



## Withholding of Resuscitation for Adult Traumatic Cardiopulmonary Arrest

National Association of EMS Physicians and American College of Surgeons  
Committee on Trauma

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# NAEMSP POSITION STATEMENT

## WITHHOLDING OF RESUSCITATION FOR ADULT TRAUMATIC CARDIOPULMONARY ARREST

National Association of EMS Physicians and American College  
of Surgeons Committee on Trauma

### ABSTRACT

The National Association of EMS Physicians (NAEMSP) and the American College of Surgeons Committee on Trauma (ACS-COT) believe that it is appropriate to withhold resuscitation for certain trauma patients for whom death is the predictable outcome. This paper is the official statement on the withholding of resuscitation that has jointly been passed by the NAEMSP and ACS-COT. **Key words:** withholding; resuscitation; trauma; cardiopulmonary arrest; position statement; NAEMSP; ACS-COT.

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The National Association of EMS Physicians (NAEMSP) and the American College of Surgeons Committee on Trauma (ACS-COT) believe that:

- It is appropriate to withhold resuscitative efforts for certain trauma patients for whom death is the predictable outcome.
- Resuscitative efforts should be withheld for trauma victims with injuries that are obviously

incompatible with life, such as decapitation or hemicorporectomy.

- Resuscitative efforts should be withheld for victims of either blunt or penetrating trauma when there is evidence of prolonged cardiac arrest, including rigor mortis or dependent lividity.
- Resuscitative efforts may be withheld for a blunt trauma patient who, on the arrival of emergency medical services (EMS) personnel, is found to be apneic, pulseless, and without organized electrocardiographic activity.
- Resuscitative efforts may be withheld for a penetrating trauma patient who, on the arrival of EMS personnel, is found to be pulseless and apneic and there are no other signs of life, including spontaneous movement, electrocardiographic activity, and pupillary response.
- When the mechanism of injury does not correlate with the clinical condition, suggesting a nontraumatic cause of cardiac arrest, standard resuscitative measures should be followed.

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