

# PALS Code Timer/Recorder Sheet



Time team initiated action: \_\_\_\_\_

Time chest compressions started: \_\_\_\_\_

Time defibrillator applied: \_\_\_\_\_

First documented pulseless rhythm: \_\_\_\_\_

Time compressor rotated: \_\_\_\_\_

Time	Quality CPR	Rhythm	Defibrillation (Joules)	Drug (name/dose)	Comments (ie, peripheral line placement, IO, vital signs, response to interventions)

Compression pause notes: \_\_\_\_\_

Chest compression fraction: \_\_\_\_\_ %