

2025 AHA Special Circumstances Guidelines

Adult and Pediatric Special Circumstances of Resuscitation

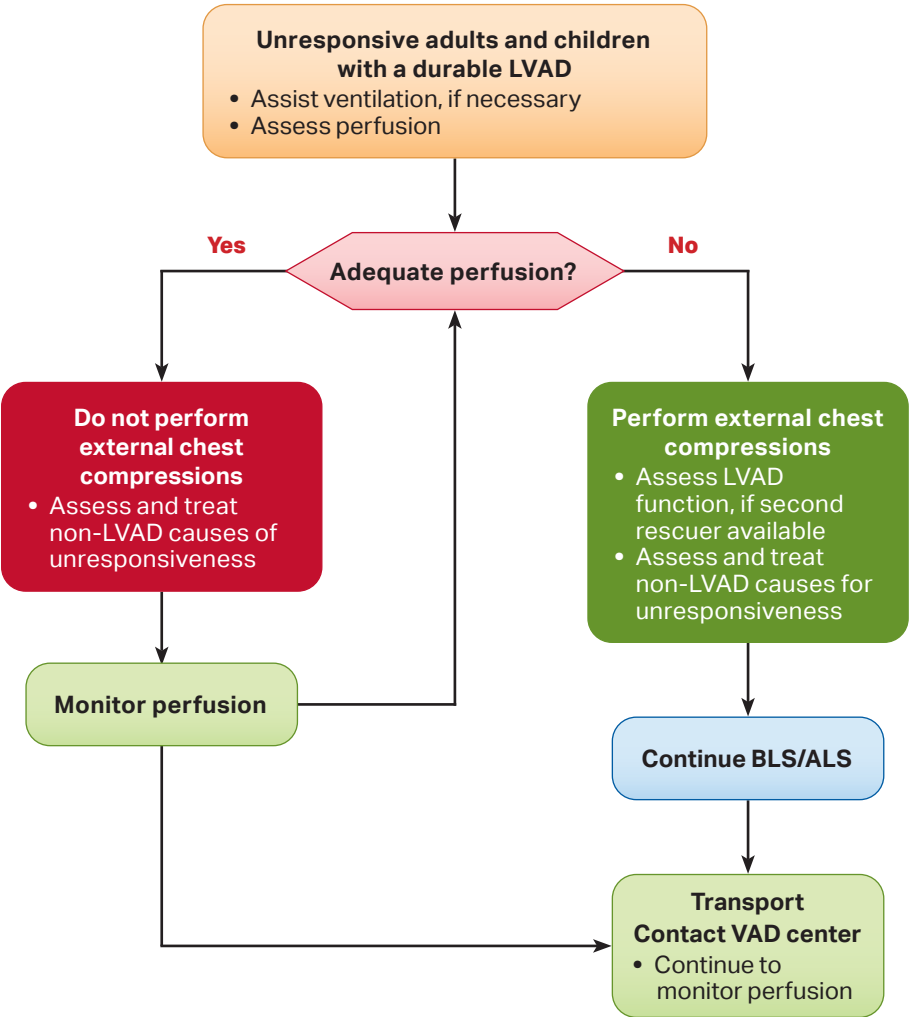
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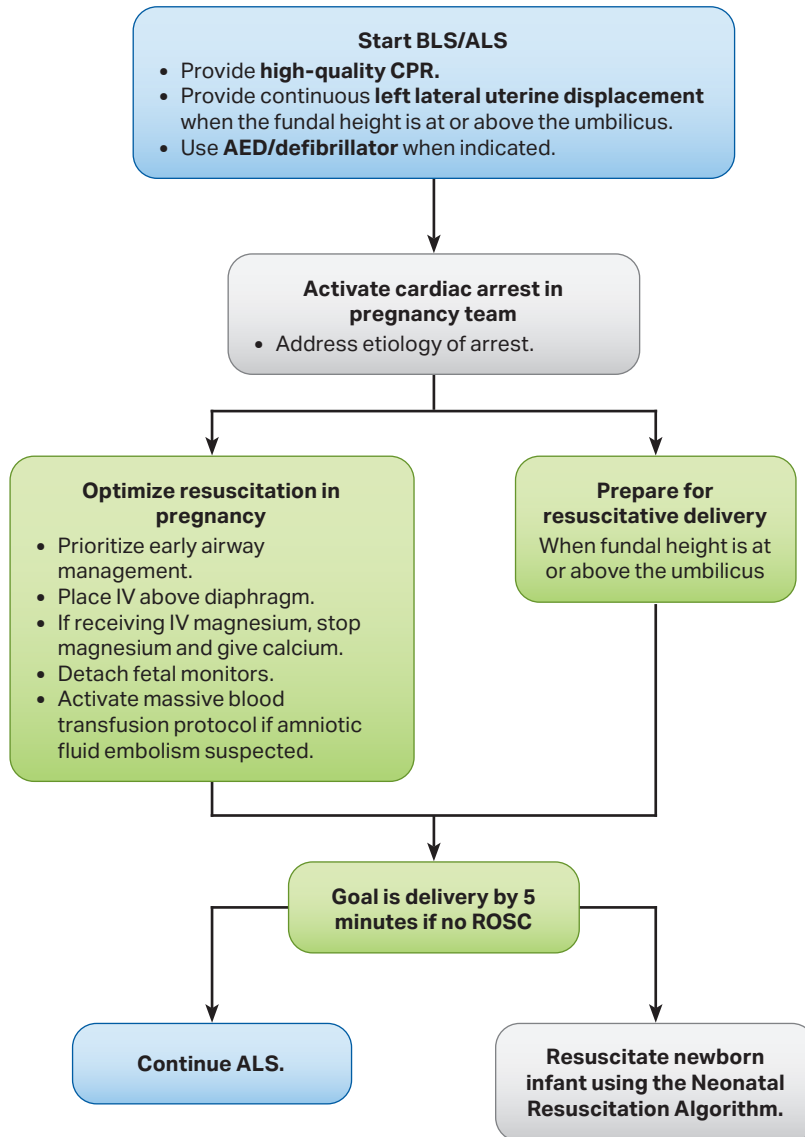
Note: this section's Figure 8 (Adult BLS for Health Care Professionals) is omitted here as a duplicate — see the Adult BLS document.

