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Title: Variability in the time to initiation of CPR in continuously monitored pediatric ICUs





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ACCEPTED MANUSCRIPT

Title: Variability in the time to initiation of CPR in continuously monitored pediatric ICUs

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Abstract:

Aim: To study the influence of patient characteristics and unit ergonomics and human factors on the time to initiation of CPR.

Methods: A single center study of children, 0 to 21 years old, admitted to an ICU who experienced cardiopulmonary arrest (CPA) requiring > 1 minute of chest compressions. Time of CPA was determined by analysis of continuous ECG, plethysmography, arterial blood pressure, and end-tidal CO₂ (EtCO₂) waveforms. Initiation of CPR was identified by the onset of cyclic artifact in the ECG waveform. Patient characteristics and unit ergonomics and human factors were examined including CPA cause, identification on the High-Risk Checklist (HRC), existing monitoring, ICU type, time of day, nursing shift change, and outcome.

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