

**Report Date:** 27 Jul 2011

**Summary Report for Individual Task  
081-833-0014  
Operate an Automated External Defibrillator  
Status: Approved**

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DISTRIBUTION RESTRICTION: Approved for public release; distribution is unlimited.

DESTRUCTION NOTICE: None

**Condition:** You have a patient in ventricular fibrillation or pulseless ventricular tachycardia and is receiving basic cardiac life support from a single rescuer. You will need an automated external defibrillator (AED), an airway adjunct, a bag-valve-mask (BVM) system and oxygen. You are not in a CBRN environment.

**Standard:** Operate an AED without causing further injury to the patient.

**Special Condition:** None

**Special Standards:** None

**Special Equipment:**

Task Statements

**Cue:** None

**DANGER**

None

**WARNING**

None

**CAUTION**

None

**Remarks:** None

**Notes:** None

### Performance Steps

1. Take appropriate body substance isolation (BSI) precautions.
2. Briefly question the rescuer about the arrest event.
  - a. How long has the patient been in arrest?
  - b. How long has CPR been in progress?
  - c. Do you know two man CPR?
3. Direct rescuer to stop CPR.
4. Determine need for an AED.
  - a. Is patient unresponsive to verbal and painful stimuli?
  - b. Is patient apneic?
  - c. Is patient pulseless?
5. Direct rescuer to continue CPR.
6. Turn on AED.

## WARNING

Do not attach child pads to an adult patient.

7. Attach the pads to patient's bare chest.

Note: Follow the AED manufacturer's guidelines on attaching pads to patient and turning on the machine.

  - a. The sternum pad is placed on the right upper border of the sternum on the anterior chest wall. The top edge should be just below the clavicle. This is the negative electrode.
  - b. The apex pad is placed over the left lower ribs at the anterior axillary line. This is the positive electrode.
8. Direct rescuer to stop CPR.

## WARNING

The AED will analyze any detectable rhythm. If anyone is touching the patient, the machine may not recommend a shock.

9. Ensure everyone and everything is clear of the patient.
  - a. Gives the order "All Clear".
  - b. Visually checks to ensure no one is in contact with the patient.

c. Visually checks to ensure nothing is in direct contact with the electrodes such as IV lines, monitor wires or a bed frame.

10. Initiate analysis of the rhythm.

Note: Certain AEDs have an analyze button that will need to be pressed to analyze the rhythm and others will analyze automatically. Refer to the manufacturer's instructions for the type of AED used.

## CAUTION

Do not defibrillate if anyone is touching the patient or the patient is wet (dry the patient), touching metal, (move the patient), or wearing a medication patch (remove the patch with a gloved hand).

11. Press the shock button if AED indicates shock is advised.

a. Gives the order "All Clear."

b. Visually checks to ensure no one is in direct contact with the patient.

c. Visually checks to ensure no one is in direct contact with any electrically conductive material touching the patient such as IV lines, monitor cables or a bed frame.

12. Direct resumption of CPR.

13. Gather additional information about the arrest event.

14. Confirm effectiveness of CPR.

a. Check pulse during compressions.

b. Look for rise and fall of chest during ventilations.

15. Inserts or direct insertion of a simple airway adjunct.

Note: Steps 15 and 16 can be done at any time during the task.

16. Connect oxygen to BVM and turn flow meter to 15 lpm.

17. Ventilate or direct assistant to resume ventilations on the patient.

18. Ensure CPR continues without unnecessary interruptions.

19. Reanalyze rhythm after a full cycle of CPR, (approximately 2 minutes), ensure patient is clear.

20. Repeat defibrillator steps 8-12.

21. Transport the patient to a higher level of medical care.

Note: Verbalize transportation of the patient.

(Asterisks indicates a leader performance step.)

**Evaluation Preparation:** None

PERFORMANCE MEASURES	GO	NO-GO	N/A
1. Took body substance isolation precautions.			
2. Questioned rescuer briefly about arrest event.			
3. Directed rescuer to stop CPR.			
4. Determined need for AED.			
a. Determined patient wasn't breathing.			
b. Determined pulselessness.			
5. Directed rescuer to resume CPR.			
6. Turned on AED power.			
7. Attached pads to patient's bare chest.			
a. Sternum pad applied to right side just below clavicle.			
b. Apex pad applied to lower left ribs.			
8. Directed rescuer to stop CPR.			
9. Ensured patient was clear.			
10. Analyzed rhythm.			
11. Delivered shock ensuring patient was clear.			
12. Directed resumption of CPR.			
13. Gathered additional information about arrest event.			
14. Confirmed effectiveness of CPR.			
a. Checked carotid pulse during compressions.			
b. Looked for rise and fall of the chest during ventilations.			
15. Inserted or directed insertion of an airway adjunct.			
16. Connected oxygen to BVM and adjusted flow meter to 15 lpm to ensure high concentration of oxygen delivered to patient.			
17. Resumed ventilation or directed ventilation of patient.			
18. Ensured CPR continued without unnecessary interruptions.			
19. Reanalyzed patient rhythm after full cycle of CPR, (approximately 2 minutes), ensuring patient is clear.			
20. Repeated defibrillator sequence steps.			
21. Transported (verbalized) patient.			

**Supporting Reference(s):**

Step Number	Reference ID	Reference Name	Required	Primary
	0-13-119265-5	EMT Complete: A Basic Worktext	No	No

**Environment:** Environmental protection is not just the law but the right thing to do. It is a continual process and starts with deliberate planning. Always be alert to ways to protect our environment during training and missions. In doing so, you will contribute to the sustainment of our training resources while protecting people and the environment from harmful effects. Refer to FM 3-34.5 Environmental Considerations and GTA 05-08-002 ENVIRONMENTAL-RELATED RISK ASSESSMENT.

**Safety:** In a training environment, leaders must perform a risk assessment in accordance with FM 5-19, Composite Risk Management. Leaders will complete a DA Form 7566 COMPOSITE RISK MANAGEMENT WORKSHEET during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, NBC Protection, FM 3-11.5, CBRN Decontamination.

**Prerequisite Individual Tasks :** None

**Supporting Individual Tasks :** None

**Supported Individual Tasks :** None

**Supported Collective Tasks :**

<b>Task Number</b>	<b>Title</b>	<b>Proponent</b>	<b>Status</b>
N/A	N/A	Not Selected	Obsolete