


Further Your Knowledge!



All links connect to videos, articles, quizzes or other materials to enhance your learning experience.

Pediatric Post-Cardiac Arrest Care	Check	Comments
Assess Airway/Oxygenation/Ventilation		
Monitor oxygenation and maintain oxygen saturation at 94-99%		
Monitor PaCO ₂ and protect against hypo- or hypercapnia		
Monitor Hemodynamics		
Set and review hemodynamic goals each day		
Cardiac Monitor with telemetry		
Arterial blood pressure monitor in place		
Monitor urine output, oxygen saturation, and serum lactate		
Use lab values to guide treatment		
Maintain systolic blood pressure > 5th percentile for age and gender using fluid bolus and inotropes or vasopressors as needed		
Monitor Neuro Status		
If encephalopathy suspected, monitor EEG (if available)		
Monitor for and treat seizures		
Consider early brain imaging to determine possible causes of cardiac arrest		
Provide Sedation		
Administer sedation or anxiolytics as needed		
Targeted Temperature Management		
Monitor core temperature continuously		
Treat fever immediately		
Prevent shivering		
For a comatose child, apply TTM at 32°C-34°C followed by 36°C-37.5°C (unless TTM alone is ordered)		
Monitor and treat hypotension during rewarming period		
Monitor Electrolytes		
Monitor glucose and treat hypoglycemia		
Monitor electrolytes and treat values outside of normal ranges		
Prognosis		
Consider multiple prognostication modalities		
When using TTM, assessments may be modified		
Within the first 7 days post-cardiac arrest, consider EEG results along with other modalities		
Within the first 7 days post-cardiac arrest, consider magnetic resonance imaging (MRI) to assist in prognosis		