

NWT Clinical Practice Information Notice

UPON RECEIPT: (1) PLEASE FOLLOW THE DIRECTIONS BELOW
 (2) FILE THIS NOTICE IN SECTION C, CLINICAL PRACTICE INFORMATION BINDER FOR FUTURE REFERENCE

The following clinical practice has been approved for use in the Northwest Territories Health and Social Services system, and has been distributed to:

- Hospitals
 Community Health Centers
 Public Health Units
 Doctors' Offices
 Social Services Offices
 Other: _____

The information contained in this document is a Departmental:

- Policy
 Standard
 Protocol
 Procedure
 Guidelines

Title: Defibrillator Program in Community Health Centres

Effective Date: May 30, 2008

Statement of approved clinical practice:

The attached Defibrillator Program package for Community Health Centres, dated April 2008, is recommended for use by the NWT Pharmacy and Therapeutics Committee as guidance for implementation of the defibrillator program in the Health Centres.

- The defibrillator program package consists of four (4) components:
 - Quality Assurance Checklists for the Lifepak-20 and Lifepak-CR Plus
 - Cleaning of the Lifepak-20 and Lifepak-CR Plus
 - Maintenance of the Lifepak-20 and Lifepak-CR Plus
 - Utilization Review report for Lifepak-20 and Lifepak-CR Plus
- An electronic copy of these guidelines is also available on the Department of Health and Social Services Public Website at: <http://hlthss.gov.nt.ca> Once you have accessed the site, click on "Publications" and then "Manuals". The Clinical Practice Information Notice and the *Defibrillator Program package for CHCs* can be found in the *NWT Clinical Practice Information* manual.

Attachments:

- NWT Quality Assurance Checklists for Lifepak-20 and Lifepak-CR Plus
- Cleaning of the Lifepak-20 and Lifepak-CR Plus Guidelines
- Maintenance of the Lifepak-20 and Lifepak-CR Plus Standard
- Utilization Review report for Lifepak-20 and Lifepak-CR Plus Guidelines

This clinical practice is approved.


 _____ 02 June 2008
 (signature & date)

- Assistant Deputy Minister
 Chief Medical Officer of Health
 Director, Child & Family Services
 Director, Adoptions

LIFEPAK -20 Defibrillator
Quality Assurance Checklist

Facility _____

STANDARD	RECOMMENDED CORRECTIVE ACTION	DATE									
Perform quality assurance checks monthly or as required											
1. Examine the case, connector, cables, paddle surfaces (if applicable) well for: a) Foreign substances b) Damage or cracks or pitting	Clean the device Contact service personnel										
2. Inspect power source for: a) AC power connector plugged into back of unit and wall AC power source; LED is lit b) Broken, loose, or worn power cable	Contact service personnel Replace damaged or broken parts										
3. Check Combo-pads and ECG electrodes for a) Expiry date _____ b) Spare combo-pads and electrodes available	Replace if past date Obtain spare electrodes and combo-pads										
4. Disconnect the device from AC power, press ON and look for: a) SELF-TEST messages b) Momentary illumination of each LED and all LCD segments. c) LOW BATTERY/CONNECT TO AC POWER messages d) SERVICE INDICATOR message e) Perform user test	If absent, contact service personnel If absent, contact service personnel Connect to AC power. Contact service personnel. If test/check fails, repeat. If fails twice, contact service personnel.										
5. Reconnect the device to AC power.											
6. Check accessory kit a) 2 extra sets of combo-pads b) 2 extra sets of electrodes (if applicable) c) a razor d) alcohol wipes	Replace items as required.										
7. Check ECG printer for: a) Adequate paper supply b) Ability to print.	Replace if necessary If not working, contact service personnel.										
INITIALS:											

LIFEPAK-20 DEFIBRILLATOR –CLEANING

- The LIFEPAK-20 defibrillator should be cleaned after use and as needed.
- The LIFEPAK-20 defibrillator case, including the monitor, cables, and accessories, should be cleaned with a damp sponge or cloth.
- Recommended cleaning agents include:
 - Isopropyl alcohol
 - Mild soap and water
- Do not use bleach or abrasive cleaners.
- The defibrillator and accessories cannot be autoclaved.
- Do not remove the combo-pads from the package. Dispose of any used combi-pads.
- Do not remove the electrodes from the package. Dispose of any used electrodes.

