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AN ANALYSIS OF CONTINUOUS CHEST COMPRESSION CPR FOR EMS PROVIDERS FOR OUT OF HOSPITAL CARDIAC ARREST

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Much research has been done to improve the outcomes of patients found in cardiac arrest outside the hospital. The American Heart Association has long advocated Advanced Cardiac Life Support (ACLS), a procedure that encompasses cycles of chest compressions with advanced airway maintenance and defibrillation. Recent evidence has suggested that these current guidelines are ineffective due to prolonged “hands off” time. New research suggests utilizing a technique known as continuous chest compression CPR that delays advanced airway management and instead focuses on defibrillation and continuous chest compressions. Across the country, research has demonstrated that when EMS providers utilize this technique and have support from the receiving hospital, survival to hospital discharge rates have increased from 4.7% (using standard ACLS protocols) to 17.6% (with the new technique). The Newark (OH) Fire Department protocols were modified to implement continuous chest compression CPR for the care of patients in cardiac arrest. The present research analyzes quality improvement (QI) / quality assurance (QA) data from this fire department to determine how the change in protocol affected patient outcome.