

Get With The Guidelines<sup>®</sup>-Resuscitation collects data on resuscitation events from hospitals across the U.S. The data is used to provide participating hospitals with feedback on their resuscitation practice and patient outcomes as well as to develop new evidence-based guidelines for resuscitation.

This fact sheet provides an overview of the five Post-Cardiac Arrest Care (PCAC) measures. These measures were developed by the Get With The Guidelines<sup>®</sup>-Resuscitation expert leaders to help support hospital processes and aspects of care that are strongly supported by science. With the ultimate goal of improving patient outcomes, the PCAC measures look specifically at therapeutic hypothermia, coronary reperfusion, and optimization of hemodynamics and gas exchange.

## MEASURES

- **Therapeutic Hypothermia:** Percent of PCAC events that undergo therapeutic hypothermia that are appropriately cooled to 32°C to 34°C.
- **Normothermia Maintained:** Percent of adult and pediatric events with a cardiac arrest event and return of spontaneous circulation (ROSC), who are not following commands at the time of the initial assessment, in whom normothermia was maintained during the first 2 days post ROSC (no temperature  $\geq 38$  degrees Celsius).
- **Door to Cath Lab Times (STEMI):** Time from arrival to catheterization lab for adult patients with STEMI (out of hospital events).
- **Oxygen Titration:** Percent of patients with an arterial blood gas documented with PaO<sub>2</sub> maintained at less than 300mmHg within the first 24 hours after ROSC.
- **Hypotension Management:** Percent of patients with a cardiac arrest event and return of spontaneous circulation (ROSC) with appropriate management of sustained hypotension.

Visit [heart.org/quality](http://heart.org/quality) for more information.

Web-based Patient Management Tool provided by Outcome, A Quintiles Company, Cambridge, Mass.