

CENTRAL CALIFORNIA EMERGENCY MEDICAL SERVICES

A Division of the Fresno County Department of Public Health

Manual	Emergency Medical Services Administrative Policies and Procedures	Policy Number 530.35
Subject	Paramedic Treatment Protocols PEDIATRIC PULSELESS ELECTRICAL ACTIVITY (PEA)	Page 1 of 2
References	Title 22, Division 9, Chapter 4 of the California Code of Regulations	Effective Fresno County: 01/15/82 Kings County: 04/10/89 Madera County: 06/15/85 Tulare County: 04/19/05

STANDING ORDERS		
1. Assessment	ABCs, CPR if appropriate. Refer to EMS Policy #549 – Initiation/Termination of CPR in the Medical Patient.	
2. IV/IO Access	LR TKO with Volutrol and Pediatric tubing.	
3. Epinephrine	<u>IV/IO</u> 0.01 mg/kg 1:10,000 (max dose 1mg)	
4. Transport		
5. Airway	Continue BLS airway and ventilate with bag-valve 100% oxygen.	
6. Fluid	Administer fluid boluses at a rate of 20 ml/kg, as needed. Reassess patient after each bolus.	
7. Epinephrine	<u>IV/IO</u> 0.01 mg/kg 1:10,000 (max dose 1mg) Repeat every 3-5 minutes	
8. Contact Hospital	Per EMS Policy #530.02.	

SPECIAL CONSIDERATIONS AND PRIORITIES

- Consider causes:
 - Hypovolemia
 - Hypothermia
 - Pneumothorax – Assess for Tension Pneumothorax
 - Pericardial Tamponade
 - Acidosis
 - Hypoxia
 - Drug Overdose
- Refer to Broselow Tape for specific pediatric doses.

Approved By	Daniel J. Lynch	Revision
EMS Director	(Signature on File at EMS Agency)	09/05/2023
EMS Medical Director	Jim Andrews, M.D. (Signature on File at EMS Agency)	

Subject	Paramedic Treatment Protocols – Pediatric Pulseless Electrical Activity (PEA)	Policy Number 530.35
---------	---	-------------------------

3. Repeat Epinephrine every 3-5 minutes.
4. Intraosseous lines are the preferred method for rapid vascular access in the cardiac arrest in children less than 3 years of age. In children 3 years or older, establish vascular access via IV or IO.
5. Provide family psychosocial support if resuscitation is not indicated or not successful.