

Paediatric Advanced Life Support (with COVID-19 considerations)

COVID-19 confirmed / suspected?

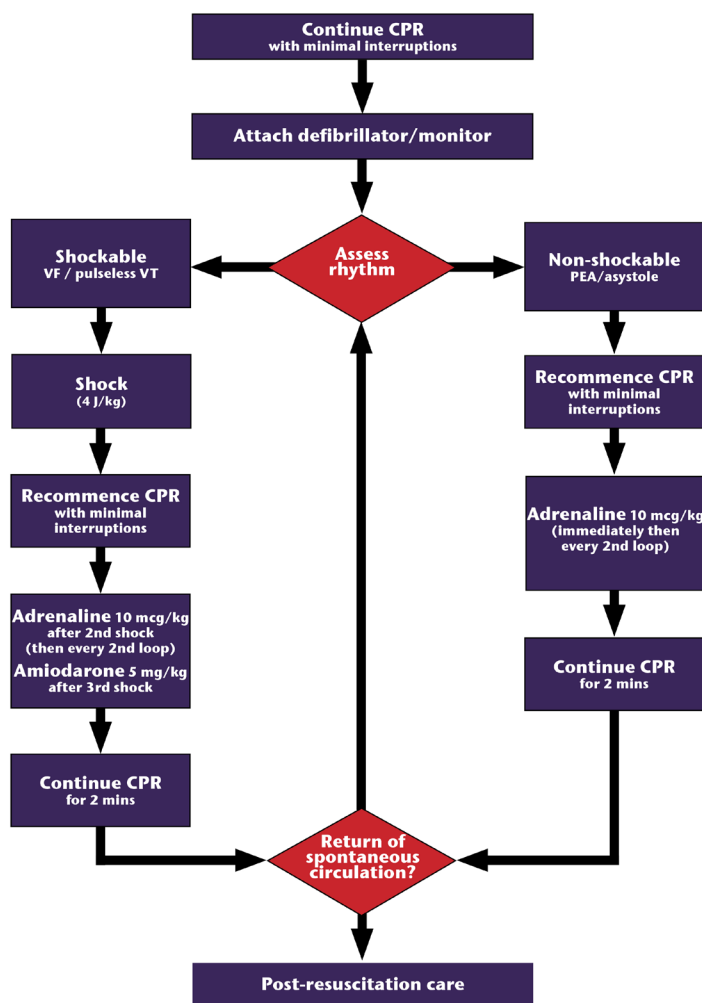
Principles for CPR management

- Minimise delays for effective CPR
- Appropriate *PPE for AGPs (including ECC, BVM, SGA, endotracheal intubation)
- Anticipate & prepare for deterioration, minimise delays in PPE application

Treatment recommendations for CPR

- Minimise people in room
- PPE in accordance with local guidelines for AGPs
- Viral filter between airway circuit and face mask, SGA or ETT
- Oxygen switched off before circuit disconnected
- Most experienced airway operator, using familiar airway techniques
- Aerosol generation minimised with following airway preferences:
 1. ETT, cuffed prefer to
 2. SGA (LMA 2nd gen or I-Gel)
 3. BVM, two-person technique, OPA, minimise leak

*PPE = personal protective equipment
AGP = aerosol-generating procedure
ECC = external cardiac compression
BVM = bag valve mask ventilation
SGA = supra-glottic airway
LMA = laryngeal mask airway
OPA = oropharyngeal airway



During CPR

Airway adjuncts (LMA/ETT)
Oxygen
Waveform capnography
IV/IO access
Minimise interruptions to CPR
Plan actions before interrupting compressions (e.g. charge manual defibrillator to 4 J/kg)

Consider and correct

Hypoxia
Hypovolaemia
Hyper/hypokalaemia/metabolic disorders
Hypothermia/hyperthermia
Tension pneumothorax
Tamponade
Toxins
Thrombosis (pulmonary/coronary)

Post-resuscitation care

Re-evaluate ABCDE
12 lead ECG
Treat precipitating causes
Re-evaluate oxygenation and ventilation
Temperature control (cool)