



MCHENRY WESTERN LAKE COUNTY EMS SYSTEM

POLICY MANUAL

Use of Mechanical CPR Devices

Effective: 11/22/17

Revised:

Policy

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1.0 Policy

- 1.1 It shall be the policy of the McHenry Western Lake County EMS System to support the use of mechanical CPR devices in the delivery of EMS care during cardiac arrest for the adult patient defined as 18 y/o or older. (i.e. Zoll Autopulse; Defibtech Arm; Medtronic Lucas Device).
- 1.2 The Mechanical CPR Device may be applied by an EMR, EMTB, Paramedic or PHRN in the provision of patient care.

2.0 Procedures

- 2.1 The mechanical CPR device should be applied in place of manual CPR upon arrival of the device to the patient. Defibrillation should not be delayed in the application of the mechanical CPR device.
- 2.2 Cardiac arrest management should follow System protocol for cardiac arrest due to-Pulseless V-Tach/V-Fib or PEA/Asystole.
- 2.3 Transport should be considered in the pulseless V-Tach/V-Fib cardiac arrest after the administration of 2 doses of IV Epinephrine, and a single dose if IV Amiodarone with defibrillation attempts every 2 minutes per AHA ACLS guidance, if the patient remains in V-Fib. This would be approximately 10 minutes into the resuscitation event.

(CPR->DEFIB->CPR/EPI->DEFIB->CPR/Amiodarone->DEFIB->CPR/EPI->DEFIB->Consider Transport)
- 2.4 If pulseless V-Tach/V-Fib persists- Transport is indicated with CPR in progress by mechanical device and ongoing management of the pulseless V-Tach/V-Fib arrest with medications and defibrillation. It is important to communicate the ED to your transport decision early.
- 2.5 This only applies in a pulseless V-Tach/V-Fib arrest. If the patient is being treated for PEA/Asystole, the standard protocol for cardiac arrest management is to be followed, with consideration for withdrawing resuscitative measures in the prehospital setting per system guidance.

Approved: _____ EMS Medical Director

Approved: Cynthia A. Amore EMS System Coordinator