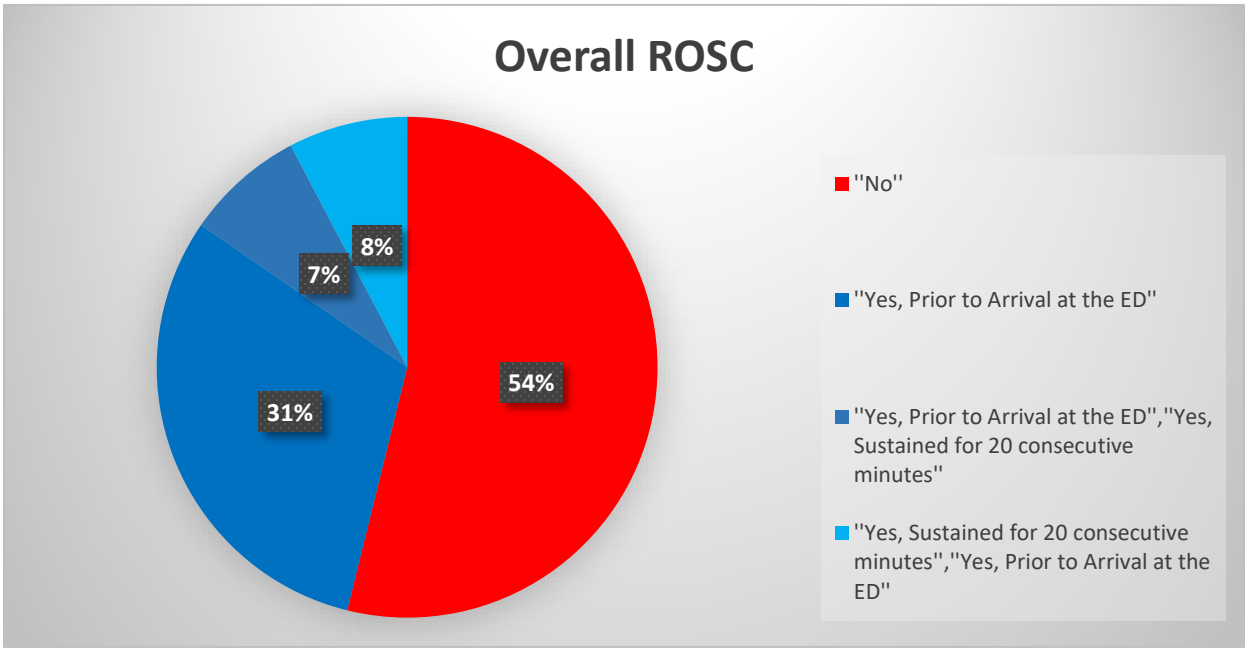
2018 Cardiac Arrest Data

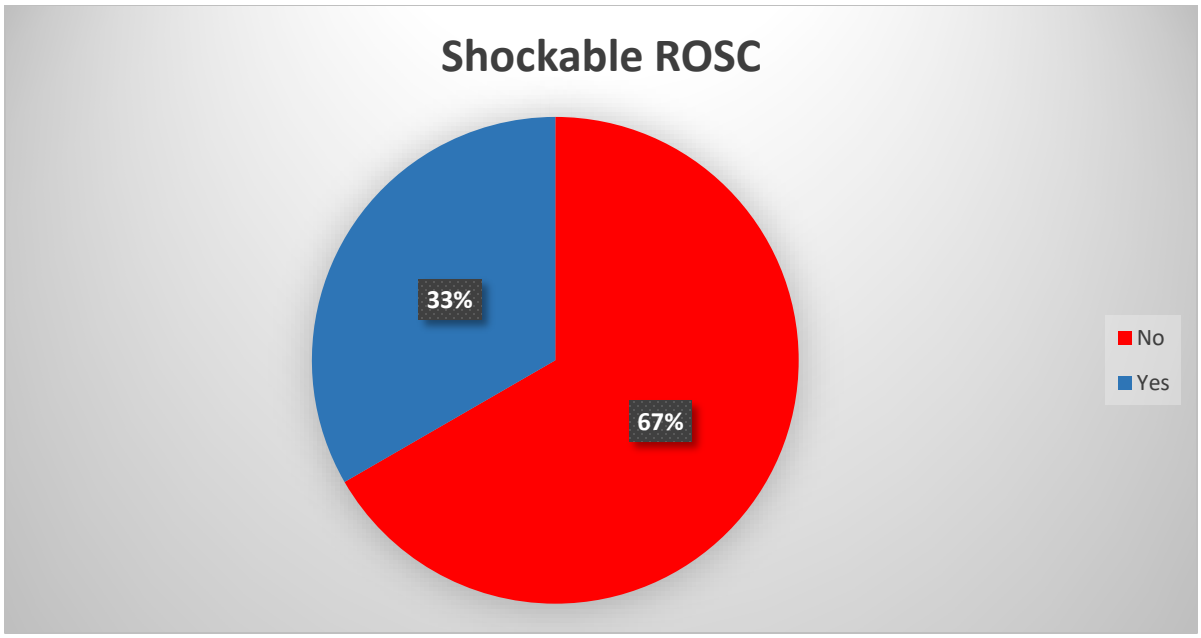
(thru March) *We are awaiting some outcome data*

