



Standards Procedure (Skill) Cardiac Section

Cardiac: Defibrillation-Dual or Double

Clinical Indications:

NOT IN USE BY UNION EMS

P PARAMEDIC P

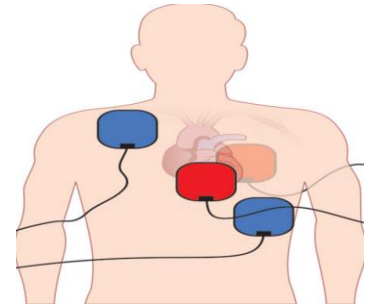
- Cardiac arrest with persistent ventricular fibrillation or pulseless ventricular tachycardia.
- Refractory ventricular fibrillation or pulseless ventricular tachycardia where ≥ 3 shocks delivered.

Procedure:

1. Ensure that Chest Compressions are adequate and interrupted only when absolutely necessary.

2. Clinically confirm the diagnosis of cardiac arrest and identify the need for defibrillation.
3. Prepare sites for second pad set attachment and apply defibrillation hands free pads:

- Pads: First defibrillator pads in anterior-posterior position
- Pads: Second defibrillator pads in anterior-lateral position:
- Ensure pads are not in contact with one another.



For patients with implanted pacers/defibrillators:
Avoid placing paddles or pads directly above device.

4. Set the appropriate energy level and assure controls for both defibrillator / monitors are accessible to provider performing defibrillation.
5. At next pulse / rhythm check, if refractory or persistent VF/VT continues:
Charge the defibrillator to the selected energy level.
Continue chest compressions while the defibrillator is charging.
6. Optional: Agencies may provide a single shock at this point with the second defibrillator / monitor to provide a change in energy vector delivered to the heart then move to step 7 if VF / VT persists.
- 7. When both monitor / defibrillators have reached selected energy setting:**
Hold Compressions, assertively state, "CLEAR" and visualize that no one, including yourself, is in contact with the patient.
2 options at this point:
Option 1 (double simultaneous): Provider depresses both defibrillator shock buttons simultaneously.
Option 2 (dual sequential): Provider depresses monitor 1 shock button and then immediately following, depresses monitor 2 shock button.
8. Immediately resume chest compressions and ventilations for 2 minutes. After 2 minutes of CPR, analyze rhythm and check for pulse only if appropriate for rhythm.
9. Repeat the procedure every two minutes as indicated by patient response and ECG rhythm.
10. Keep interruption of CPR compressions as brief as possible. Adequate CPR is a key to successful resuscitation.

Certification Requirements:

- Maintain knowledge of the indications, contraindications, technique, and possible complications of the procedure. Assessment of this knowledge may be accomplished via quality assurance mechanisms, classroom demonstrations, skills stations, or other mechanisms as deemed appropriate by the local EMS System. Assessment should include direct observation at least once per certification cycle.