Chapter-8
Conclusion
CONCLUSION

1. Incidence of in-hospital cardiac arrests was 16-17 /1000 admissions
2. Age of the patients who sustained cardiac arrest was 52-53 years
3. Cardiac arrest was more predominant in males than females
4. There were more cardiac arrests during the night duty hours
5. Time for code blue team arrival was faster in the post MEWS group as there were more code blue teams formed in the post MEWS period
6. There were more patients in the shockable rhythm as initial rhythm in the post MEWS group and the patients who were defibrillated also was more in the post MEWS period.
7. ROSC was seen after VF/VT in 35.48 % of the patients and 21.1% of these patients had ROSC for > 24 hours.
8. The survival to hospital discharge was higher in the patients who had initial rhythm as VF/VT (18.27 %) whereas asystole had 7.14 % and PEA had only 11.75 %
9. The Quality of life was better for patients in the Post MEWS group in terms of Activities of Daily Living.
10. There was a statistically significant difference between the two groups in terms of sustaining of ROSC, Independence in activities of daily living and activities of daily living.