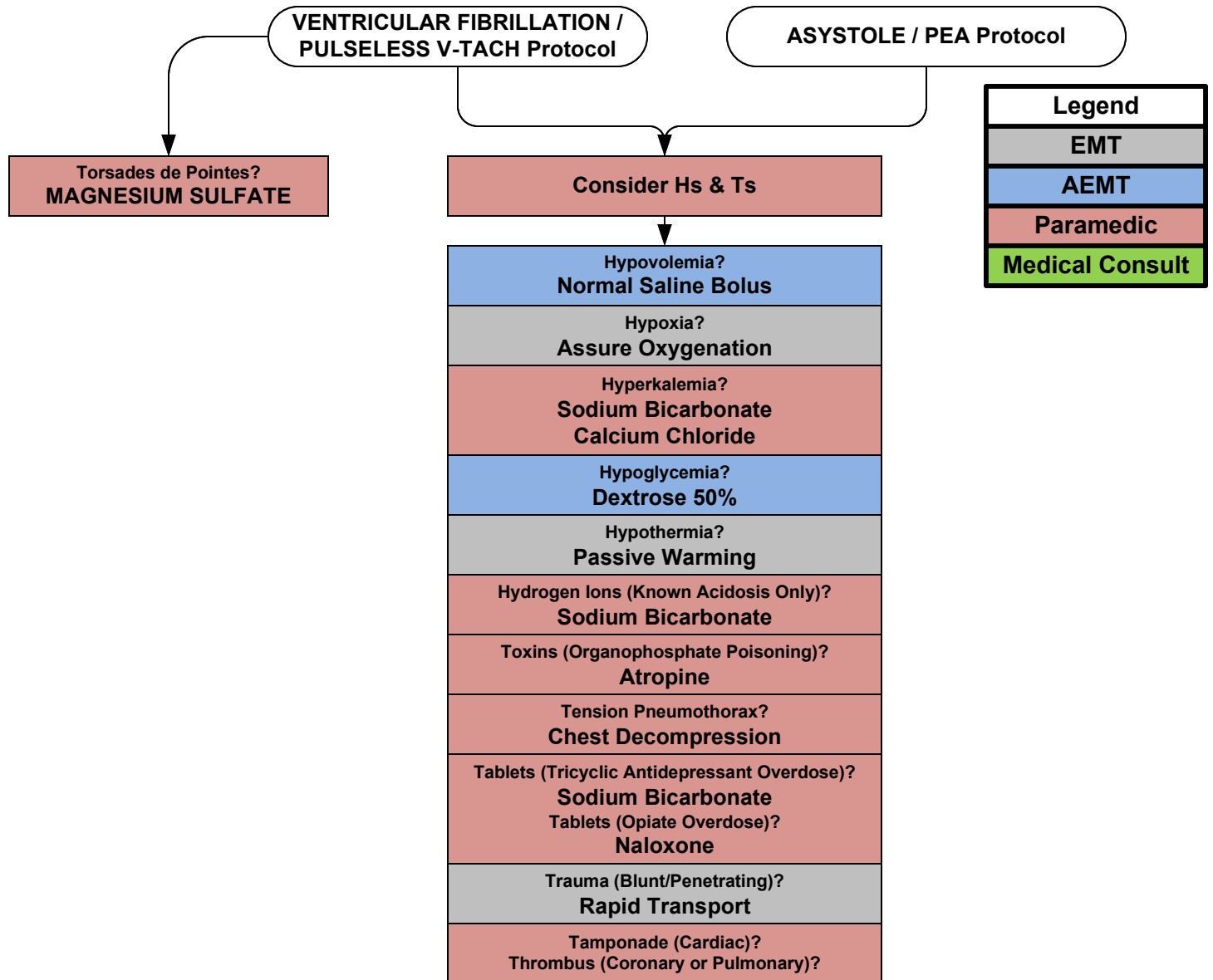


ETIOLOGY OF ARREST

History: ○ Estimated down time ○ Events leading to arrest ○ Cardiac history ○ Renal failure / dialysis ○ DNR or living will ○ SAMPLE	Signs and Symptoms: ○ Unresponsive, apneic, pulseless	Differential: ○ Cardiac ○ Endocrine / Metabolic ○ Drugs ○ Pulmonary ○ Trauma ○ Environmental
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Pearls:

- Common causes of hyperkalemia include renal failure (dialysis), acidosis (diabetic ketoacidosis, adrenal insufficiency), cell death (rhabdomyolysis, burns, crush injury), and certain elevated levels of certain medications including beta blockers or digitalis.
- For Coronary or Pulmonary Thrombus patients with ROSC, consider transport to a facility with thrombolytic therapy capabilities.
- Blunt and penetrating traumatic arrest require rapid transport. See **TRAUMA ARREST Protocol**.
- Suspected medical arrest preceding trauma event i.e. minor single vehicle MVC with patient in VF, possible overdose, hanging, drowning, lightning strike, electrocution, and hypothermia should be worked on scene for a minimum of 30 minutes unless extenuating circumstances exist.