



**REGION 11  
CHICAGO EMS SYSTEM  
PROCEDURE**

Title: AED Pro Defibrillator – BLS/ALS

Section: Cardiac Management

Approved: EMS Medical Directors Consortium

Effective: March 6, 2025

## **AED PRO DEFIBRILLATOR – BLS/ALS**

### INDICATIONS

- Unresponsive, not breathing normally, no pulse – AED Mode (BLS)
- Unresponsive, not breathing normally, no pulse – Manual Mode (ALS)
- Conscious and unconscious patients of all ages for the purpose of ECG rhythm recognition and heart rate monitoring – ECG Mode (ALS)

### CONTRAINDICATIONS

None

### EQUIPMENT

- AED Pro Defibrillator
- Zoll CPR Stat Padz for adults or children over 8 years old or 25 kg (55 lbs.)
- Zoll Pedi-padz II for children less than 8 years old or 25 kg (55 lbs.)
- 3 wire monitoring cable with electrodes (for ALS Special Units or Special Events)
- Razor

### PROCEDURE FOR BLS RESPONDERS – AED MODE

1. Apply personal protective equipment.
2. Verify patient is in cardiac arrest (unconscious, not breathing normally, no pulse).
3. Begin CPR and ICCA.
4. Turn device on and listen to voice prompts.
5. Prepare the patient for defibrillation pad placement. If necessary, clean and dry skin or remove excess chest hair with razor.
6. Select proper defibrillator pad (adult or pediatric) based on patient age and weight. Open the package and remove the protective liner from the electrodes.
7. Apply pads in the Anterior-Posterior position. First, separate CPR device (puck) from back pad. Apply the back pad to the left of the spine just below the scapula at the heart level (as shown in the picture below). Apply CPR device aligned with the sternal notch. Apply the apex/front electrode over the cardiac apex with the nipple under the adhesive area in a male. Position under breast in a female patient. For pediatric pads, attach as shown in the picture below.
8. Pads should not be placed directly over implanted devices (cardiac defibrillators or pacemakers).



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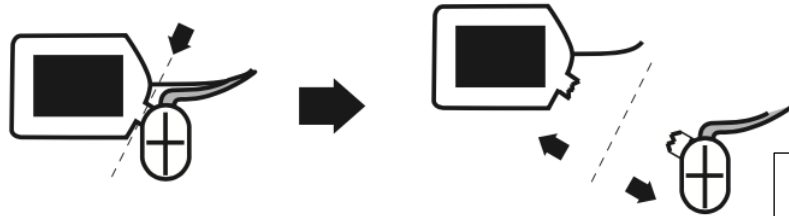
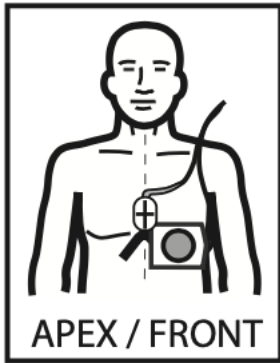
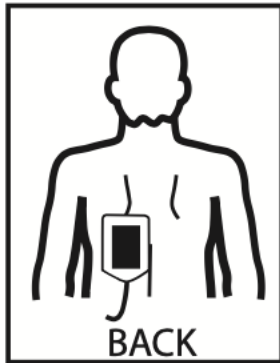
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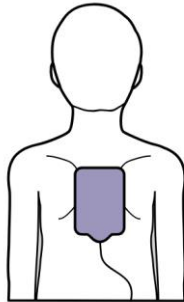
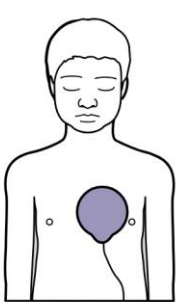
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**Adult CPR Stat Padz Placement in Anterior-Posterior Position**



CPR Device = puck

**Pediatric AED Pads (Pedi-padz II) Placement**



9. Connect the pads to the defibrillator.
10. Follow the screen messages and voice prompts provided by the defibrillator.
11. When the patient is connected to the defibrillator, the voice prompt will advise to stand clear of the patient during ECG analysis.



