RETURN OF SPONTANEOUS CIRCULATION

Routine Medical Care

- Confirm: palpable pulse and auscultated blood pressure
- Monitor for reoccurrence of arrest rhythm
- Perform 12-Lead EKG, If positive for STEMI, transport to CRC
- •Note: Transcutaneous Pacing (page 146): Begin at 80 bpm, 0 mA; increase in increments of 10 mA until capture obtained then increase the output level by 10% If capture maintained but patient remains symptomatic consider increasing the rate by 10 bpm, to a maximum of 100 bpm