Reference: Medtronic Lifepak-20 Operating Instructions Manual.

LIFEPAK-20 DEFIBRILLATOR MAINTENANCE

It is essential that every operator become familiar with the defibrillator, necessary accessories, and the accompanying manuals.

The LIFEPAK-20 defibrillator performs an automatic self test every time it is turned on. Refer to the operating manual of the LIFEPAK-20 defibrillator for further information.

The defibrillator should be inspected at a minimum monthly or as per the HSSA policy and after each use. See the Quality Assurance Checklist for details. Additionally, each time the defibrillator is used, check for:

1. visible signs of damage or problems
2. “battery” or “service indicator” displays
3. accessibility of necessary accessories and supplies.

An **USER TEST** must be done monthly or as per the HSSA policy. Press **OPTIONS** and select **USER TEST**. When selected, the user test automatically performs the following tasks:

1. Turns itself on
2. Performs self-test
3. Charges to a low energy level and then discharges through a test load
4. Prints the results
5. Turns itself off.

*Note: The test plug must be attached to the defibrillator cables before starting the self-test.

Perform the user test with the defibrillator unplugged from AC power.

The **USER TEST** print should be retained for quality assurance.

A kit or bag should be kept in close proximity to the defibrillator with the following supplies:

1. 2 of combo-pads (stored in ziplock bag)
2. 2 sets of 3 electrodes (stored in ziplock bag)
3. a razor
4. 4x4 gauze pads (to dry the chest or remove transdermal medications)
5. alcohol wipes (remember the alcohol has to be dried off the chest).

The completed Quality Assurance checklist is to be retained in the Health Centre, and a copy submitted with the month-end reports to the HSSA.

**Community Health Centre
Defibrillator/Monitor Utilization Review**



DO NOT INCLUDE PATIENT NAME OR IDENTIFIERS ON THIS FORM

Community:		Date of use:	
Patient age: _____ <input type="checkbox"/> years <input type="checkbox"/> months		Gender: <input type="checkbox"/> M <input type="checkbox"/> F	
Device used for: <input type="checkbox"/> monitoring only		<input type="checkbox"/> defibrillation <input type="checkbox"/> external pacing	
Reason for use: <input type="checkbox"/> no pulse		<input type="checkbox"/> irregular pulse <input type="checkbox"/> fast/slow pulse	
<input type="checkbox"/> chest pain		<input type="checkbox"/> trauma <input type="checkbox"/> altered LOC	
<input type="checkbox"/> other reason:			
Mode used: <input type="checkbox"/> manual <input type="checkbox"/> automatic		Initial cardiac rhythm:	
Nurse trained in ACLS: <input type="checkbox"/> Y <input type="checkbox"/> N		Physician consulted: <input type="checkbox"/> Y <input type="checkbox"/> N	
ACLS algorithms used? <input type="checkbox"/> Y <input type="checkbox"/> N		Equipment performed as expected? <input type="checkbox"/> Y <input type="checkbox"/> N	
Patient disposition: <input type="checkbox"/> home		<input type="checkbox"/> medivac <input type="checkbox"/> deceased	
Other comments:			
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This form is designed to track the usage of defibrillators/monitors in health centres in the NWT.
Please complete for each use of the device.

Please FAX a copy to:
NWT Pharmacy and Therapeutics Committee
Fax (867) 873-0197

Forward the original to your manager with your monthly report.

