

Automated External Defibrillation (≥ PL1)

Clinical Indications:

1. Patient is in cardiac arrest.

Contraindications:

1. None

Preparation for Use:

1. Ensure safe environmental and patient conditions.
2. Age < 8 years, use Pediatric Pads, if available, or if device has “energy attenuating” key, be sure to activate key.
3. If Pediatric pads are **not** available use Adult pads
4. If AED Pads touch due to patient size use an Anterior-Posterior pad placement.

Procedure:

1. If multiple rescuers available, one rescuer should provide uninterrupted chest compressions while the AED is being prepared for use.
2. Remove any medication patches on the chest and wipe off any residue.
3. Turn on AED and follow clinical procedure in accordance with Pit Crew CP-19.
4. Apply defibrillator pads per manufacturer recommendations. Use alternate placement when implanted devices (pacemakers, AICDs) occupy preferred pad positions.
5. Keep interruption in CPR as brief as possible.
6. If shock advised, assertively state “CLEAR” and visualize that no one, including yourself, is in contact with the patient then press the shock button. If BIAD has been placed, Position 3 will continue to hold BVM to stabilize BIAD in vertical position.
7. Immediately return to chest compressions.
8. If no shock advised, immediately return to chest compressions.
9. Allow AED to analyze when prompted (approximately 2 minutes). Perform pulse check at this time.
10. Repeat steps 6 through 8.
11. Keep interruption of CPR compressions as brief as possible. Adequate CPR is a key to successful resuscitation
12. If pulse returns: Go to appropriate COG

System Guidance for AED Analysis Delays, Failures, and Alarms Indications
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System Guidance for AED Analysis Delays, Failures, and Alarm Indications

AED Analysis Delays

Recent experiences have introduced the possibility of an extended delay in an AED reaching a decision to shock or not shock. We are reviewing the frequency and extent of these delays. In the interim, I am providing the following additional direction to follow in the event of a lengthy AED analysis interval.

1. If an AED analysis has NOT reached a decision within 20 seconds of stopping CPR, immediately resume CPR and ignore the AED's prompts to stop motion.
2. Approximately 2 minutes later, the AED should prompt for CPR and all motion to stop.
3. Listen for the AED prompts and respond accordingly to each prompt. Repeat these steps as needed.
4. Verbalize all observations and actions using the AED's voice recorder.

AED Failure

In rare cases, providers may encounter a situation in which the AED fails to function at all as evidenced by either 1) not powering on, or 2) not delivery a shock even though the AED reached a shock advised decision. If a System credentialed provider encounters such a situation, take the following actions.

1. Disarm the AED shock, unplug the pads from the AED, or turn off the AED.
2. Immediately resume CPR.
3. If another AED is available, immediately apply the second AED to the patient.
4. If another AED is not available, continue uninterrupted CPR until a functioning defibrillator (AED or Manual) arrives and is placed on the patient.
5. If possible, verbalize all observations and actions using the AED's voice recorder.

Philips FR3 Alarm Indication

When using the Philips FR3 AED, the device may produce a chirping sound indicating the need for AED attention.

1. Should the AED emit a periodic single (1) chirp sound before turning it on, use the AED if no other defibrillator is available at the patient's side.
2. Should the AED emit a periodic triple (3) chirp sound before turning it on, do not use the AED to treat a patient. Continue CPR until another AED is available at the patient's side.
3. Should either of these sounds be heard when not responding to a patient, remove the AED from service and contact the appropriate person in your Agency and contact OMD Performance Improvement, tellemsmd@austintexas.gov.

If any of the above occurs and after patient care is completed, notify the appropriate person in your agency to obtain the AED data file from your AED. Ensure these AED data files as well as Equipment Failure Report are sent to the OMD Performance Improvement Coordinator at tellemsmd@austintexas.gov (512-978-0011).

Should you have questions regarding any of these topics, please contact the OMD.