

The Ultimate ACS Study Guide

Advanced Cardiac Life Support (ACLS) provides guidelines for healthcare professionals for all types of cardiac emergencies.



EKG Anatomy



P-Wave = electrical activity in the upper heart chambers; represents contraction of SA node and AV node. **PR Interval** = time from P wave to QRS complex. **QRS Complex** = ventricular depolarization. **ST Segment** = ventricular repolarization. **T-Wave** = polarization of upper heart.

ECG Rhythms

Ventricular Fibrillation - no organized blood, immediate defibrillation.

Ventricular Tachycardia - ventricular arrhythmia; heart rate 100-250 bpm. **Causes** - pain, hypoxia, acidosis, drugs.

P纈tential &逸搏 (Fibrillation Activity) - fibrillation is fibrillation but activity is fibrillation and immediate CPR.

Atrial Fibrillation - on EKG, if leads are all connected, begin CPR immediately.

Sinus Bradycardia - rate less than 60 bpm, ECG rate less than 60 bpm. **Causes** - drugs, hypothyroidism.

1st Degree AV Block - prolonged P-R interval. **Causes** - hypothyroidism.

2nd Degree Block Type I - Wenckebach - progressive PR interval lengthening until a P wave is dropped. **Causes** - hypothyroidism; fibrillation requires treatment.

2nd Degree Block Type II - Mobitz I - ventricular arrhythmia. **Causes** - hypothyroidism, drugs, hypoglycemia.

3rd Degree Block - between SA and AV nodes. **Causes** - drugs, hypothyroidism, hypoglycemia.

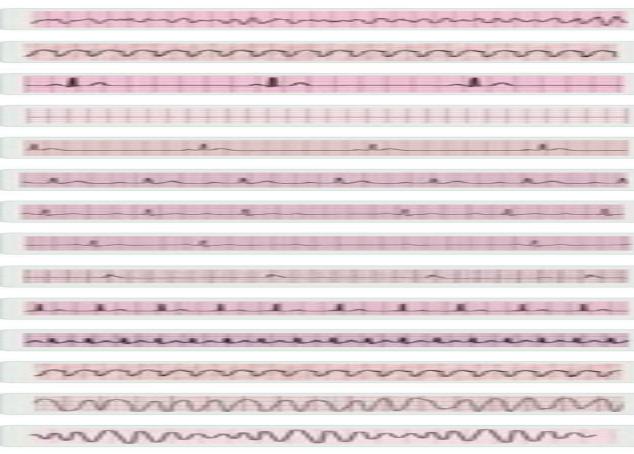
Sinus Tachycardia - increased heart rate of 100-150 beats per minute. **Causes** - pain, hypoxia, drugs, hypoglycemia.

Supraventricular Tachycardia - increased heart rate of 150-250 beats per minute. **Causes** - drugs, hypoglycemia, hypothyroidism.

Monomorphic Ventricular Tachycardia - stable arrhythmia. **Causes** - drugs, hypoglycemia, hypothyroidism.

Polyomorphic Ventricular Tachycardia - unstable arrhythmia. **Causes** - hypoglycemia, hypothyroidism, drugs, and CPR.

Torsades de Pointes - different types of QRS complexes form a spiral pattern. **Causes** - drugs, hypoglycemia, hypothyroidism, hypomagnesemia - treat with magnesium.



Electrical Therapy Basics



Defibrillation - uses an automated external defibrillator (AED). **Synchronized Cardioversion** - synchronized to the patient's heart rate. **Transcutaneous Pacing** - treats abnormally slow heart rate.

Airway Management



Adjuncts
- Oropharyngeal (OP) airway - use for unconscious patients with a gag reflex.
- Nasopharyngeal (NP) airway - use for unconscious patients without a gag reflex. **NEVER USE WITH A HEAD INJURY.**

Advanced Airways - recommended method, use with a head injury. **Endotracheal intubation** - use with a head injury. **Supraglottic airways** (e.g. LMA) - use if unfamiliar with endotracheal tube.

