

## Termination of Resuscitation

### Policy:

Unsuccessful cardiopulmonary resuscitation (CPR) and other interventions may be discontinued prior to transport when this procedure is followed.

### Purpose:

Allow for the discontinuation of pre-hospital resuscitation after the delivery of adequate and appropriate resuscitation efforts to minimize the use of emergency transport for a patient who has extremely limited to no chance of meaningful, neurologically intact recovery.

### Procedure:

**During resuscitation efforts if any of the following circumstances arise PAEMS providers may terminate the resuscitation process following consultation with Medical Control.**

- Prolonged resuscitation efforts (either BLS alone or combined BLS and ALS) beyond 15 minutes without a return of spontaneous circulation or shockable rhythm are usually futile, unless cardiac arrest is compounded by hypothermia, submersion in cold water.
- Full ACLS has been instituted (ALS/ILS) to include rhythm analysis and defibrillation if indicated, appropriate airway management, and three rounds of the appropriate ACLS medications are given without return of spontaneous circulation.
- Extrication is prolonged (>15 minutes) in a pulseless, apneic patient, with no resuscitation possible during extrication (hypothermia is an exception).
- Patient has a valid DNR where resuscitation efforts were initiated prior to knowledge of resuscitation status.
- Correctable causes or special resuscitation circumstances have been considered and addressed.
- Per family request.

### Notes:

Document all elements of patient care and interactions with the patient's family, personal physician, medical examiner, law enforcement and medical control in the EMS patient care report (PCR).