

JEFF COLLINS DIRECTOR San Diego County Fire (619) 339-0283 **PUBLIC SAFETY GROUP**SAN DIEGO COUNTY FIRE

SAN DIEGO COUNTY EMERGENCY MEDICAL SERVICES OFFICE 5560 Overland Avenue, Suite 400, San Diego, CA 92123-1204 www.SanDiegoCountyEMS.com

ANDREW (ANDY) PARR
EMS ADMINISTRATOR
Deputy Director, Departmental Operations
(619) 285-6429

June 28, 2023

# COUNTY OF SAN DIEGO PREHOSPITAL EXTRACORPOREAL CARDIOPULMONARY RESUSCITATION (ECPR) PILOT PROGRAM

We are pleased to announce the initiation of the County of San Diego Prehospital ECPR Pilot Program (Pilot) beginning July 1, 2023. The following hospitals have been accepted to participate in the Pilot:

- Sharp Grossmont Hospital
- Sharp Memorial Hospital
- Scripps Memorial Hospital La Jolla

MICNs will see these hospitals listed in a new column on Resource Bridge. As new centers come online, they will be added to the list. For the first 30 days of the Pilot, no ECPR "diversion" will be permitted.

#### **Identification of ECPR Candidates**

Protocol <u>S-127 CPR/Arrhythmias</u> defines the elements for participation in the Pilot. An <u>algorithm</u> is contained in S-127A ECPR Decision Algorithm and includes the following essential criteria:

- 18-70 years old
- Witnessed arrest
- Bystander CPR
- Refractory shockable rhythm
- Early base hospital contact
- Immediate transport off scene
- Use of mechanical compression device
- Time from cardiac arrest to hospital arrival ≤ 45 minutes

#### **Base Hospital Communication**

When you have identified a candidate for ECPR, immediately move the patient off scene. Make early base hospital contact, beginning your report to the MICN by stating "ECPR Code."

### **Key Considerations**

- 1. Get off scene
  - a. For purposes of the Pilot, a refractory shockable rhythm is defined as a persistent pulseless shockable rhythm after 2 defibrillation attempts (including AED-delivered shocks prior to arrival).
  - b. As opposed to traditional management of most cardiac arrest patients, immediately initiate <u>transport</u> to an ECPR Receiving Center for patients with refractory shockable rhythms.
- 2. Time interval requirement
  - a. While time from cardiac arrest to arrival at ECPR Receiving Center ≤ 45 minutes is acceptable, a shorter time interval (e.g., 30 minutes) results in a higher survival rate. Initiate transport of eligible patients as rapidly as feasible.
  - b. Be aware that the "drive time" is only a portion of the 45-minute standard.
  - c. **Application of the 45-minute criteria is critical.** If you estimate time from cardiac arrest to arrival at an ECPR Receiving Center to be greater than 45 minutes, the patient is <u>not</u> eligible to participate in the Pilot. Ineligible patients should be managed as they were prior to Pilot initiation.
- 3. ECPR Receiving Center decision to place patient on extracorporeal membrane oxygenation (ECMO)
  - a. Not all patients who meet field criteria for transport to an ECPR Receiving Center will be placed on ECMO; the decision is at the discretion of the receiving hospital.
  - b. Paramedics should advise family that the patient is being transported to a hospital with a specialist who will perform an immediate evaluation to determine the best treatment options.

We are excited to initiate this lifesaving ECPR Pilot Program. Thank you for providing outstanding emergency care to our patients.

Sincerely,

Kristi L. Koenig, MD, FACEP, FIFEM, FAEMS, Medical Director

San Diego County Emergency Medical Services Office

San Diego County Fire

Kristi Kornig

cc: Andrew Parr, EMS Administrator Jeff Collins, Director

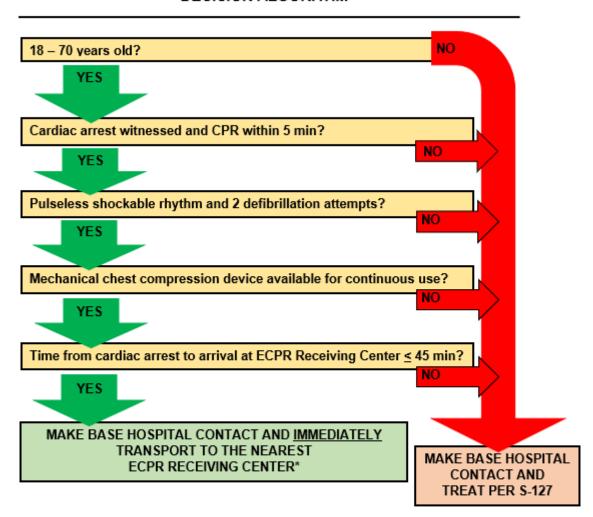
COUNTY SAN DIEGO EMERGENCY MEDICAL SERVICES POLICY/PROCEDURE/PROTOCOL

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Date: 07/1/2023

SUBJECT: TREATMENT PROTOCOL - ECPR DECISION ALGORITHM

## EXTRACORPOREAL CARDIOPULMONARY RESUSCITATION (ECPR) DECISION ALGORITHM



IF PATIENT ACHIEVES ROSC DURING TRANSPORT

- CONTINUE TRANSPORT TO ECPR RECEIVING CENTER
- MAKE BASE HOSPITAL CONTACT
- REFER TO S-127 FOR TREATMENT GUIDELINES

<sup>\*</sup>Bypass non-ECPR STEMI Receiving Centers