 40 Units IV/IO</p> <p><input type="checkbox"/> Included</p> <p><input checked="" type="checkbox"/> Not Included</p>
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6. Per MCA selection, administer Vasopressin 40 units IV/IO in place of the second dose of Epinephrine.
7. Establish an advanced airway. Avoid significant interruptions in CPR. See **Emergency Airway Procedure**.
8. For persistent or recurrent Ventricular Fibrillation / Pulseless Ventricular Tachycardia, administer Amiodarone 300 mg IV/IO. May be administered before or after defibrillations.
9. In a dialysis patient hyperkalemia is likely. Administer Calcium Chloride 1g IV/IO and Sodium Bicarbonate 1 mEq/kg IV/IO with 20 ml NS flush in between medications.
10. For persistent or recurrent Ventricular Fibrillation / Pulseless Ventricular Tachycardia, administer additional Amiodarone 150 mg IV/IO. May be administered before or after defibrillations.
11. If patient is in Torsades de Pointes administer Magnesium Sulfate 2 grams IV/IO.

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Follow **Cardiac Arrest General Protocol**

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- Defibrillate and then continue CPR for 2 minutes.
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- Repeat defibrillation every 2 minutes as indicated with immediate resumption of compressions.
  - If rhythm changes go to appropriate protocol.
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**Vasopressin**  
40 Units IV/IO

Included

Not Included

- Start an IV/IO NS KVO. If IV is unsuccessful after 2 attempts start an IO line per **Vascular Access & IV Fluid Therapy Procedure**. IO may be first line choice.
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