

# PRIMARY VS. COMPREHENSIVE RESUSCITATION CENTER REQUIREMENTS



## Primary Resuscitation Centers

Focus on foundational criteria to ensure high-quality care for resuscitation patients.

Hospitals and EMS systems that participate in the Cardiac Arrest Registry to Enhance Survival (CARES) meet Primary Resuscitation Center criteria.

## Comprehensive Resuscitation Centers

Build on primary requirements, incorporating advanced capabilities and additional services.

Must meet all primary resuscitation center criteria (including all recommended specialties).

Primary vs. Comprehensive Resuscitation Center Requirements		
Criteria	Primary Resuscitation Center	Comprehensive Resuscitation Center
<b>Bystander CPR Promotion</b> <i>Organize community initiatives to teach CPR and recognize cardiac emergencies.</i>	✓	✓
<b>Community Outreach</b> <i>Run programs to educate the public on heart health and reducing the risk of cardiac diseases.</i>	✓	✓
<b>EMS Collaboration</b> <i>Work Closely with emergency services to enhance the overall system of care for cardiac arrest.</i>	✓	✓
<b>Administrative Commitment</b> <i>Signed attestation from senior administration and medical staff.</i>	✓	✓
<b>Bundle of Care</b> <i>Use standardized care plans to ensure consistent, high-quality resuscitation care.</i>	✓	✓
<b>Evidence-Based Protocols</b> <i>Include specific criteria for resuscitation termination and care.</i>	✓	✓
<b>Cardiology Consultation</b> <i>Mandatory for sustained ROSC patients</i>	✓	✓
<b>Rapid Cardiac Cath Lab Activation</b> <i>For eligible ROSC patients within 60-90 minutes.</i>	✓	✓
<b>Targeted Temperature Management (TTM)</b> <i>Initiated within 2 hours for certain patients.</i>	✓	✓
<b>Post-ROSC Care Plans</b> <i>Develop strategies to prevent hypotension after a patient regains circulation.</i>	✓	✓

# PRIMARY VS. COMPREHENSIVE RESUSCITATION CENTER REQUIREMENTS



Primary vs. Comprehensive Resuscitation Center Requirements		
Criteria	Primary Resuscitation Center	Comprehensive Resuscitation Center
<b>Transfer Guidelines</b> <i>For higher-level care when needed.</i>	✓	✓
<b>Multidisciplinary Rounds</b> <i>Regular reviews of care plans and implementation.</i>	✓	✓
<b>Comprehensive Patient Care</b> <i>Address the patient's overall well-being, including nutrition, rehabilitation, and spiritual care, from admission.</i>	✓	✓
<b>Organ Donation Protocol</b> <i>Active participation with organ procurement organizations.</i>	✓	✓
<b>CARES Participation</b> <i>Enter patient data into a national registry to provide EMS agencies feedback and improve cardiac arrest outcomes.</i>	✓	✓
<b>Patient Education</b> <i>Cardiac risk reduction, CPR, and support services before discharge.</i>	✓	✓
<b>Multidisciplinary Team</b> <i>Designated roles for resuscitation care.</i>	✓	✓
<b>Specialist Support</b> <i>Ensure access to various medical experts, such as cardiologists, neurologists, and critical care specialists.</i>	✓	✓
<b>24/7 On-Site Critical Care</b> <i>Have pulmonary/critical care specialists and interventional cardiologists available at all times.</i>	X	✓
<b>Mechanical Circulatory Support (MCS)</b> <i>In-house advanced life-support machines like ECMO to support heart and lung functions in critical cases.</i>	X	✓
<b>Neurological Monitoring</b> <i>Offer specialized neurological care with neuro-intensivists to monitor brain health during recovery.</i>	X	✓
<b>Research Involvement</b> <i>Engage in research activities to improve treatment strategies for cardiac arrest.</i>	X	✓



**THOMAS DIBERNARDO**  
 thomas.dibernardo@flhealth.gov  
**JENNIFER LOGSDON**  
 FRCE@emlrc.org  
 Visit [www.FAEMSMD.org/FRCE](http://www.FAEMSMD.org/FRCE)