

Combat Sudden Cardiac Arrest

CHAIN OF SURVIVAL

- Call 911
- Early CPR
- Early Defibrillation
- Early Advance Life Support



MEDICAL EMERGENCY DRILL AED/CPR USE

This drill is designed for non-medical personnel to practice emergency response procedures and to evaluate and improve upon the effectiveness of those procedures.

A recent Public Access Defibrillation clinical study conducted by the National Heart, Lung and Blood Institute concluded that trained laypersons can use AEDs safely and effectively. The study resulted in twice as many people survived out-of-hospital cardiac arrest when an AED & CPR were used over CPR alone.

Participants in this study had effective response plans that included “mock cardiac arrests”.

In 2004, The AHA’s Publication – The Emergency Response Plan for Schools – emphasized routine AED practice drills and evaluations. Considering the importance and effectiveness of fire drills, a situation most anyone can relate to, the need for routine practice of rescuing a sudden cardiac arrest patient, a life or death situation, is a logical conclusion.

AED drills should be established by your AED coordinator and ***include your Building Emergency Response Team and/or Identified First Responders***. Although the main components for AED drills are standard, each building is unique and therefore drills should be tailored to meet the needs of your building and staff.

For further assistance on AED Drills please log on to www.aeddrill.com.

Our mission is to help save lives. Our passion for this mission serves to strengthen our resolve and commitment to long-term mutually rewarding relationships with our customers by providing quality products and services.

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MEDICAL EMERGENCY DRILL CONTENTS:

Equipment:

- Mannequin with clothing
- AED Training Unit
- Stop watch

Communications:

- Inform main office of impending drill
- Simulate 911 call only. Do not call 911 *unless prearranged with your 911 system*
- Have participants state “*Participating in an AED Drill*” to non-participants.

Preparations:

- Mannequins must be thoroughly cleaned *for rescue* breathing
- The *AED coordinator* should carry the AED Training Unit.

Drill Actions:

- Have rescuer retrieving the AED *place an “AED Drill in Progress” sign* in the cabinet.
- Exchange the retrieved AED with the Training Unit for rescue.

Sample AED Drill Scenarios and Progressions:

Drills that resemble real life situations more accurately reflect the effectiveness and capabilities of the participants and the related procedures. The following are five separate drill levels. *The goal is to reach and consistently practice the Level 5 Drill.*

Drill (Level 1):

1. Inform selected individuals that they will be participating in an AED drill
2. Lead group to the drill location where you have placed a mannequin
3. Observe the group’s reactions and responses
4. Suggest recommendations to the rescuers
5. Run additional drills with multiple groups to further awareness and practice
6. Monitor and evaluate using Procedure Checklist and Time Line
7. Review, evaluate and discuss checklist / time line results and current procedures
8. *Communicate drill results and any procedural changes with entire staff*

Drill (Level 2):

Eliminate step #4 from Level 1: Monitor and evaluate using Procedure Checklist and Time Line.

Drill (Level 3):

Eliminate step #1 from Level 2: Monitor and evaluate using Procedure Checklist and Time Line.

Drill (Level 4):

Eliminate step #2 from Level 3 Drill: Place mannequin at drill location informing first individual near scene regarding the drill. Monitor and evaluate using Procedure Checklist and Time Line.

Drill (Level 5):

Same as Level 4 and include special situations such as water soaked clothing and chest; metals on mannequin, simulated electrical (hot) wire cord near patient, medicine patch on chest, and/or collapse on metal bleachers. Monitor and evaluate using Procedure Checklist and Time Line.

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MEDICAL EMERGENCY PRACTICE DRILL- CPR/AED USE PROCEDURE CHECKLIST & TIME LINE

Date _____ Time _____ Location _____ Time Line

Patient Collapses		
First Person arrives at the scene (may be first responder-not EMS):		start clock
- Concern for own safety considered?	YES NO	
- Patient checked for responsiveness?	YES NO	
- Internal call for help in accordance emergency protocol	YES NO	
- "Call 911" command given?	YES NO	
- Command given to obtain AED?	YES NO	
- Command given to contact First Responder?	YES NO	
Time of 911 Call		
- Individual sends someone for help?	YES NO	
- Individual instructs someone to meet EMS?	YES NO	
- Documented emergency protocols followed?	YES NO	
Time of First Responder arrives at scene		
- Concern for own safety considered?	YES NO	
- Patient checked for responsiveness?	YES NO	
- "Call 911" and AED commands confirmed?	YES NO	
Time of AED command		
- Patient responsiveness and breathing checked?	YES NO	
Time when CPR started		
- CPR performed correctly?	YES NO	
Time of AED arrival at Scene		
- Clothing properly removed?	YES NO	
- Electrodes properly placed?	YES NO	
- AED voice prompts followed? (especially do not touch patient)	YES NO	
Time of first AED shock		
- AED voice prompts continued to be followed?	YES NO	
- Patient placed in recovery position?	YES NO	
- Was AED left on?	YES NO	
- Monitoring of patient continued?	YES NO	
Time of EMS Arrival (Add six (6) minutes to time of 911 call)		
- Were details of event properly conveyed to EMS	YES NO	
- Documented emergency procedures followed?	YES NO	

SHOCK WITHIN 3 MINUTES / EMS WITHIN 7 MINUTES	EXCELLENT
SHOCK WITHIN 5 MINUTES / EMS WITHIN 8 MINUTES	FAIR
SHOCK AFTER 5 MINUTES / EMS AFTER 8 MINUTES	POOR
YES ANSWERS 20-23	HERO EXTRAORDINAIRE
YES ANSWERS 17-19	HERO
YES ANSWERS 12-17	THANKS FOR RESPONDING
YES ANSWERS 6- 12	IMPROVEMENT NEEDED
YES ANSWERS LESS THAN 6	POSSIBLE 2nd PATIENT

Facility Specific Medical Emergency Protocol Check List Addendum

	YES NO
	YES NO
	YES NO

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