

Cardiac Arrest Scribing Chart

Date :
 Patient
 name:
 BHT NO:

Scribing Nurse : Name: Signature:
 Team Leader: Name: Signature:

Time- Cycle	Rhythm	Pulse	Action			Airway	ETCO ₂	CPR	Reversible causes			
			Shock	Drugs	Other	√/x			Cause	Ix	Correction	
									Tension			
									Tamponade			
									Hypovolemia			
									Hypoxia			
									Hypokalemia			
									Hyperkalemia			
									Hypothermia			
									H+ / Acidosis			
									Toxins			
									Thrombosis Cardiac			
									Thrombosis Pulmonary			

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			Shock	Drugs	Other				Cause	Ix	Correction	
9.46pm		-	-	-	-	-	-	√	Tension	Clinical USS [M]	Needle decompression-refer shock workup	-
9.47pm	VT	-	-	-							Finger Thoracostomy- refer shock workup	-
9.48pm	VT	-	150J	-		FM	-	√	Tamponade	POCUS	Pericardiocentesis-refer shock workup	-
9.50pm	VF	-	-					√			Thoracotomy	-
9.51pm	VF	-	270J			LMA	16	√	Hypovolemia	Cross match in bleeding	Warm IV fluids	√
9.53pm	VT	-	-					√			O group Blood	
9.54pm	VT		270J	IV Adrenaline 1mg IV Amiodarone 300mg		LMA	18	√			Group blood	
9.56pm	Sinus rhythm	+	-								Massive Transfusion	
											Arrest Bleeding	√
									Hypoxia	SpO2	O2 – Bag-valve-mask/LMA-bag-valve/ET-bag-valve	√
									Hypokalemia	VBG	KCL-Rapid replacement: Initial infusion of 2 mmol/min for 10 minutes Followed by 10mmol over 5-10 minutes. Slow correction afterwards .	-
									Hyperkalemia	VBG	1. Calcium-IV 10% Calcium Gluconate 30ml -Use large IV access and give as fast bolus 2. Insulin–Dextrose- IV 50% glucose 50 ml as a rapid bolus. Followed by 10% glucose infusion at 50ml/ hour for 5 hours if pre-treatment BG < 7.0 mmol/L 3. Salbutamol 10 – 20 mg nebulised	-
									Hypothermia	Temp	Barehugger	-
											Rewarming – Warm IVF	-

											Bladder-Irrigation	-
									H+ / Acidosis	VBG	NaHCO ₃ - • Dose: 50 ml of an 8.4% solution IV • Consider in shockable and non-shockable rhythms for cardiac arrest associated with pH< 7.1 or hyperkalaemia or tricyclic overdose.	-
									Toxins	Drug chart/Anaphylaxis	Antidote-Refer management of poisoning. Anaphylaxis management	-
									Thrombosis Cardiac	ECG POCUS	PCI	-
											Thrombolysis-Refer thrombolysis protocol	√
									Thrombosis Pulmonary	POCUS/ ECG	Thrombolysis-Refer shock algorithm . Anticoagulation- S/C Enoxaparin 1mg/kg. Refer shock algorithm	-
										DVT signs		-