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12. If the defibrillator detects a shockable rhythm, it will prepare to shock and charge to the joule setting for the shock number.
13. The voice prompt will state when charging is complete and the shock button will flash.
14. Verbalize “all clear” and visually ensure that all individuals are clear of the patient, stretcher and any equipment connected to the patient.
15. Press the shock button to discharge the defibrillator. If the shock button is not pressed within 30 seconds, the defibrillator disarms the shock button.
16. Immediately resume CPR.
17. If the defibrillator detects a non-shockable rhythm, the voice prompt will advise that no shock is advised and CPR should be resumed.
18. Continue CPR and analyze rhythm every two minutes.

**PROCEDURE FOR ALS RESPONDERS ON SPECIAL UNITS ONLY – MANUAL MODE**

1. Convert to manual mode by pressing and hold both (unlabeled) softkeys simultaneously for three seconds. Press the “MANUAL” softkey to enter manual mode. The ECG tracing and Heart Rate Indicator will appear on the screen.
2. If the displayed ECG rhythm appears shockable, press “CHARGE” to initiate charging of the defibrillator. The screen will indicate that the defibrillator is charging and a charge tone will sound.
3. Verbalize “all clear” and visually ensure that all individuals are clear of the patient, stretcher and any equipment connected to the patient.
4. When the charge is complete, press the flashing shock button to delivery energy to the patient.
5. After delivering a shock, the energy for each subsequent shock is automatically selected based on the energy level configurations (200J, 200J, 200J).
6. To remove an unwanted shock at any time, select “DISARM”.
7. To return to automatic mode after manual override, turn the unit off and then back on again.

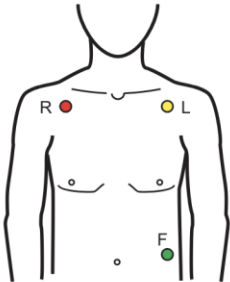
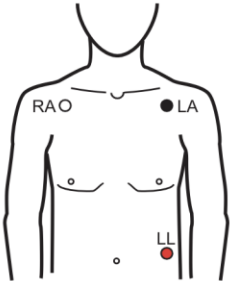
**PROCEDURE FOR ALS RESPONDERS ON SPECIAL UNITS ONLY – ECG MODE**

1. Connect the ECG cable.
2. Apply ECG electrodes to the patient’s chest.



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**ECG Electrode Labeling and Placement**

IEC <sup>a</sup> Label	AHA <sup>b</sup> Label	Placement	
R (red)	RA (white)	Patient's right midclavicular line, directly below clavicle.	<div> <p>3-lead configuration (IEC)</p>  </div>
L (yellow)	LA (black)	Patient's left midclavicular line, directly below clavicle.	
F (green)	LL (red)	Between sixth and seventh intercostal space on the patient's left midclavicular line.	
			<div> <p>3-lead configuration (AHA)</p>  </div>

a. International Electrotechnical Commission  
b. American Heart Association

- After the ECG electrodes are connected, the defibrillator displays the patient's heart rhythm and heart rate.
- While in ECG mode, the defibrillator's shock capability is disabled; however, the defibrillator continues to evaluate the patient's ECG for a potentially shockable rhythm. The patient's status should be reassessed including presence of a pulse.
- If a shockable rhythm is detected, the defibrillator will prompt to connect the defibrillation pads.
- Remove the ECG cable and connect the defibrillation pads to the defibrillator.
- Apply the defibrillation pads to the patient's chest keeping them at least 2.5 cm (1 inch) away from the ECG electrodes. If necessary, remove the ECG electrodes.
- Defibrillate as indicated and begin ICCA.

**MANAGING DEFIBRILLATOR DATA**

- AED Pro data can be uploaded to Zoll Online RescueNet.