High-Functioning CPR Team
CPR Quality Time Evaluation

DRAFT
2/14/13

Date: _____

Providers: _____

Scenario/Patient Background: _____

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1. *First 4 Cycles – High Performance CPR*

a. *Time – CPR Interruptions for Rhythm Checks/Defibrillation*

(Note: for AED use record time of interruption for "analysis" and for defibrillation)

First rhythm check/ defibrillation		*seconds*	Any other interruption (e.g. for defibrillation with AED)		*seconds*
Second rhythm check/ defibrillation		*seconds*	Other interruption		*seconds*
Third rhythm check/ defibrillation		*seconds*	Other interruption		*seconds*
Fourth rhythm check/ defibrillation		*seconds*	Other interruption		*seconds*
Time of longest interruption for rhythm check /defibrillation (**Goal ≤ 7 seconds**, although analysis with AED may take longer) Providers should immediately start compressions after shock and should NOT check pulse immediately after defibrillation. Providers should do compressions when either AED or defibrillator is charging. There should be NO pause in compression for airway insertion.					*seconds*
Comments:					
Global rating: *a.) Exceeds expectations* *b.) Meets expectations* *c.) Needs improvement*					

b. *Time – Rate of chest compressions during each cycle (randomly measure the total time to provide 30 compressions at least once for each compressor)*

Cycle 1		*seconds*
Cycle 1		*seconds*
Cycle 2		*seconds*
Cycle 2		*seconds*
Cycle 3		*seconds*
Cycle 3		*seconds*
Cycle 4		*seconds*
Cycle 4		*seconds*
(Goal = 30 compressions in 14-18 seconds) If information related to depth/full recoil is available real time from monitor, record findings in comment section. Watch for slight palm lift from chest to ensure full recoil.		
Comments:		
Global rating: *a.) Exceeds expectations* *b.) Meets expectations* *c.) Needs improvement*		

c. *Time – Ventilations <u>if ventilations are given</u> (randomly measure the time between each squeeze of BVM/ventilation)*

Compression cycle 1		*seconds*
Compression cycle 2		*seconds*
Compression cycle 3		*seconds*
Compression cycle 4		*seconds*
After first 4 cycles of 200 compressions		*seconds*
After first 4 cycles of 200 compressions		*seconds*
If ventilation given in first 4 CPR cycles, should be at 8-10 ventilations/minute **(Goal = 1 breath every 6 – 7.5 seconds)**		
Comments:		
Global rating: *a.) Exceeds expectations* *b.) Meets expectations* *c.) Needs improvement*		

d. Time – Drug Interventions

Time of first EPINEPHrine administration		*minutes*
Time of antidysrhythmic administration		*minutes*
Time of second EPINEPHrine administration		*minutes*
Time of third EPINEPHrine administration		*minutes*
Time of other drug administration Drug Name:		*minutes*
Time of other drug administration Drug Name:		*minutes*
(Goal = EPINEPHrine given early and then every 3-5 minutes) Antidysrhythmic should be given after second rhythm check with shockable rhythm (i.e. refractory VF/VT)		
Comments:		
Global rating: *a.) Exceeds expectations* *b.) Meets expectations* *c.) Needs improvement*		

2. After 4 Cycles

a. Time – Mechanical Device Application (option for agencies that choose to use device, not standard of care)

Compression interruption as a result of mechanical device application (Goal = 10 seconds)		*seconds*
Comments:		
Global rating: *a.) Exceeds expectations* *b.) Meets expectations* *c.) Needs improvement*		