

Medical Control Guideline: MECHANICAL CIRCULATORY SUPPORT DEVICES

CHANGE LOG

Published Date	Status	Section and Subsection Affected	Description of Change(s)
04/01/2026	Revision	Principles: Ventricular Assist Devices (VAD) Policy: Ventricular Assist Devices (VAD)	<ul style="list-style-type: none"> • Revised #10 – chest compression should be performed on VAD patients in cardiac arrest when in accordance with the patient’s wishes • Added #12 – The absence of a palpable pulse can make confirming cardiac arrest in VAD patients difficult. Assess poor perfusion by surrogate markers such as cool skin temperature, central cyanosis, poor capillary refill, and a low mean arterial pressure. Perfusion is considered adequate if any of the following is present: (1) normal skin color and temperature; (2) normal capillary refill; (3) mean arterial pressure greater than 50 mmHg; (4) partial pressure of end-tidal carbon dioxide greater than 20 mmHg. • Revised #13 – Unresponsive VAD patients with poor perfusion are likely in cardiac arrest. Perform external chest compressions while a second clinician assesses for VAD malfunction in consultation with the device coordinator • Revised #14 – a capno reading of <20 is an objective indicator of poor systemic perfusion