Adult and Pediatric Durable Left Ventricular Assist Device Algorithm



Assessing Perfusion
Adequate perfusion* if any of the following present: • Normal skin color and temperature • Normal capillary refill • MAP >50 mm Hg (if noninvasive BP cuff nonfunctional, use doppler or arterial line, if available) • PETCO₂ >20 mm Hg (if available and should be used only when an ET tube or tracheostomy is used to ventilate the patient; use of a supraglottic [eg, King] airway results in a falsely elevated PETCO₂ value) <i>*Patients may not have palpable pulse</i>
Non-LVAD Causes of Unresponsiveness
• Dysrhythmia • Hemorrhage/hypovolemia • Hypoglycemia • Hypoxia • Overdose • Right ventricular failure • Sepsis • Stroke
Assess and Attempt to Restart LVAD Function
• Look/listen for alarms • Listen for LVAD hum • Driveline connected? • Power source connected? • Need to replace system controller?

Cardiac Arrest in Pregnancy Algorithm



Explanation of Cardiac Arrest Interventions

- Cardiac arrest in pregnancy team will vary according to local resources but may include
 - Team Leader
 - Anesthesiologist
 - Obstetrician
 - Neonatologist
 - Nurses
 - Pharmacists
 - Other professionals
- The goal of left lateral uterine displacement is to relieve aortocaval compression and to facilitate effective chest compressions.
- The goal of resuscitative delivery is to improve the pregnant patient's outcome, and when feasible, the newborn infant's outcome.
- Ideally, perform resuscitative delivery by 5 minutes, depending on local resources.
- In pregnancy, difficult airway is common and is managed (eg, endotracheal intubation or supraglottic airway) by the most experienced professional.

Etiologies of Cardiac Arrest

- A** Anesthetic complications
- B** Bleeding
- C** Cardiovascular
- D** Drugs
- E** Embolic (amniotic fluid or pulmonary embolism)
- F** Fever
- G** General causes (H's and T's)
- H** Hypertension (eg, preeclampsia)