



EMS System for Metropolitan Oklahoma City and Tulsa 2017 Medical Control Board Treatment Protocols



Approved 11/9/16, Effective 2/1/17, replaces all prior versions

50-ZOLL LIFEVEST WEARABLE DEFIBRILLATOR

EMERGENCY MEDICAL RESPONDER
EMT
EMT-INTERMEDIATE 85
ADVANCED EMT
PARAMEDIC

The following will help guide you through your assessment and care of the Zoll LifeVest.

1. The LifeVest wearable cardioverter defibrillator is worn by patients at risk for sudden cardiac arrest, providing protection during their changing condition and while permanent sudden cardiac arrest risk has not been established.
2. Before delivering a treatment shock, the LifeVest tests to see if a patient is conscious by providing the patient an opportunity to press the response buttons to prevent a treatment shock. It is important that only the patient press the response button.
3. The LifeVest therapy pads release a Blue gel prior to a treatment shock to both improve shock conduction and mitigate burning. The gel should remain on the patient as long as the patient is wearing the LifeVest in case additional treatment shocks are required. If you choose to remove the LifeVest from the patient and monitor the patient with external equipment, the gel can be removed with water.
4. After the LifeVest detects a treatable arrhythmia, the time to treatment will be between 25 and 60 seconds depending on the type and rate of the arrhythmia and whether the patient presses the response buttons.
5. No one should touch the patient while a shock is delivered. The LifeVest will warn bystanders with a tactile vibration alarm, a two tone siren alert and a voice command stating "electrical shock possible, do not touch patient," or "bystanders do not interfere" before a shock is delivered.
6. The monitor should be disconnected from the electrode belt prior to delivering an external defibrillation. The garment and belt do not need to be removed.
7. Never do CPR with the LifeVest turned on. Pull the battery out of the monitor to turn the device off. The garment can be opened from the front if CPR needs to be performed.
8. The tactile vibration alert, the two tone alarm, the voice prompts, and the display on the monitor screen are part of the LifeVest consciousness test, which requires the patient to press the response buttons to avoid a shock. It is important that only the patient press the response buttons.
9. Look at the monitor display if the LifeVest is giving gong alerts. Follow the prompts on the monitor screen. No treatment will be given for gong alerts.



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10. The patient should always bring the LifeVest system, the wireless modem / battery charger, and the extra external battery to the hospital. This will allow the patient to download any stored event data from the monitor and change the battery as required.
11. If the LifeVest needs to be turned off, remove the battery from the end of the black monitor. Removing the battery will shut the system off. To turn the system back on, put the battery back in and press the response button to activate device.
12. It is best to leave a patient in their LifeVest if at all possible. Do not remove the LifeVest unless absolutely necessary.
13. This device is a patient belonging and should be treated as a patient valuable. It is a rented durable medical equipment item that must be returned to Zoll and the patient is held liable for missing components. Please keep components in a personal belonging bag and make sure the equipment is kept with the patient or a family member.

Contact Zoll LifeVest to report where the patient was transported and if the patient had alarms or was defibrillated.

1-800-543-3267



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Photo 1:

(Boxed in red) is the monitor worn in a holster around the waist and collects ECG data from the sensing electrodes which can later be sent to a doctor via modem.

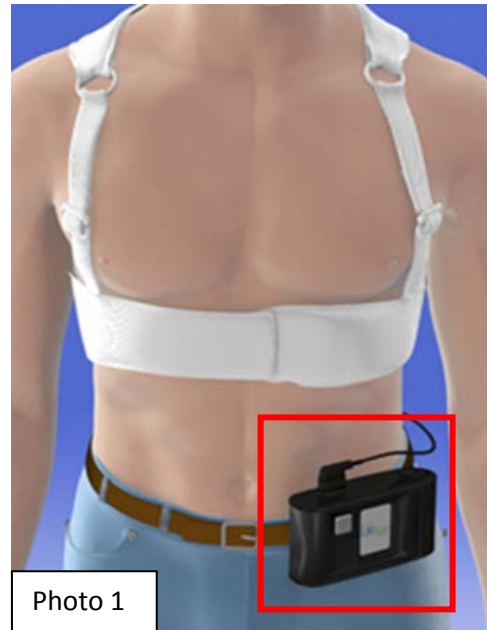


Photo 2:

(Circled in red) Dry, non-adhesive sensing electrodes on this electrode belt continuously monitor patient's heart.

(Boxed in green) These dry therapeutic electrodes will automatically deploy conductive gel prior to delivering a shock.

