

ECLS ECPR Addendum Form

Extracorporeal Life Support Organization (ELSO)

Unique ID: _____

Run Number: _____

(Note: Unique ID is self generated by the Registry. This is for your reference only to match forms)

Definition

ECPR is the application of rapid-deployment VA ECMO to provide circulatory support in patients in whom conventional cardiopulmonary resuscitation (CPR) is unsuccessful in achieving sustained return of spontaneous circulation (ROSC). Sustained ROSC is deemed to have occurred when chest compressions are not required for 20 consecutive minutes and signs of circulation persist.

Please refer to the ELSO Registry ECPR Addenda Data Definitions for specific details regarding the fields collected.

Pre-Cardiopulmonary Arrest Precipitating Event

Cardiac Non-Cardiac Unknown

Antecedent Event (Present up to 4 hours before Arrest)

Cardiac: Ventricular Dysfunction Vasoplegia Cardiac Tamponade Obstructive Shock Arrhythmia

Non Cardiac: Hypoxemia Hypercarbia/Respiratory Acidosis Pulmonary Hemorrhage Pneumothorax

Neurological: Impending Herniation Syndrome

Toxic/Metabolic: Metabolic Acidosis

None Unknown

Co-Morbid Conditions (Present up to 24 hours before Arrest)

Cardiac: ACS CHD-Acyanotic CHD-Cyanotic CHF CV Shock Tamponade Arrhythmia PHN PE

Pulmonary: Critical Airway Emergency Mediastinal Mass Obstructive Airways Disease Lung Disease

Neurological: CNS-Non Stoke Ischemic Stroke Hemorrhagic Stroke Spinal Cord Injury

Toxic/Metabolic: Chronic Renal Failure Intoxication/Ingestion Vitamin/Electrolyte Abnormality

Infectious: Distributive Shock Septic Shock

Other: Hemorrhage or Hypovolemic Shock Major Trauma Pregnancy/Delivery

None Unknown

Cardiopulmonary Arrest Event

Location of Arrest: Out of Hospital (Select Site)

Home Public Place Ambulatory Medical Care
 Ambulance Transport Other

EMS On-Site? Bystander CPR? Bystander AED Use?

Location of Arrest: In Hospital (Select Site)

Ambulatory/Outpatient ED Inpatient Ward HDU
 ICU (specify) _____

Cath Lab Interventional Radiology OR PACU
 Delivery Room Other

Witnessed Arrest?: Yes No Unknown

Date/Time: _____

Management of Cardiopulmonary Arrest

Time CPR Commenced: _____ Total CPR Time Prior to ECLS: _____ minutes

Multiple Arrests during prior 24 hours? Yes No

ROSC at any time after CPR and prior to ECLS? Yes No

Did the patient have a pulse at the time of cannulation? Yes No

Compression Method Used and Time: Standard for _____ minutes

Automatic Compressor for _____ minutes

Open Chest CPR for _____ minutes

Unknown

Initial Pulseless Rhythm: Asytle Pulseless Electrical Activity Ventricular Fibrillation

Ventricular Tachycardia - no pulse Unknown – Shockable Unknown – Non Shockable

Unknown

DC Cardioversion or Defibrillation: No Yes: Number of Shocks: _____

Rhythm at Time of Cannulation: Asytle Pulseless Electrical Activity High Degree AV Block Sinus Rhythm

Sinus Bradycardia Sinus Tachycardia SVT Ventricular Fibrillation Ventricular Tachycardia - no pulse Unknown

Medications During Arrest: Epinephrine – Number of Doses _____ Vasopressin – Number of Doses _____

Adenosine Amiodarone Atropine Calcium Chloride/Gluconate Dobutamine Dopamine Flumazenil

Glucagon Glucose Lidocaine Magnesium Milrinone Naloxone Norepinephrine

Procainamide Phenylephrine Sodium Bicarbonate No Medications

Other Interventions during CPA: Temporary Cardiac Pacing If yes what type?

Transcutaneous Transvenous Epicardial PPM In Situ No Attempt at Pacing Unknown

Circulation: Quality of CPR

End tidal CO2 Monitoring Yes No ETCO2 closest to ECLS Flow Start: _____

Invasive Arterial Access Yes No DPB closest to ECLS Flow Start: _____

Cerebral NIRS Yes No NIRS closest to ECLS Flow Start: _____

CPR Feedback Device Yes No Rate of compressions Delivered: _____

Signs of Life prior to ECLS Yes No If No, was neuromuscular blockade in use: Yes No

Cannulation and Circuit Details

Location of Cannulation: Out of Hospital (Select Site)

Home Public Place Ambulatory Medical Care

Ambulance/Transport Other

Location of Cannulation: In Hospital (Select Site)

Ambulatory/Outpatient ED Inpatient Ward HDU

ICU (specify) _____

Cath Lab Interventional Radiology OR PACU

Delivery Room Other

ECPR System: Pre-primed pump Yes No Unknown

If yes: Blood Prime Clear Prime Unknown

Early Post ECPR Management (Within 24 hours of cannulation)

Neurology: EEG Monitoring: standard continuous Intracranial Imaging: CUS CT

Temp Management: Targeted 32-34°C Targeted normothermia Targeted 32-36°C No Target Unknown

Highest Temp in first 24 hours

< 32 °C 32-<34°C 34-<35°C 35-<36°C
 36-37.5°C 37.6-38.5°C >38.5°C Unknown

Lowest Temp in first 24 hours:

< 30 °C 30-<32 °C 32-<34°C 34-<35°C
 35-<36°C 36-37.5°C 37.6-38.5°C >38.5°C
 Unknown

First Blood Gas Post ECPR (Closest to initiation or < 6 hours post initiation)

Patient Arterial Blood Gas Post ECPR: Date/Time: _____ No Blood Gas

pH _____ pCO2 _____ pO2 _____ HCO3 _____ Lactate _____

Post ECPR Review

Was a debrief held by the inter-disciplinary team Post ECPR: No Yes

If yes, in what timeframe? within 24 hours

If > 24 hours was it within 1 month?

If > 1 month was it within 3 months?

Neurological Assessment at Discharge

Did the patient have a functional performance assessment by Cerebral Performance Category (CPC) for patients >18yo; or by Pediatric Cerebral Performance Category for patients < 18 yo?

No Yes: Result: Adult CPC Score = _____ Pediatric PCPC Score = _____