





and: Give high-quality chest compressions,

- Give oxygen
 Use waveform capnography
 Continuous compressions if advanced airway
- Minimise interruptions to compressions
- Intravenous or intraosseous access
- Give adrenaline every 3–5 min
- Give amiodarone after 3 shocks
- Identify and treat reversible causes

reversible causes Identify and treat

- Hypoxia Hypovolaemia
- Hypo-/hyperkalaemia/ metabolic
- Thrombosis coronary or pulmonary Hypo/hyperthermia
- Tension pneumothorax
- Tamponade cardiac

- Toxins

Consider ultrasound imaging to identify reversible causes

Consider

- Coronary angiography/ percutaneous coronary intervention
- Mechanical chest compressions to facilitate transfer/treatment
- Extracorporeal CPR

After ROSC

- Use an ABCDE approach
 Aim for SpO₂ of 94–98% and normal PaCO₂
- 12-lead ECG
- Identify and treat cause
- Targeted temperature management

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