



Implantable LVAD patient unresponsive +/- not breathing normally



Dial:
State:
Location:
Wait:

2222
"VAD CARDIAC ARREST"
WARD/AREA
For switchboard to repeat the information

Do not start CHEST COMPRESSIONS, determine if LVAD is working

LONE / INITIAL RESPONDER

C What is the LVAD screen displaying?

SECOND RESPONDER / TEAM

- A** Ensure patent airway
- B** Assess and treat problems with breathing (e.g. hypoxia, pneumothorax, wheeze)
Increase FiO₂ to 100% +/- start BVM ventilation
- C** Attach ECG leads / Defibrillator

GO TO BOX WITH RELEVANT SCREEN DISPLAY

LOW / CRITICAL BATTERY	DRIVELINE DISCONNECTION	LOW FLOW ALARM
Check battery charge and replace if necessary <i>or</i> Attach to mains power	Reconnect driveline and examine its entire length If fractured, manipulate and secure with tape	Passive leg raise If effective give fluid bolus (eg 2.5ml/kg) Aim MAP: >60 and <90 mmHg Consider bleeding or pump thrombus
CONTROLLER FAILURE	BLANK CONTROLLER	ECG SHOWS VT/VF
Change controller	Push any button on controller Check/Change battery Change controller if display remains blank	
HIGH WATTS		
Suspect pump thrombus		Unresponsive patient: Defibrillation - Attempt 3 stacked shocks Responsive patient: Consider amiodarone or lignocaine DC Cardioversion with sedation

Normal controller display or interventions above performed

IS THERE ADEQUATE CIRCULATION?

Patient responsive
No cyanosis/pallor
Cap refill < 3 seconds
MAP 60-90 mmHg
VAD humming
Normal controller display
LVAD flow rate > 3.0 L/min
ETCO₂ > 2 kPa

ECHO IF AVAILABLE

Look for
RV Failure
Suction
Tamponade
Thrombus

Yes

No

Complete A to E Assessment

Low GCS: Exclude Stroke as priority
Low cardiac output: Consider inotropic infusion

CALS if <10d postop

Start CPR & standard ALS as a bridge to:
Treat reversible causes (4H+4T)
VA ECMO / Impella / LVAD exchange