

MANAGE A CARDIAC ARREST (AUTOMATED EXTERNAL DEFIBRILLATOR)

For use of this form see TC 8-800; the proponent agency is TRADOC.

TABLES: VI

REFERENCES: STP 8-68W13-SM-TG, Tasks: 081-831-0046, Administer External Chest Compressions; 081-831-0048, Perform Rescue Breathing; 081-833-0016, Insert an Oropharyngeal Airway (J-Tube); 081-833-0017, Ventilate a Patient with a Bag-Valve-Mask System; 081-833-0018, Set up a D-Sized Oxygen Tank; 081-833-0142, Insert a Nasopharyngeal Airway; 081-833-0158, Administer Oxygen; 081-833-3027, Manage Cardiac Arrest using an Automated External Defibrillator; Emergency Care and Transportation of the Sick and Wounded.

1. Soldier (Last Name, First Name, MI)

2. Date (YYYYMMDD)

CONDITIONS: Given a casualty in cardiac arrest in the prehospital environment. You are not in a CBRN environment. The automated external defibrillator (AED) enables the rescuer to administer an electrical shock to the heart when needed. This device is specially programmed to recognize rhythms that require defibrillation to correct most life-threatening arrhythmias found in the prehospital phase of emergency care.

STANDARDS: Perform all measures IAW Emergency Care and Transportation of the Sick and Injured. You must score at least 70% (19 of 26 steps) and not miss any critical (*) elements on the skill sheet.

SAFETY:

- o Risk Assessment: Low. All bodily fluids should be considered potentially infectious; always observe body substance isolation (BSI)
- o Precautions: Wear gloves and eye protection as a minimal standard of protection.
- o Environmental: None.

NOTE: Soldier Medics must be observed. (Evaluator to Soldier Medic ratio is 1:6).

TEST SCENARIO:

While responding to an emergency call, you encounter a casualty demonstrating the clinical signs of cardiac arrest. According to the combat lifesaver, the casualty collapsed about 5 minutes ago; CPR was initiated immediately. As your assistant takes over CPR, you must set up an AED, attach the defibrillator pads, initiate rhythm analysis, and, as appropriate, administer shocks to the casualty to restore an effective cardiac rhythm; you have been provided the necessary medical equipment.

3. Evaluator's Comments and After-Test Recommendations:

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**MANAGE A CARDIAC ARREST (AUTOMATED EXTERNAL DEFIBRILLATOR)
GRADING SHEET**

TASK	COMPLETED					
	1ST		2ND		3RD	
	P	F	P	F	P	F
4.						
a. * Took/verbalized body substance isolation (BSI) precautions.	<input type="checkbox"/>					
b. Briefly questioned the combat lifesaver about the arrest events.	<input type="checkbox"/>					
c. Performed an initial assessment to determine responsiveness.	<input type="checkbox"/>					
d. * Briefly stopped CPR and verified pulselessness and apnea. EVALUATOR: State "no pulse" to the Soldier Medic.	<input type="checkbox"/>					
e. Directed the assistant to resume CPR.	<input type="checkbox"/>					
f. Placed the AED near the casualty's head.	<input type="checkbox"/>					
g. Turned on the power.	<input type="checkbox"/>					
h. * Attached the defibrillator pads to the chest. EVALUATOR: The Soldier Medic may remove clothing as necessary to perform.	<input type="checkbox"/>					
i. Directed the assistant to stop CPR.	<input type="checkbox"/>					
j. * Stated aloud "Clear the patient" and ensured no one was in contact with the casualty.	<input type="checkbox"/>					
k. Pushed the "analyze" button and waited for the AED to analyze whether a shockable rhythm is present.	<input type="checkbox"/>					
l. * At the AED prompt, again stated aloud "Clear the patient" ensuring no one was in contact with the casualty and initiated shock (up to 3 stacked shocks). EVALUATOR: The Soldier Medic must "clear the patient" prior to each shock being delivered.	<input type="checkbox"/>					
m. * Reanalyzed the rhythm.	<input type="checkbox"/>					
n. If the AED advised a shock, delivered a second set of stacked shocks.	<input type="checkbox"/>					
o. * Verified absence of spontaneous pulse and breathing. EVALUATOR: State "no pulse" to the Soldier Medic. The Soldier Medic must transition to the second part of the evaluation.	<input type="checkbox"/>					
p. Directed the assistant to resume CPR.	<input type="checkbox"/>					
q. Gathered additional information about the arrest event.	<input type="checkbox"/>					
r. Confirmed effectiveness of CPR.	<input type="checkbox"/>					
s. Inserted an OPA or NPA.	<input type="checkbox"/>					
t. * Using a BVM, ventilated/directed ventilation of the casualty; ensured high concentration of oxygen was delivered.	<input type="checkbox"/>					
u. Ensured CPR continued without unnecessary/prolonged interruption; reconfirmed effectiveness of CPR.	<input type="checkbox"/>					
v. * Reevaluated casualty to verify pulselessness and apnea. EVALUATOR: State "no pulse" to the Soldier Medic.	<input type="checkbox"/>					
w. Repeated AED sequence.	<input type="checkbox"/>					
x. Verbalized transportation of the casualty.	<input type="checkbox"/>					
y. Documented the procedure on the appropriate medical form.	<input type="checkbox"/>					
z. * Did not cause further injury to the casualty.	<input type="checkbox"/>					
* Critical Elements						

**MANAGE A CARDIAC ARREST (AUTOMATED EXTERNAL DEFIBRILLATOR)
EVALUATOR GUIDELINES AND INSTRUCTIONS**

Inform the Soldier Medic of the CONDITIONS and STANDARDS as stated on this form.

Provide an optional scenario, if appropriate. This scenario should reinforce the unique or particular needs of the unit.

Allow sufficient time for the Soldier Medic to extract information from the scenario.

Provide each evaluator with the grading sheet.

Ensure the Soldier Medic has all required materials.

Explain how the exercise is graded.

Resource Requirements:

Evaluator: Grading sheet and applicable scenario.

Soldier Medic: Applicable scenario, AED, BVM device, oxygen tank with regulator and oxygen tubing, OPA and/or NPA.

Additional Scoring Guidelines:

Attached the defibrillator pads to the chest.

- One just to the right of the sternum, just below the clavicle.
- The other on the left chest with the top of the pad 2-3 inches below the axilla.

Confirmed effectiveness of CPR.

- Proper depth of compressions.
- Proper rate and depth of ventilations.