



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive



<b>CLINICAL DIRECTIVE 05/2011</b>
<b>FROM: Medical Director</b>
<b>TO: Advanced Paramedics</b>
<b>SUBJECT: Atropine in cardiac arrest</b> The 2010 ILCOR Guidelines have removed atropine from the cardiac arrest recommendations. Atropine should no longer be administered in management of cardiac arrest. Atropine remains a treatment for symptomatic bradycardia as per CPG 4/5/6.4.17
<b>RATIONALE:</b> Asystole in cardiac arrest is usually caused by primary myocardial pathology rather than excessive vagal tone and there is no evidence that routine use of atropine is beneficial in the treatment of asystole or PEA <sup>1</sup> . PHECC have approved a suite of CPGs incorporating all the changes in the guidelines- this directive is in place until these revised CPGs are published.
<b>EFFECTIVE FROM:</b> June 13 <sup>th</sup> 2011
<b>EFFECTIVE TO:</b> Revised CPG issued by PHECC
<b>QUESTIONS OR COMMENTS ON THIS DIRECTIVE:</b> Education and Competency Assurance Officer

Clinical Directives are formulated by the National Ambulance Service Medical Directorate, the National Ambulance Service Education and Competency Assurance Team, the Dublin Fire Brigade Medical Director, the Dublin Fire Brigade EMS Support Team and the Irish Coast Guard Chief Crewman (Standards). Clinical Directives apply to all relevant staff in the HSE National Ambulance Service, Dublin Fire Brigade and Irish Coast Guard helicopter winch-crew.

<sup>1</sup> European resuscitation Council Guidelines for resuscitation 2010. Section 1. Executive Summary  
Nolan JP et al. **Resuscitation** 81 (2010) 1219-1276

Seirbhís Náisiúnta Otharchairr  
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