

reflex in conscious patients.

D. Intranasal Spray – Single Dose Pre-Packaged by Manufacturer

1. Lay patient on their back.
2. Remove medication from the box. Peel the back tab to open the package.
3. Hold spray bottle with your thumb on the bottom of the plunger and your index and middle fingers on either side of the nozzle.
4. Tilt the patient's head back and support the neck with your hand. Gently insert the tip of the nozzle into ONE nostril until your fingers on either side of the nozzle are against the bottom of the patient's nose. Direct the nozzle toward the back of the nose, not the top/bottom.
5. Press plunger firmly to deliver the dose of the medication.
6. Remove spray bottle from the nostril and discard in safe place (away from children).
7. Lay patient on their side in the recovery position.

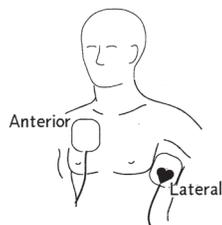
7.04 Cardiac Electrical Therapy

A. Automated External Defibrillator [BLS/ALS]

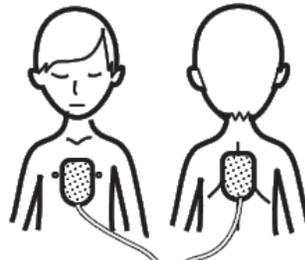
1. Apply the AED to all pulseless patients suspected of cardiac arrest.
2. Contraindications:
 - a. Patient with a pulse
 - b. Patient meets obviously dead criteria (*Ref. 8.02 A.2.c.*)
3. Use with these types of trauma patients:
 - a. Trauma secondary to cardiac arrest (i.e., MVI with minor vehicle damage and patient in cardiac arrest).
 - b. Traumatic arrests being resuscitated according to Cardiac Arrest Guidelines (*Ref. 8.04 A.1.f.*).
4. To attach defibrillator:
 - a. Press On/Off.
 - b. Bare the patient's chest. Shave the chest of any excessive chest hair.
 - c. For patients less than 8 years of age, use the 'Infant/Child' AED pads. For all others, use the standard adult AED pads.
 - d. Place the pads in accordance with the pictures on the AED pad packaging.
 - For adults, place the 'anterior' pad on the patient's upper right torso, lateral to the sternum and below the clavicle. Place the 'lateral' pad lateral to the patient's left nipple with the center of the electrode in the midaxillary line.
 - For pediatric patients, place the pads in an anterior and posterior fashion.

ADULT PATIENTS

PEDIATRIC PATIENTS



QUIK-COMBO Electrodes



- e. If the AED pads contain a CPR sensor, ensure it is placed over the sternum consistent with package labeling.
 - f. Connect the electrodes to the AED.
5. There are three possible messages after the AED has performed an analysis:
- a. If the AED detects a shockable rhythm, it will emit the charging tone and state "Stand Clear. Push Shock Button." Immediately clear from the patient and depress the shock

button. Chest compressions shall resume immediately after the defibrillation without a pulse check.

- b. If the AED detects a non-shockable rhythm, it will state “No Shock Advised. Start CPR.”
 - c. After three minutes, the defibrillator will prompt, “Stand Clear. Analyzing Now. Stand Clear.” and the analysis will begin automatically.
 - d. If at any time motion interferes with the analysis, the AED will state “Motion Detected. Stop Motion.” Make certain no one is touching the patient, wires or device. The device will automatically analyze when the motion stops.
6. If the patient loses pulses at any time (an EMS witnessed arrest), immediately initiate an AED analysis by pressing the right soft-key.
 7. Documentation of AED use
 - a. Record comments about the incident regarding AED use, bystander CPR and other therapies in the patient care record.
 - b. AED information shall be downloaded as soon as possible (*Ref 9.04 Procedure for Downloading AED and LifePak 15 Data*).

B. Synchronized Cardioversion [ALS]

1. Select the guideline-determined energy setting on the defibrillator unit.
2. Push the synchronizer button and verify that the device is sensing QRS complexes.
3. Place the pads in accordance with the pictures on the electrode pad packaging (*Ref. 7.04 A.4.d.*).
4. If ‘Adult’ AED pads have been attached, they shall be connected directly to the LP15 (via an AED pad adaptor if necessary). If ALS arrives and ‘Infant/Child’ AED pads have been attached, they must be removed and replaced with the salmon label ‘Pediatric’ LP15 electrode pads.
5. Clear the area around the patient by loudly stating, “Clear! I’m clear, you’re clear, everybody’s clear” while visually verifying that you and all other persons are clear of the patient.
6. Push and hold the “shock” button on the defibrillator unit until the cardioversion has occurred.

C. Defibrillation [ALS]

1. Select the guideline-determined energy setting on the defibrillator unit.
2. Place the pads in accordance with the pictures on the electrode pad packaging (*Ref. 7.04 A.4.d.*).
3. If ‘Adult’ AED pads have been attached, they shall be connected directly to the LP15 (via an AED pad adaptor if necessary). If ALS arrives and ‘Infant/Child’ AED pads have been attached, they must be removed and replaced with the salmon label ‘Pediatric’ LP15 electrode pads.
4. Clear the area around the patient by loudly stating, “Clear! I’m clear, you’re clear, everybody’s clear” while visually verifying that you and all other persons are clear of the patient.
5. Push the “shock” button on the defibrillator unit.

D. Cardiac Pacing – Transthoracic [ALS]

1. Place the pads in accordance with the pictures on the electrode pad packaging (*Ref. 7.04 A.4.d.*).
2. If ‘Adult’ AED pads have been attached, they shall be connected directly to the LP15 (via an AED pad adaptor if necessary). If ALS arrives and ‘Infant/Child’ AED pads have been attached, they must be removed and replaced with the salmon label ‘Pediatric’ LP15 electrode pads.
3. Connect the cardiac monitor limb leads to the patient.
4. Turn on the pacemaker function and observe the ECG monitor screen to verify that the device