LIFEPAK -CR PLUS AED
Quality Assurance Checklist

Facility _____

STANDARD	RECOMMENDED CORRECTIVE ACTION	DATE									
Perform quality assurance checks monthly and as necessary.											
1.Examine the AED case, connector, and battery well for: a) Foreign substances b) Damage or cracks	Clean the AED Contact service personnel										
2. Check readiness display for: a) OK indicator b) CHARGE-PAK indicator c) ATTENTION indicator d) WRENCH indicator	None Replace Kit that contains CHARGE-PAK (battery) and QUIK-PAK (electrode packet). Contact service personnel. Contact service personnel.										
3. Check REPLACEMENT KIT (CHARGE-PAK Battery and QUIK-PAK electrode packet) a) User date by _____ b) Spare replacement kit available	Replace if past date Obtain spare battery/electrode packet										
4. Check accessory kit for: a) 2 Replacement Kit packages (Charge-Pak battery and Quik-Pak electrodes) b) a razor c) 4x4 gauzes d) alcohol wipes	Replace items as required										
5..Check Resuscitation kit for : a) disposable latex gloves b) face masks – Small, medium, large	Replace items as required										
INITIALS:											

LIFEPAK-CR PLUS AED MAINTENANCE

It is essential that every operator become familiar with the AED, necessary accessories, and the accompanying manuals.

The LIFEPAK-CR PLUS AED performs an automatic self test every time it is turned on. The electrode indicators briefly flash during the test. If the automatic self-test detects a condition that requires attention, the OK symbol in the readiness display will fade and either the CHARGE-PAK symbol, the ATTENTION symbol, or the WRENCH symbol will appear, depending on the type of condition detected. Refer to the operating manual of the LIFEPAK-CR PLUS AED for further information.

The AED should be inspected at a minimum monthly or as per the HHS policy and after each use. See the Quality Assurance Form. Additionally, each time the AED is used, check for:

1. visible signs of damage or problems
2. OK symbol is visible in the readiness display
3. check the Use By date on the electrode packet
4. accessibility of necessary accessories and supplies

A kit or bag should be kept in close proximity to the defibrillator with the following supplies:

1. 2 Replacement Kits (Quik-Pak electrodes and Charge-Pak battery)
2. a razor
3. 4x4 gauze pads (to dry the chest or remove transdermal medications)
4. alcohol wipes (remember the alcohol has to be dried off the chest).

The completed Quality Assurance checklist is to be submitted with month-end reports to the appropriate Health Centre.

LIFEPAK-CR PLUS AED CLEANING

- The LIFEPAK-CR PLUS AED should be cleaned after use and as needed.
- The LIFEPACK-CR PLUS AED case including the readiness display and crevices should be cleaned with a damp cloth.
- Recommended cleaning agents include:
 - Isopropyl alcohol
 - Mild soap and water
- Do not use bleach or abrasive cleansers.
- Do not remove the electrode pads or the battery from the package. Dispose of any used electrode pads and batteries.

Reference: Medtronic Lifepak-CR Plus Operating Instruction Manual

Community AED Utilization Review



DO NOT INCLUDE PATIENT NAME OR IDENTIFIERS ON THIS FORM

Community:	Date of use:
Patient age in years:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F
Shock Delivered? <input type="checkbox"/> yes <input type="checkbox"/> no	Number of shocks:
AED Used by: <input type="checkbox"/> nurse <input type="checkbox"/> physician	<input type="checkbox"/> CHR/CHW/ lay dispenser <input type="checkbox"/> other
Patient disposition: <input type="checkbox"/> home	<input type="checkbox"/> medivac <input type="checkbox"/> deceased
Other comments:	

This form is designed to track the usage of AEDs in the NWT.
Please complete for each use of the device.

Please FAX a copy to:
NWT Pharmacy and Therapeutics Committee
Fax (867) 873-0197

Forward the original to the health centre or to the nurse for your community.