

After Arrest Care in Kids

Continue to seek and treat cause.

Reassess frequently to protect against :

- Brain Injury
- Myocardial Dysfunction
- Systemic Reperfusion Injury

A : Check and secure ETT

B : Choose ventilator settings

Tidal volume 6-8ml/kg

ETCO₂ 35-45

Titrate FiO₂ to keep SaO₂ 94-98%



(Scan here to refresh basic mechanics of ventilation) ->

C : Discuss BP target w PICU

Initial aim : SBP normal for age (>5th centile)

Consider Fluids and Adrenaline infusion.

Check electrolytes, calcium and serial lactate.

Monitor urine output



D : Avoid secondary brain injury

CPP = MAP - ICP (normal range ICP 5-15)

Avoid hypoglycaemia

Titrate sedation

Head up 30 degrees

Watch for seizures and treat early



E : Normothermia

Aim for T₃₆. Avoid hyperthermia

Get advice from retrieval or PICU

Prepare for transport

Care for parents and staff :

Parents : Inform, involve and prepare

Staff : Debriefing, Employee Assistance



Resources for participants in Post Arrest Cares Simulation



ANZCOR Guidelines



Dr Stewart Reid
Post Arrest Patient – Waiting for the Retrieval Team
Conference 2019
Paediatric Emergencies Podcast



Video: How to secure a paediatric endotracheal tube



Basics of Mechanical Ventilation
Dr Sonia Twigg