Post-Resuscitation Care



Follow the ABCs:

- Airway, breathing, circulation and oxygenation
- Breathing - keep PETCO₂ between 35-40mmHg
- Circulation - use a monitor to measure blood pressure of 90mmHg
- Differential Diagnosis - use Hx and T's to determine contributing factors to cardiac arrest

Acute Coronary Syndromes (ACS)

Unstable Angina

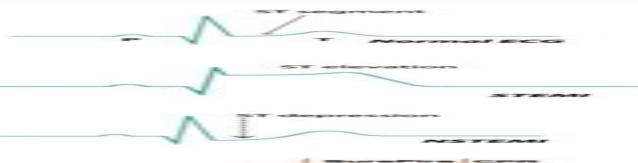
- unexpected chest pain due to poor blood flow
- blood thinners
- aspirin

ST-segment Elevation MI (STEMI)

- total blockage of a coronary artery
- electrical activity during the ST-segment shows ST-segment elevation
- coronary intervention (PCI) or CABG surgery

Non-ST-segment Elevation MI (NSTEMI)

- partial blockage of a coronary artery
- ST-segment depressed instead of elevated, no thrombolytic therapy
- pharmacotherapy, immediate percutaneous coronary intervention (PCI) or CABG surgery



Stroke Assessment and Treatment

Cardiac arrest is a frequent complication after an acute ischemic stroke. If a stroke is suspected, immediately transport to the nearest Stroke Receiving Center.

Cincinnati Prehospital Stroke Scale:

1. Age over 60
2. Arm drift
3. Speech

you can't teach an old dog new tricks!



Code Termination

Consult with medical control before code termination.



- persistent asystole 25 minutes or longer
- obvious signs of death, withhold resuscitation efforts

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Acls 2013 Study Guide

Barbara Aehlert

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ACLS-2013-Arrhythmias (Expanded Version) Ken Grauer, 2013 ACLS 2013 Arrhythmias Expanded Version is brand new We have more than doubled the size and greatly enhanced the content of our ACLS 2013 Pocket Brain book including addition of more than 100 new pages and figures on arrhythmia interpretation Noteworthy features of this brand new edition include Expanded content 292 pages 8 5 X 5 5 size spiral binding Features the same user friendly format of the ACLS 2013 PB with Rapid Find CONTENTS on inside front cover allowing near instant retrieval of the info you are seeking NOTE Sample pages are available below under Take a Look for topics underlined in RED in Contents Specific discussion of current recommendations in the ACLS Provider Manual ACLS PM with addition of a Beyond the Textbook section following each algorithm for more experienced providers and those who want to know more More than 200 Figures tracings illustrations Tables plus numerous Practice Tracings with detailed explanations NEW Sections have been added to this book compared to the Pocket Brain including Who to Cath Post Resuscitation Who to Cool Use of Echo during Cardiac Arrest Capnography plus what constitutes virtually an entire book on Arrhythmia Interpretation Regardless of whether you are new to arrhythmias intermediate or highly experienced your interpretation ability will advance to the next level Obstetric Anesthesia: Quick References & Practical Guides Philip E. Hess, Yunping Li, John J. Kowalczyk, Justin K. Stiles, 2023-06-20 This succinct evidence based book delivers everything you need to provide safe effective care to pregnant women in subacute and emergency situations A quick reference guide designed for on the spot clinical guidance Obstetric Anesthesia Quick References Practical Guides fills a gap in the current literature by distilling the information of a comprehensive textbook into a quick review and provides standard instructions that can be integrated into everyday practice You'll find a collection of common and uncommon clinical challenges with up to date obstetric anesthesia practices that serve both experienced and novice clinicians Chapters include a brief review of the topic clinical pearls bullet points and tables highlighting key information references for the latest scientific information and primary literature as well as guides protocols or standard operating procedures for immediate application all based on the BIDMC Department of Anesthesia's long history of providing cutting edge care for pregnant women The text also serves as a clinical reference guide and teaching tool Obstetric Anesthesia Quick References Practical Guides Describes tools and methods for caring for pregnant women in labor Includes the best scientific evidence and BIDMC's Department of Anesthesia's Obstetrical Division's thoroughly tested institutional practices used for the care of pregnant women Incorporates clear step by step instructions and up to date guidelines and standards Provides

essential information in each chapter followed by evidence based best practices for the given topic li Pairs succinct presentations with relevant and practical instructions for patient care to support emergency decision making problem solving and patient safety ACLS Study Guide ,1994 Advanced Cardiovascular Life Support Julie Johnson, RN,2016-10-18 This book is an unavoidable study guide to knowing the right interventions in advanced cardiovascular life support It highlights how to interpret EKG readings and how to intervene in each situation It also gives a good explanation of ACLS principles

