STRAC REGIONAL ECMO CONSULTATION GUIDELINES

Early recognition of disease severity and request for consultation is essential to maximize outcomes for patients who may benefit from ECMO. Please refer ANY patient (pediatric or adult) meeting ANY one of the below criteria.

**CONSIDERATIONS FOR ECMO CONSULTATION**

**Cardiac Considerations:** (cardiogenic shock, AMI, acute decompensated heart failure, refractory ventricular arrhythmia, pulmonary embolism)
- Hypotension despite 1 pressor (secondary to cardiac dysfunction, not septic shock)
- Lactate > 2.5
- Decreased urine output (< 30 mL/hr) despite medical optimization

**Pulmonary Considerations:** (ARDS, hypercapneic respiratory failure, PE)
- \( \text{PaO}_2: \text{FiO}_2 \) Ratio <150
- \( \text{pH} < 7.25 \) and/or \( \text{PaCO}_2 > 60 \) for > 4 hrs
- High ventilator support: PIP > 30, PEEP > 10, or FiO\(_2\) > 0.6
- Active air leak (pneumothorax/pneumomediastinum) despite lung protective mechanical ventilation settings

*These conditions are not all inclusive. They are recommendations for early consultation with an ECMO Center, not necessarily indications for ECMO.*

**RELATIVE ECMO EXCLUSION CRITERIA:**
- Severe neurologic injury/neurodegenerative conditions
- Intracranial bleeding or neurosurgical procedures within the last 5 days
- Mechanical Ventilation >10 days on PEEP > 10, PIP > 30, MAP > 25, FiO\(_2\) > 0.6
- Active, uncontrolled bleeding
- Malignancy with poor prognosis

**STRAC ECMO Referral Centers:**

<table>
<thead>
<tr>
<th>Children’s Hospital of San Antonio (CHO-SA)</th>
<th>Brooke Army Medical Center</th>
<th>Methodist Hospital</th>
<th>University Health</th>
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<tbody>
<tr>
<td>877-255-5439</td>
<td>210-916-ECMO (3266)</td>
<td>210-575-ECMO (3266)</td>
<td>210-844-2347</td>
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<tr>
<td>Pediatric Only</td>
<td>Adult (includes Civilians)</td>
<td>Adult and Pediatric</td>
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<td>Conventional transport capable</td>
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