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Defibrillate At 360 Joules And Repeat Defibrillation Every 2 Minutes, If Rhythm Shockable. 2. Administer Epinephrine, 1 Mg, IV/IO Push, Circulate With 2 Minutes Of CPR. 3. Defibrillate At 360 Joules, If Rhythm Shockable. Resume CPR. 4. Adm  
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5ST E 72 ST E 10 ST E 68 ST YOR E 55 ST E 49 E 48 St UNITEb  
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Patients Is Difficult And Usually Involves The Use Of Inotropic Agents And Vasodilators To Manipulate Preload, Cardiac Contractility And Afterload; Intra-aor  
3th, 2024 Comparison Of Cardiac Z-score With Cardiac Asymmetry For ... PA:Ao Ratio  
Were The Best Screening Tests, With Highest AUCs (0.879, 0.868 And 0.832,  
Respectively). For Group 2, The Ao-Z-score, PA:Ao And RV:LV Ratios Were The Best  
Screening Tests, With AUCs Of 0.770, 0.723 And 0.716, Respectively. Conclusion  
None Of The Screening Tests Was Found To Be A Perfect Early Discriminator For The  
Cardiac Lesions ... 2th, 2024.

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