

# ERC Guidelines 2021 for Peds

Terry Abrams MS MSc ACP  
FIPS Medical SIG - Secretary

**FIPS XXIII**  
23-30 April 2022



# Recommendations

- Covers 0-18 years old – patients who look like an adult should be treated as an adult
- Oxygen titrated to SpO<sub>2</sub> 94-98% - if in doubt high flow
- 5 rescue breaths then CPR
- Two thumb chest encircling technique for infant chest compressions
- 2 person BVM ventilations –if intubated 10-25 breaths per minute age appropriate

# 5 TOP MESSAGES

\*0-18y, except newborns 'at birth'

- 1.** Use ABCDE as common language  
- Work as a team – Be competent.
- 2.** Titrate oxygen therapy to SpO<sub>2</sub> 94-98%  
- only if impossible to measure, start high flow O<sub>2</sub>  
based on signs of circulatory/respiratory failure.
- 3.** In 'shock', give 1 or more fluid bolus(es) of  
10ml/kg of (preferably balanced) crystalloids  
(or blood products). Reassess after each bolus.  
Start vasoactive drugs early.
- 4.** For basic life support, use the specific PBLS  
algorithm (ABC - 15:2) if you are trained to do  
so. Both improving the quality of CPR and  
limiting the hands-off time are considered crucial.  
Consider provider safety.
- 5.** For advanced life support, use the specific PALS  
algorithm. Actively search for and treat reversible  
causes. Use 2-person BMV as the first line ventilatory  
support. Only if intubated, provide asynchronous  
ventilation at an age-dependent rate (10-25/').

- Compression depth –  $\frac{1}{3}$  AP depth of the chest not to exceed 6 cm – approx. adult thumb length
- Compression rate – 100-120 compressions per minute
- Compression:ventilation ratio (duty cycle) – 15:2

# CPR Playlist

