



Explanation of cardiac arrest interventions

- Cardiac arrest in pregnancy team will vary according to local resources but may include
 - Team leader
 - Anesthesiologist
 - Obstetrician
 - Neonatologist
 - Nurses
 - Pharmacists
 - Other professionals
- The goal of left lateral uterine displacement is to relieve aortocaval compression and to facilitate effective chest compressions
- The goal of resuscitative delivery is to improve the pregnant patient's outcome, and when feasible, the newborn infant's outcome
- Ideally, perform resuscitative delivery by 5 minutes, depending on local resources
- In pregnancy, difficult airway is common and is managed (eg. endotracheal intubation or supraglottic airway) by the most experienced professional

Etiologies of cardiac arrest

- A** - Anesthetic complications
- B** - Bleeding
- C** - Cardiovascular
- D** - Drugs
- E** - Embolic (amniotic fluid or pulmonary embolism)
- F** - Fever
- G** - General causes (H's and T's)
- H** - Hypertension (eg. preeclampsia)

* 2025 ACLS provider manual e-book