In cardiac arrest time is of the essence. Survival rates increase with witnessed arrest and immediate CPR and/or defibrillation. In late 2014 BCEMS began revamping our response to cardiac arrest with an emphasis on chest compressions and a pit-crew approach. While there is still work to do, we have witnessed great results. In 2016 we had more cardiac arrest patients walk out of the hospital than any year before and this success continued through 2017 when we fell one short of our 2016 total. We look to improve these numbers as we move through 2018.

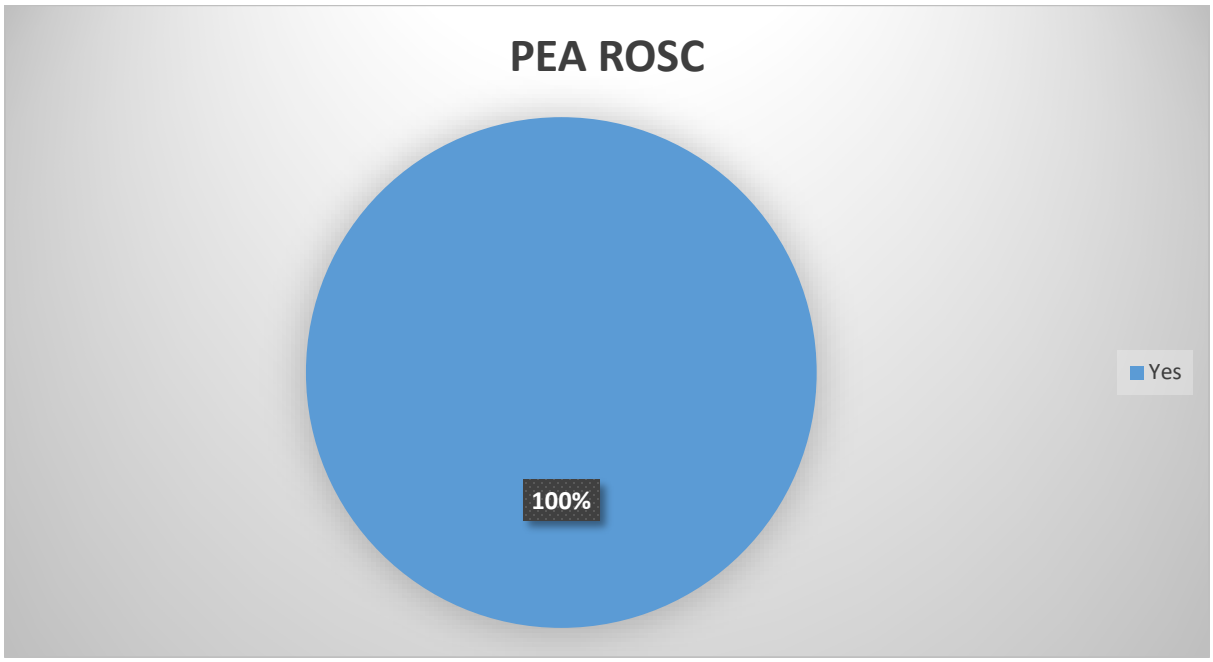


44% of cardiac arrest patients where resuscitation was attempted have experienced Return of Spontaneous Circulation (ROSC, or return of pulses). This data looks at all initial cardiac rhythms and all etiologies except trauma.

