



Pediatric Ventricular Fibrillation/ Pulseless Ventricular Tachycardia

FIELD TREATMENT GUIDELINE P-03

INDICATION	<ul style="list-style-type: none"> Cardiac arrest patient presenting in ventricular fibrillation or pulseless ventricular tachycardia.
BLS	<ul style="list-style-type: none"> Follow General Pediatric Care P-01. Initiate use of an Automated External Defibrillator (AED) or cardiac monitor. Provide defibrillation per AED or paramedic interpretation of heart rhythm and appropriate Treatment Guideline(s).
ALS	<ul style="list-style-type: none"> Defibrillate Administer according to PediaTape weight calculation and Pediatric Cardiac Arrest Reference Cards. Defibrillation should not be delayed for any patient presenting in ventricular fibrillation/pulseless ventricular tachycardia. Epinephrine (1:10,000): <i>Pediatric:</i> IV/IO; repeat every 3-5 minutes. Administer according to PediaTape weight calculation and Pediatric Cardiac Arrest Reference Cards. Amiodarone: <i>Pediatric:</i> IV/IO; Given after <u>third</u> defibrillation. No repeat dose of amiodarone. Administer according to PediaTape weight calculation and Pediatric Cardiac Arrest Reference Cards. Treat reversible causes.
KEY CONCEPTS	<ul style="list-style-type: none"> Establishment of IV/IO and medication administration should not interrupt chest compressions. Upon ROSC, maintain SpO₂ > 94%. Capture first breath capnography and maintain throughout arrest. EMS personnel should initiate rapid transport and continue resuscitation on pediatric arrest patients.