



DIRECTIVE: 6.72

SUBJECT: Automated External Defibrillator			Number of Pages: 5	
DISTRIBUTION: All Personnel	AMENDS: 5/22/2015	THIS ORDER CANCELS: N/A		
DATE OF APPROVAL: 7/5/2016	DATE OF ISSUE: 7/13/2016	APPLICABLE ACCREDITATION STANDARDS		
ISSUED BY: Bobby L. Cummings, M.S. Chief of Police Reviewed: 5/16/2016				

AUTOMATED EXTERNAL DEFIBRILLATOR

PURPOSE

The purpose of this policy is to provide guidance and direction on the use of the Automated External Defibrillator (AED) by the Wilmington Department of Police.

As directed by the Delaware Emergency Medical Services Oversight Council, through HB 332 Section 22, paragraph 3 which states that “All law enforcement vehicles on patrol shall be equipped with a semi-automatic external defibrillator by January 1, 2001, subject to appropriations”, the Wilmington Department of Police has instituted an Automated External Defibrillator program.

POLICY

This policy will describe the device(s) being used by the Wilmington Department of Police, review the safe use of an AED, describe who is authorized to use an AED, direct actions to be taken after use of an AED, and direct maintenance activities associated with the device.

DEFINITIONS

The automated external defibrillator selected by the Office of Emergency Medical Services (OEMS) to be utilized by law enforcement agencies in the state is the Medtronic/Physio-Control LifepSak 500 & 1000 models. This battery powered device is capable of diagnosing cardiac dysthymias and if indicated, deliver an electrical shock of 360 joules to persons in cardiac arrest. **The Philips HeartStart FRx AED which is also**



selected by OEMS, is a newer updated model designed to deliver biphasic energy of 150 joules for adult patients and 50 joules for pediatric patients. This diagnosis and energy delivery is accomplished through two self-adhesive pads, which attach at one end to the device and at the other end to the patient's bare chest.

PROCEDURES

The following section directs the operation of the AED specific to the Wilmington Department of Police. The general guidelines for the use of an AED obtained during American Heart Association HS AED training are applicable to all AED models.

The Lifepak 500 device is indicated only for those patients that are unresponsive, not breathing and pulseless. In addition, the standard defibrillation pads can only be used on adults or children who are 8 years old, **or older**, or weigh more than 80 lbs.

The Lifepak 1000 device will be used in the same **situations** as the Lifepak 500 **however**, it may be used on children who are 1 to 8 years old or weigh less than 80 lbs with Infant/Child Reduced Energy Defibrillation Electrodes (come in pink package).

The Philips HeartStart FRx AED will be utilized in the same situations as the Lifepak 1000 device. There are no infant/child pads and there is no minimum age. All the Philips defibrillation pads are identical. Utilization on an unresponsive, pulseless adult remains the same. If the need arises to defibrillate an infant or a child less than 55 pounds or 8 years old, the Infant/Child key must be inserted into the top of the FRx AED and the energy is automatically reduced. It does not matter whether the Infant/Child key is inserted before or immediately after turning on the FRx, however the key should be inserted before placing pads on the patient.

If there is no Infant/Child key or Infant/Child pads available for either device, **DO NOT DELAY TREATMENT**. Turn on the AED and place one pad in the center of the chest between the nipples (anterior) and the other in the center of the back (posterior).

Personnel of the Wilmington Department of Police are authorized to deliver a total of 6 shocks. Permission from medical control must be obtained to deliver additional shocks. EMS units should arrive prior to the necessity of additional shocks though.

A. Authorized Users

Only personnel of the Department of Police who have received the American Heart Association HS AED training are authorized to use the AED. The state medical director authorizes this practice of medicine for first responders.



