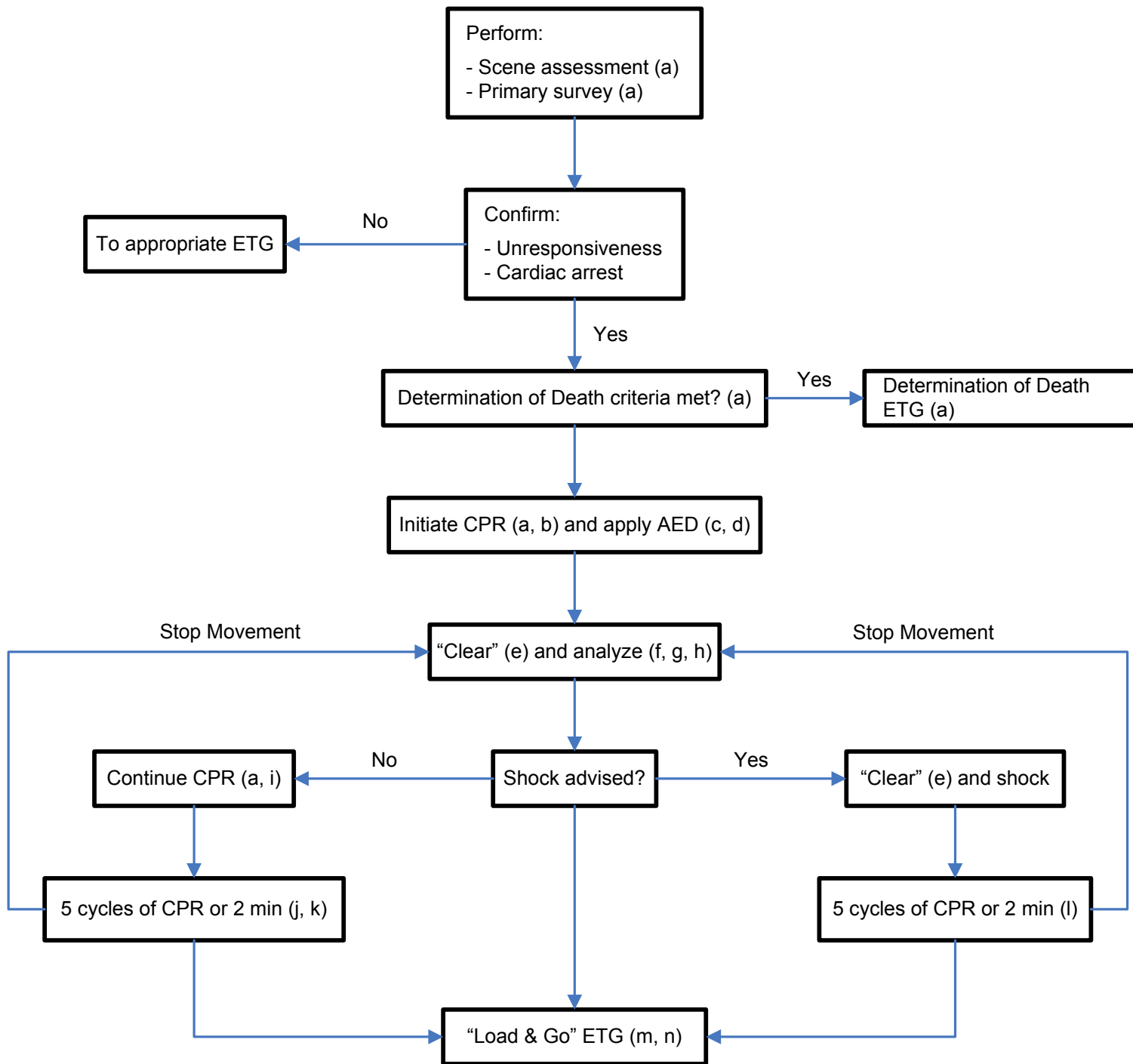


GENERAL: Automated External Defibrillation



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- a. Refer to appropriate Emergency Treatment Guideline for a complete description and/or application.
- b. Activate ALS intercept as soon as possible, if available.
- c. Minimum patient age is one year old. For ages one to eight years, pediatric pads are preferred but not essential.
- d. Special Situations

<p>Agonal respirations: personnel may have to wait for agonal respirations to cease before being able to analyze. During this time, perform CPR until agonal respirations stop.</p> <p>Pacemakers / implantable defibrillators: attach the AED taking care to avoid defibrillator pads adjacent to the area where the AICD is located.</p> <p>Hypothermia: an initial “analyze – shock” if indicated should be attempted.</p> <p>Trauma: if due to blunt trauma, an initial “analyze - shock” may be attempted, if indicated</p>	<p>Medication patches: remove.</p> <p>Wet surfaces: move to a dry surface (i.e. non-metallic spine board).</p> <p>Metal platforms and other conductive surfaces: position defibrillator pads to avoid contact with metal objects (i.e. body piercing or jewelry).</p> <p>Electrical interference: remove/disconnect source.</p>
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- e. Be sure that no one is touching the patient, not even the person in charge of giving breaths. Loudly state a “clear the patient” message such as “I’m clear, you’re clear, everybody’s clear.”
- f. Never analyze while vehicle is in motion as vibration may interfere with appropriate reading and may cause accidental electrical discharge.
- g. If unwitnessed, full cardiac arrest with no CPR initiated, perform two minutes of CPR before rhythm analysis/defibrillation. CPR includes ventilation with 100% oxygen.
- h. For patients with massive trauma or penetrating injury requiring surgical intervention, analysis and defibrillation is permitted until the first “no shock advised” is obtained. When this first “no shock advised” is obtained, an immediate “load and go” must be initiated.
- i. Do not recheck to see if there is a pulse.
- j. Repeat up to three times. After three “No Shock” messages are received initiate transport as soon as possible (with or without ALS). During transport reanalyze cardiac status (ECG/Pulses) after every five cycles of CPR (approx. two min) or as directed by medical control. If shock is indicated, follow Emergency Treatment Guideline.
- k. Transport may be initiated prior to completion of nine rhythm analyses using the AED.
- l. Repeat up to three times. After three shocks, initiate transport as soon as possible (with or without ALS). During transport reanalyze cardiac status (ECG/Pulses) after every five cycles of CPR (approx. two min) or as directed by medical control. If shock is indicated, follow Emergency Treatment Guideline.
- m. Do not turn off the AED as some units will recognize a change in rhythm and alert the operator. If at any time the patient becomes pulseless, immediately reanalyze the patient to determine if defibrillation is indicated.
- n. Initiate transport as soon as possible, with or without ALS.