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					
☐ None ☐ Unknown						
☐ None ☐ Unknown Cardiopulmonary Arrest Event						
Cardiopulmonary Arrest Event						
Cardiopulmonary Arrest Event Location of Arrest: Out of Hospital ☐ (Select Site) ☐ Home ☐ Public Place ☐ Ambulatory Medical Care ☐ Ambulatory/Outpatient ☐ ED ☐ Inpatient Ward ☐ Ambulance Transport ☐ Other ☐ HDU/Stepdown ☐ ICU (specify)						
Cardiopulmonary Arrest Event Location of Arrest: Out of Hospital						

Management of Cardiopulm	onary Arrest					
Date/Time CPR Commenced:			Total CPR Time Prior to ECLS: minutes			
Multiple Arrests during prior 24	hours? 🗌 Y	′es 🗌 No				
ROSC at any time after CPR a	nd prior to EC	CLS? 🗌 Y	es 🗌 No			
Did the patient have a pulse at the time of cannulation? Yes No						
Compression Method Used an	d Time:					
☐ Standard for minutes						
Automatic Compressor for minutes						
Open Chest CPR for minutes						
Unknown						
Initial Pulseless Rhythm: As		seless Electric	•			
☐ Ventricular Tachycardia - no pul	se 🗌 Unkr	nown – Shock	able			
Unknown						
DC Cardioversion or Defibrillation: No Yes: Number of Shocks: Unknown						
Rhythm at Time of Cannulation: Asytole 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 – N	umber of Dos	es Vasopressin - Number of Doses			
☐ Adenosine ☐ Amiodarone	☐ Atropine ☐	Calcium Ch	oride/Gluconate			
☐ Glucagon ☐ Glucose ☐ Lidocaine ☐ Magnesium ☐ Milrinone ☐ Naloxone ☐ Norepinephrine						
☐ Procainamide ☐ Phenylephrine ☐ Sodium Bicarbonate ☐ No Medications						
Cardiac Pacing During CPA: ☐ Temporary Cardiac Pacing ☐ No Attempt at Pacing ☐ Unknown						
☐ Transcutaneous ☐ Transvenous ☐ Epicardial ☐ PPM In Situ						
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) Location of Arrest: In Hospital (Select Site)						
☐ Home ☐ Public Place ☐ Ambulatory Medical Care			☐ Ambulatory/Outpatient ☐ ED ☐ Inpatient Ward			
☐ Ambulance/Transport ☐ Other			☐ HDU/Stepdown ☐ ICU (specify)			
			☐ Cath Lab ☐ Interventional Radiology ☐ OR ☐ PACU ☐ Delivery Room ☐ Other			
			Belivery Room Brother			
ECPR System: Pre-primed pump ☐ Yes ☐ No ☐ Unknown						
If yes: ☐ Blood Prime ☐ Clear Prime ☐ Unknown						
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Early Post ECPR Management (Within 24 hours of cannulation)					
Neurology: ☐ EEG Monitoring: ☐ standard ☐ continuous ☐ Intracranial Imaging: ☐ Cranial US ☐ CT					
☐ No neurologic investigations post-ECPR					
Temp Management: ☐ Targeted 32-34°C ☐ Targeted norm	othermia 36-37.5°C ☐ Targeted 32-36°C				
□ No Target □ Unknown					
Highest Temp in first 24 hours	Lowest Temp in first 24 hours:				
□ < 32 °C □ 32-<34°C □ 34-<35°C □ 35-<36°C	□ < 30 °C □ 30-<32 °C □ 32-<34°C □ 34-<35°C				
☐ 36-37.5°C ☐ 37.6-38.5°C ☐ >38.5°C ☐ Unknown	☐ 35-<36°C ☐ 36-37.5°C ☐ 37.6-38.5°C ☐ >38.5°C				
	□ Unknown				
First Blood Gas Post ECPR (Closest to intiation or	< 6 hours post initiation)				
Patient Arterial Blood Gas Post ECPR: Yes No					
Date/Time:					
pH: pCO ₂ : pO ₂ : HCO ₃ :	SaO₂: Lactate				
	Lactate Unknown				
☐ Venous Blood Gas (please select box if only VBG available)					
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 =				