

日期

99年10月30日

內容摘要：

- (填寫說明：1. 如有附件請註明，如簡報檔、全文檔等
2. 需有問題與討論：請註明姓名並包含醫學倫理及 EBM 之應用
3. 需有總結，請註明做結論者【主持人】姓名
4. 請自行編排頁碼)

主題：2010 Resuscitation Guideline Overview

地點：B2 同沐園

主講人：主任 王宇倫

- * 世界現行版本 ILCOR/AHA/ERC
- * ILCOR: simplify, high quality CPR
- * Reduce chest compression pause, the pre-shock pause
- * Brief resuscitation
- * Insufficient evidence on devices and ALS drugs
- * Importance of Post-cardiac arrest care → bundle of care
SpO₂ 94-95% Dti 7.35
- * Therapeutic hypothermia, invalidate the prognosis decision data
- * ILCOR BLS: unresponsive and not breathing normally (ignoring occasional gasps)
ABC → CAB
Chest compression: at least 5cm
Compression only CPR

內容摘要 (續)

Key point

- * No evidence within the first few mins over chest compression vs chest compression + Ventilation
- * IV line failure \Rightarrow FIO first. 不用 endo 插.
- * Chest recoil 用 紀錄器 才能 100% sure.
- * Continued ~~do~~ emphasis on pulse check
- * Open air way or not. ERC open \rightarrow compression
- * FB shocking \rightarrow aortic \rightarrow abdominal compression \rightarrow CVP
- * Witness collapse. CVP before defibrillation.
Second and following shock = increased energy if possible. 做心導管病人. 開胸做病人.

Comment

- * Unstable AF: 360 J
- * Fast pacing, hemodynamically unstable bradyarrhythmias
- * Shock success: termination of VF at least 5 sec
Reductive 2-4 J/kg. no exceed 10 J/kg.
- * Capnography continues.
- * not recommend cricoid pressure.
- * IV assess and drugs. no diff in survival. neurological outcome.

沈敏: 2020