Pharmacotherapy Casebook: A Patient-Focused Approach, 10/E Terry L. Schwinghammer,2017-06-22 More than 150 patient cases teach you how to apply the principles of pharmacotherapy to real world clinical practice The essential study companion to DiPiro s Pharmacotherapy A Pathophysiologic Approach 10th Edition Pharmacotherapy Casebook A Patient Focused Approach uses 157 patient cases to help you develop the skills necessary to identify and resolve the most common drug therapy problems encountered in daily clinical practice The case chapters are organized into organ system sections that correspond to those of the companion textbook This proven effective case based approach makes the book perfect for PharmD Nursing Nurse Practitioner and other allied health courses Sharpen your ability to Identify actual or potential drug therapy problems Determine the desired therapeutic outcome Evaluate therapeutic alternatives Design an optimal individualized pharmacotherapeutic plan Develop methods to evaluate the therapeutic outcome Provide patient education Communicate and the implement the pharmacotherapeutic plan Develop expertise in pharmacotherapy decision making with Realistic patient presentations that include medical history physical examination and laboratory data followed by a series of questions using a systematic problem solving approach A compelling range of cases from a single disease state to multiple disease states and drug related problems Expert coverage that integrates the biomedical and pharmaceutical sciences with therapeutics Appendices containing valuable information on medical abbreviations laboratory tests mathematical conversion factors and anthropometrics ACLS-2013-Pocket Brain Ken Grauer,2012 The 5th Edition 2013 of the ACLS Pocket Brain book has just come out ACLS 2013 PB has been completely rewritten reorganized and updated Noteworthy features of this brand new edition include Expanded content 140 pages while still retaining convenient pocket size Refocus on content with new emphasis on ACLS Algorithms and Arrhythmia Management Specific discussion of current recommendations in the ACLS Provider Manual ACLS PM with addition of a Beyond the Textbook section following each algorithm for more experienced providers and those who want to know more Com **ACLS Study Guide** Barbara Aehlert,2007 Written in a conversational style the 3rd edition of the ACLS Study Guide features unique user friendly and easy to remember treatment algorithms totally revised to reflect the 2005 emergency cardiac care guidelines Full color throughout it offers a complete concise overview of advanced cardiovascular life support ACLS acute coronary syndromes and acute stroke It also features easy to access information with Stop and Review quizzes in each chapter and a comprehensive pretest and posttest New to this edition are a handy ACLS quick reference fold out card a heart rate ruler and

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Zombie Notes

ACLS Certification Exam Prep Michele G. Kunz, 2011-01-01 This laminated study guide is for the American Heart Association Certification class and exam for ACLS Advanced Cardiac Life Support This study guide is available on Amazon.com **The Awards Almanac 1995** Miranda H. Ferrara, 1995 **ACLS Study Guide - E-Book** Barbara J. Aehlert, 2021-08-05 NEW Updated content includes the latest guidelines from the American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care and the International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science with Treatment Recommendations NEW 20 new illustrations are added to the book s hundreds of illustrations **ACLS Provider Manual** Americ And Management Association

Acpma, 2020-12-10 ACLS provider manual with AHA 2020 updates **Scholarships, fellowships and loans : \ba guide to education-related financial aid programs for students and professionals**, 2006 **Differenzialdiagnose Innerer Krankheiten** Edouard Battegay, 2017-04-05 Die Differenzialdiagnose ist Kern der rztlichen Kunst und vielfach kein linearer Prozess Eine zielgerichtete differenzialdiagnostische Abkl rung setzt Wissen und Erfahrung voraus und stellt so manchen Arzt vor Herausforderungen Dieses Werk f hrt Sie effektiv und evidenzbasiert vom Symptom zur Diagnose Erfahren Sie wie Sie Leitsymptome und Symptomkomplexe erkennen und abkl ren Patientenanamnese im diagnostischen Prozess bewusst f hren Erkenntnisse gewichteten Verdachtsdiagnosen best tigen wichtige Triage Entscheide treffen wachsam bleiben und sich in

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