

 <b>Lakeridge Health</b>	<b>Automated External Defibrillator (AED) – Medical Directive</b>	
	Manual: Medical Directives & Delegated Controlled Acts	Original Date: 28JUN2022
	Section: Interdepartmental	Version Date: 26NOV2024
	Document Owner: Adult Resuscitation Subcommittee	Next Review Date: 26NOV2026
	Approved by: Surgical Program; Women’s and Children’s Program; Emergency Program; Medicine Program; Healthy Aging Program; Registered Respiratory Therapists; Critical Care Program; Nephrology Program; Emergency Physicians; Critical Care Physicians; Interprofessional Program	
Cross Reference to: Automated External Defibrillator (AED) Policy and Procedures		
<p>A printed copy of this document may not reflect the current, electronic version on Lakeridge Health’s Intranet, ‘OASIS.’ Any copies of this document appearing in paper form should ALWAYS be checked against the electronic version prior to use. Contact policies@lh.ca for version history.</p>		

### Authorizing Prescriber(s)

Lakeridge Health Department Chief’s for the following Sections:

- LHAP – Emergency Department and Critical Care
- LHB – Emergency Department and Critical Care
- LHO – Code Blue, Emergency Department and Critical Care
- LHPP – Emergency Department

### Authorized to Whom

Regulated Health Care Providers (RHCP), and Emergency Department Physician Assistants (PA) who have successfully completed the certification process for Basic Life Support (BLS) inclusive of the education in the application and use of an automated external defibrillator (AED).

### Patient Description/Population

An AED will be utilized for any patient with a suspected sudden cardiac arrest as indicated by ALL of the following:

- unconscious and/or unresponsive
- absent or abnormal breathing
- no detectable pulse or no signs of circulation
- greater than 1 year of age

A **Patient** is the recipient of health care services and can include a visitor, guest, employee, or an individual registered within Lakeridge Health (LH) requiring medical treatment or care.

### Order and/or Procedure

Once the AED is available, turn on the AED and follow the audio/visual prompts.

The order and associated procedures are presented in sequential order for the following AED prompts:

---

This material has been prepared solely for the use at Lakeridge Health. Lakeridge Health accepts no responsibility for use of this material by any person or organization not associated with Lakeridge Health. No part of this document may be reproduced in any form for publication without the permission of Lakeridge Health.

1. 'Don't touch patient, analyzing' the responders will:
  - discontinue bag valve mask ventilation and cardiopulmonary resuscitation (CPR) as movement may cause an inaccurate cardiac rhythm analysis being performed.
  
2. 'Press flashing shock button' the responders will:
  - verbally indicate for everyone to 'stand clear'
  - complete a safety check that involves making sure that all responders take a step back from the patient
  - ensure no one is touching the patient, bed, and/or equipment
  - ensure that oxygen is removed from the patient and immediate area (not placed beside the patient)
  - when the above has been completed, press the flashing shock button
  - communicate 'shock given' to indicate to responders to resume CPR

### **Indications to the Implementation of the Directive**

- Any patient in a cardiac arrest situation
- Physician not readily available

### **Contraindications to the Implementation of the Directive**

This medical directive must not be implemented in the following circumstances:

- patient's advanced care plan is documented to not attempt resuscitation
- contradicts any prior known wishes as indicated by the Essential Partner(s) in Care (EPC) or Power of Attorney (POA)
- under 1 year of age

### **Consent**

In a life or limb emergency, where the patient is incapable of decision-making and the EPC or POA cannot be contacted in a timely manner, care and/or treatment can be provided under emergent consent parameters.

- The health care team needs to follow any known prior wishes of the patient in respect to the care and/or treatment
- These wishes may be documented in the Advanced Care Planner section in the electronic medical record but include any prior known wishes of the patient that have been made known to the health care team
- As soon as possible, consent must be sought from the patient, EPC or POA.

### **Documentation Requirements**

In addition to standard documentation practices, the RHCP or PA implementing this directive must document the following in the patient's health record:

- the name of this medical directive
- the name of the implementer
- the date and time
- legible signature of implementer including credentials (unless documenting electronically)

## **Review/Evaluation Process**

This directive will be reviewed by Adult Resuscitation Subcommittee every 2 years.

## **References**

Canadian Heart and Stroke Association. (2020). Basic cardiovascular life support (BLS) provider manual.

College of Nurses of Ontario. (2020). Fact Sheet: Legislation and regulation: An introduction to the Nursing Act, 1991.

*Regulated Health Professions Act, SO 1991, c 18.*

ZOLL AED. (2018). ZOLL AED Operator's Manual.