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Description automatically generated**EVIDENCE Trial** – out of hospital cardiac arrest

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| Bat Phone Pre-alert: EVIDENCE TRIAL patient en-route. Age, time of arrest. Standard/expedited  EXPEDITED patients in hours 0800-1700  CALL 2222 “EVIDENCE trial patient, ETA …”  **Prepare ED Team in full PPE. Prepare Resus 4. Cardiology team arrives.** |

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| Senior MO rapid decision making during 60 second ambulance handover  **Is immediate transfer to Cath Lab in EVIDENCE trial indicated?** |

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| * Arrest time within 50 minutes arrival to ED? * Witnessed arrest + bystander CPR <5min of arrest. * Initial rhythm VF/VT * Age 18-70 * M-CPR in use * No exclusion criteria   If YES to all: GO |  | * PEA arrest? * Suspected traumatic cardiac arrest? * Nursing home/advanced dementia * End stage heart/lung disease? * Metastatic cancer? * Age >70?   If yes to any: STAY |

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| Remain on ambulance trolley  Exchange LUCAS arm  Are critical interventions required?   * Ensure functioning ETT * Confirm oxygenation via BVM * Confirm waveform capnography * No access? L humeral IO   Confirm cath lab decision with cardio AT  GO to cath lab |  | Transfer to ED trolley   * Transfer monitoring, defib, LUCAS * Standard ALS procedures * Consider other non-cardiac causes and treat accordingly * Consider cath lab |

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| Arrival in Cath Lab <60min   * Cardiologist ready for skin puncture * Transfer to table >> PCI process commences * Swap defib, monitoring * Ambulance stretcher out * Hand over to anaesthetic consultant * Connect ETT to anaesthetic machine |

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| Documentation for all cardiac arrests – use template  (save template as pre-completed note in EMR) |