B. Operation Readiness

1. Press the green ON/OFF button to turn the device on.
2. Place the self-adhesive pads on the victim's chest. One pad should be placed on the anterior surface on the patient's chest, just below the collarbone, next to the sternum. The other pad should be placed on the left lateral chest below the nipple. **In the event of a smaller patient such as an infant or child or other circumstance not allowing standard pad placement, one pad should be placed in the center of the chest between the nipples and the other in the center of the back (anterior-posterior).** One-hundred percent (100%) skin contact must be achieved. If necessary, remove chest hair with the disposable razor supplied.
3. Plug the other end of the pad cable into the device. Once this is done, the device will automatically begin analyzing the patient's rhythm. The AED unit is already preloaded with the other end of the AED pad cable plugged into the unit.
4. If the device detects a shockable rhythm the unit will begin to charge up to the appropriate energy level. When the device has reached the appropriate level, an alarm will sound. The AED operator must clear all personnel from the patient before discharging the shock by pushing the red shock button.
5. Follow the recommendations of the American Heart Association received in the HS AED training.
6. If the device gives a "no shock indicted" or "check for breathing and/or pulse" message, the officer should reassess the patient's Compressions, Airway, and Breathing (C-A-B) and, if necessary, start CPR.
7. After 2 full minutes of CPR, the device will automatically reanalyze the patient. If shock is indicated, follow the steps in #4 above. If no shock is indicated, follow the steps in #6 above.
8. The device will remain attached to the patient, and the officer will continue with CPR and AED treatment until EMS arrives.
9. The officer will continue to administer appropriate care to the patient, dependent on patient condition. This treatment is consistent with the training received in the HS AED curriculum.

C. After Use Instructions

1. The officer will respond to the receiving hospital to check on the status of the patient. The officer will obtain the patient information, the name of the treating physician, the paramedic unit number that treated the patient, and the Basic Life Support (BLS) unit number that transported the patient.
2. If an officer responds to any type of medical event (traffic collision, CPR in progress, drowning heart attack, etc.) and uses the AED, then the officer should complete a LEISS incident report as an Assist Other Agency with the Other agency being the Delaware Fire Service – when resuscitation



efforts were successful; if resuscitation efforts are not successful then a death investigation report shall be completed.

3. The officer will immediately notify the AED Service Coordinator or **on call designee, listed in the Patrol Sergeant's office.**
4. The officer will return to police headquarters and meet with the AED Service Coordinator to obtain the necessary equipment to restock the AED.

D. Maintenance

1. The AED device does an automatic self-check every time it is turned on, and does a daily internal maintenance check.
2. The AED Service Coordinator and his/her designee will conduct semi-annual maintenance checks on each unit assigned to police vehicles/persons within the Department of Police. This is done by printing a maintenance report from each AED. These printouts will be kept on file in the AED Service Coordinator's office.
3. If at any time, an officer discovers a maintenance problem with a device, he/she will contact the AED Service Coordinator.

E. AED Service Coordinator Responsibilities

1. Ensure that all officers are trained in the use of the AED and are advised of any changes in policy or procedure.
2. Maintain training records, and advise the training academy/division of the need for training and/or recertification training.
3. Maintain training records for the devices.
4. Maintain supply levels at the police headquarters.
5. Maintain AED incident reports, and forward copies to the OEMS within 48 hours of the event.
6. Forward AED incident reports to the State Medical Director.

F. Carrying of the Lifepak 500/1000/ **Phillips HeartStart FRX** model in the vehicle

1. The device should not be subjected to extremes in temperature. During extremely hot or cold periods, the device should be carried in the passenger compartment of the vehicle when possible. Otherwise the AED unit will be placed in a vehicle mount in the trunk of vehicle.



G. AED Service Coordinator

1. The AED Service Coordinator for the Wilmington Department of Police is the **Emergency Management Officer**. The assistant service coordinator is the WPD Tactical Emergency **Medical Technician / Paramedic**. **Additional on call personnel will be designated by the AED Service Coordinator as the need arises.**

Contact information for when an AED usage occurs:

Notifications need to be made to only ONE of the AED Service Coordinators **or designee**. It is ultimately the responsibility of the officer's immediate supervisor to ensure that proper notification has been made. Please refer to the on call list in the Patrol Sergeant's office for whom to notify:

1. [REDACTED]
[REDACTED]
[REDACTED] [REDACTED]
[REDACTED]
2. [REDACTED]
[REDACTED]
[REDACTED] [REDACTED]
[REDACTED]
[REDACTED]
3. [REDACTED]
[REDACTED]
[REDACTED] [REDACTED]
[REDACTED]