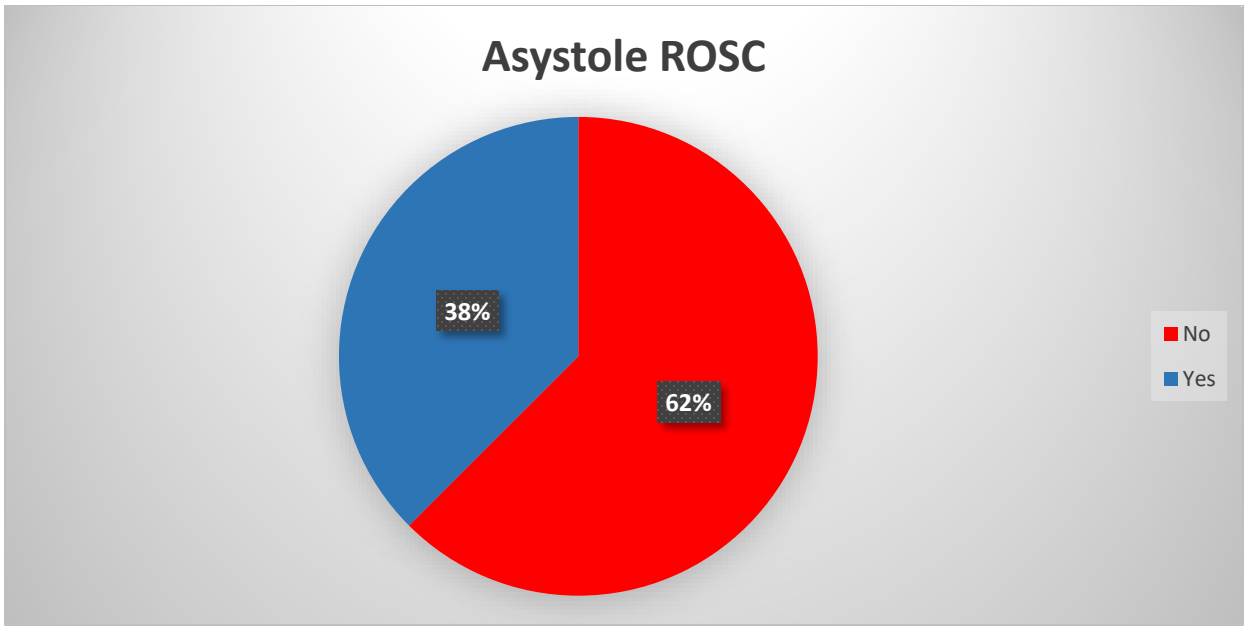
It is widely recognized patients in Asystole, or flat-line, have little chance at survival. Because of this many agencies across the country look primarily at those rhythms with a higher probability of survival if quick interventions are provided. These rhythms include Ventricular Fibrillation or Tachycardia (V-Fib/V-Tach) and Pulseless Electrical Activity (PEA). V-Fib/V-Tach are shockable rhythms meaning early defibrillation is beneficial. The Ustein data is the total number of patients released from the hospital with a CPC score of 1or 2. Below are the individual statistics for these rhythms.



As you can see, 33% of cardiac arrest patients found in a shockable rhythm have achieved a return of pulses. We are still awaiting outcome data from some area hospitals to calculate Survival-to-Discharge for shockable rhythms.



Those patients in cardiac arrest presenting with an initial rhythm of PEA achieved a 100% return of pulses. Survival-to-Discharge for PEA is unfortunately 0% at this time meaning none of these individuals were released from the hospital with a CPC score of 1 or 2.



As mentioned above, patients suffering cardiac arrest with an initial rhythm of asystole have little chance at survival. Unfortunately, this is the single largest pool of cardiac arrest patients in Butler County accounting for 62% of all cardiac arrests so far this year. We have been able to achieve a 38% return of pulses on these individuals. We are still awaiting outcome data from some area hospitals to calculate Survival-to-Discharge for shockable rhythms.