



AUTOMATED EXTERNAL DEFIBRILLATION (AED)

Application: Applies to Public Safety First Responders (law enforcement, lifeguard, park rangers, environmental health) with an OCEMS-approved First Responder AED program

Indications:

1. Cardiac arrest of suspected medical origin in patients greater than or equal to 8 years old and greater than or equal to 55 pounds.
2. Use in children aged 0 to 8 years or less than 55 pounds is permitted if the AED has been approved by the AED manufacturer for use in this age group.

Contraindications:

1. Unsafe scene
2. Water on scene that may allow AED to electrically arc to responders

Safety Guidelines:

1. Assure no one is touching the patient during machine analysis or defibrillation

Standing Order:

Upon arrival, verify unconsciousness, assess respirations, and verify pulselessness.

1. Initiate CPR.
2. Activate 9-1-1 system if not already done.
3. Apply AED as soon as device is available.
4. Minimize interruptions in CPR for rhythm analysis and minimize peri-shock pause.
5. Follow manufacturer's recommendations for application and use of the AED device.

Documentation:

1. Retain the electronic data of the AED use at the first responder agency.
2. Notify OCEMS of AED use (form available on OCEMS website)

Notes:

- If on arrival, there is a private citizen applied AED in place:
 - Continue CPR and minimize peri-shock pause. Repeat shock as indicated.
- Delayed ambulance and paramedic arrival:
 - Continue CPR and re-analyze every 2-3 minutes or as prompted by the AED and deliver shocks as indicated. Minimize peri-shock pause.

Approved:

Carl Schultz, MD

Review Dates: 03/18/21
Final Date of Implementation: 10/01/2021
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Special Situations:

- Transdermal Medication Patches:
 - Remove the patch and wipe the area to prevent arcing / sparking or burns if the electrical current should pass through the patch.
- Surgically implanted devices (Pacemakers, implantable defibrillators):
 - Avoid placing electrodes over or near these devices, which can be damaged, or can absorb or reflect energy, thereby decreasing the chance of a successful defibrillation.
- If a patient is wearing a LifeVest® wearable defibrillator:
 - Proceed with standard evaluation and treatment measures.
 - CPR can be performed as long as the device is not broadcasting “press the response buttons,” or “electrical shock possible, do not touch patient,” or “bystanders do not interfere.”
 - If AED is available, disconnect the LifeVest® battery and remove the LifeVest® and treat the patient with the AED.
 - To remove the LifeVest®, first pull out and disconnect the battery, then remove the garment from the patient.
 - ALS should take the vest, modem, charger, and any extra batteries to the hospital.

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