

EMS System for Metropolitan Oklahoma City and Tulsa 2021 Medical Control Board Treatment Protocols



Approved 9/9/20, Effective 1/15/21, replaces all prior versions

4D – MANUAL DEFIBRILLATION ADULT & PEDIATRIC

PARAMEDIC

Indication:

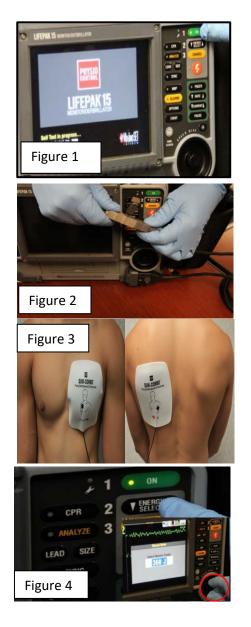
Ventricular Fibrillation/Pulseless Ventricular Tachycardia

Contraindications:

Spontaneous pulse. All cardiac rhythms except ventricular fibrillation/pulseless ventricular tachycardia.

Technique:

- 1. Power **ON**. (Figure 1)
- 2. Connect the therapy electrodes (defibrillation pads) to the therapy cable and confirm cable connection to the monitor/defibrillator. (Figure 2)
- Prepare the patient's skin and apply therapy electrodes to the patient in anterior left chest and posterior left chest position. (Figure 3)
- Confirm desired energy is selected, or press ENERGY SELECT or rotate the SPEED DIAL to select the desired energy. (Figure 4)





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Protocol 4D: Manual Defibrillation, Adult & Pediatric, cont.

- Press CHARGE. While the monitor/defibrillator is charging, a charging bar appears and a ramping tone sounds, indicating the charging energy level. When the monitor/defibrillator is fully charged, the screen displays available energy. (Figure 5).
- 6. Make certain all personnel, including the operator of the monitor/defibrillator, are physically clear of the patient, stretcher, bed and any equipment connected to the patient.
- 7. Confirm ECG rhythm of ventricular fibrillation or pulseless ventricular tachycardia. Confirm available energy.
- 8. Press the *(shock)* button on the monitor/defibrillator to defibrillate the patient. (Figure 6)
- 9. NOTE: To disarm (cancel the charge), press the SPEED DIAL. The monitor/defibrillator disarms automatically if shock buttons are not pressed within 60 seconds, or if the energy selection is pressed after charging begins. IF DEFIBRILLATION NOT INDICATED UPON A RHYTHM CHECK, DISARM (CANCEL THE CHARGE) BEFORE RESUMING CHEST COMPRESSIONS TO PREVENT INADVERTANT ELECTRICAL EXPOSURE TO EMS PERSONNEL.
- 10. Repeat procedure starting from Step 4, when indicated.

PEDIATRIC PATIENT:

If patient is less than 4 years of age and/or under 15 kg weight, connect the Quik-Combo[®] Pediatric Electrodes to the monitor/defibrillator and proceed to Step 3. **NOTE**: Pediatric: Initial defibrillation 2 joules/kg with second and subsequent defibrillations at 4 joules/kg. Prior to determining manual defibrillation settings count prior AED defibrillations.

DEFIBRILLATION CLINICAL PEARLS:

- In an emergency resuscitation setting that requires defibrillation, if unfamiliar with monitor/ defibrillator available, look for 1-2-3 sequence (Figure 7) that all monitor/defibrillators are labeled with by industry practice. 1 turns on the device; 2 selects energy; 3 charges the device. Typically, immediately next to 3 is the shock or discharge button.
- In an emergency resuscitation setting that requires defibrillation, do not interrupt or pause chest compressions unless absolutely necessary. Continue to provide chest compressions while a monitor/defibrillator operator is powering on the monitor/defibrillator, selecting energy and charging the device.

3. DO NOT CONTINUE TO PROVIDE CHEST COMPRESSIONS WHEN THE MONITOR/ DEFIBRILLATOR IS DISCHARGING / DEFIBRILLATING.

