Termination of Resuscitation

Pre-Medical Control
PARAMEDIC

1. Follow the **Cardiac Arrest - General Protocol**.
2. Medical cardiac arrest patients undergoing attempted resuscitation will not be transported emergently unless return of spontaneous circulation (ROSC) is achieved or transport is ordered by medical control. These patients will have resuscitation continued at the scene for at least 30. Temporary return of pulse qualifies as ROSC.

   If ALS personnel believe a prolonged resuscitation at the scene will be unduly distressing to the patient's family or bystanders, transport may begin prior to the termination of resuscitation. If the resuscitation can not be safely and efficiently performed on scene transport may begin whenever deemed appropriate by the ALS personnel.

Post-Medical Control

3. If the resuscitation has been unsuccessful after at least 30 minutes (ALS time without ROSC), the resuscitation may be terminated with the permission of medical control. If persistent Ventricular Fibrillation, prompt emergency transport will be initiated. **Once resuscitation is initiated by ALS or LALS it may be terminated only at the direction of medical control.** ROSC, i.e. return of a pulse resets the 30 minute clock and transport should be initiated.

4. Once resuscitation is terminated, the prehospital personnel will provide information to the family which should include medical control procedures for termination of resuscitation.

5. The medical examiner system will be activated consistent with dead on scene protocol.