Start CPR
- Begin bag-mask ventilation and give oxygen*
- Attach monitor/defibrillator

Rhythm shockable?
Yes

VF/pVT

Shock*

No

Asystole/PEA

Epinephrine ASAP

CPR 2 min IV/IO access

Rhythm shockable?
Yes

Epinephrine every 3-5 min
Consider advanced airway*

No

CPR 2 min

Rhythm shockable?
Yes

Shock*

No

CPR 2 min

Rhythm shockable?
Yes

Epinephrine every 3-5 min
Consider advanced airway*

No

CPR 2 min

Rhythm shockable?
Yes

Shock*

No

CPR 2 min

Rhythm shockable?
Yes

Shock*

No

CPR 2 min

Rhythm shockable?
Yes

Shock*

No

CPR 2 min

Yes

If no signs of return of spontaneous circulation (ROSC), go to 10
If ROSC, go to Post–Cardiac Arrest Care checklist

Go to 7.

CPR Quality
- Push hard (≥⅓ of anteroposterior diameter of chest) and fast (100–120/min) and allow complete chest recoil
- Minimize interruptions in compressions
- Change compressor every 2 minutes, or sooner if fatigued
- If no advanced airway, 15:2 compression-ventilation ratio
- If advanced airway, provide continuous compressions and give a breath every 2-3 seconds

Shock Energy for Defibrillation
- First shock 2 J/kg
- Second shock 4 J/kg
- Subsequent shocks ≥4 J/kg, maximum 10 J/kg or adult dose

Drug Therapy
- Epinephrine IV/IO dose: 0.01 mg/kg (0.1 mL/kg of the 0.1 mg/mL concentration). Max dose 1 mg. Repeat every 3-5 minutes. If no IV/IO access, may give endotracheal dose: 0.1 mg/kg (0.1 mL/kg of the 1 mg/mL concentration).
- Amiodarone IV/IO dose: 5 mg/kg bolus during cardiac arrest. May repeat up to 3 total doses for refractory VF/pulseless VT or Lidocaine IV/IO dose: Initial: 1 mg/kg loading dose

Advanced Airway
- Rapidly apply PPE before AGPs.
- Provide endotracheal intubation or supraglottic advanced airway.
- Perform waveform capnography or capnometry to confirm and monitor ET tube placement.
- For all ventilation, use a HEPA filter.

Reversible Causes
- Hypovolemia
- Hypoxia
- Hydrogen ion (acidosis)
- Hypoglycemia
- Hypo-/hyperkalemia
- Hypothermia
- Tension pneumothorax
- Tamponade, cardiac
- Toxins
- Thrombosis, pulmonary
- Thrombosis, coronary

Abbreviations: AGP, aerosol-generating procedure; CPR, cardiopulmonary resuscitation; ET, endotracheal; HEPA, high-efficiency particulate air; IO, intraosseous; IV, intravenous; PEA, pulseless electrical activity; PPE, personal protective equipment; ROSC, return of spontaneous circulation; VF, ventricular fibrillation; pVT, pulseless ventricular tachycardia.