Standards Procedure (Skill)

Double Sequential External Defibrillation

Clinical Indications:

- Any patient who has persisted in ventricular fibrillation/tachycardia, without even transient interruption of fibrillation, despite at least 5 external countershocks.
- At least one of the five shocks was delivered using different pads applied so as to produce a different current vector than the first set and all other indicated treatment modalities have been implemented.
- Two system cleared paramedics have verified the persistence of the arrhythmia.

Procedure:

1. Ensure quality of CPR is not compromised during prolonged efforts.
2. Prepare the sites for attachment of an additional set of external defibrillation pads by drying the sites and minimizing interference of hair or other obstacles to good pad adhesion.
3. Apply a new set of external defibrillation pads adjacent to, but not touching the pad set currently in use.
4. Assure that controls for the second cardiac monitor are accessible to the code commander.
5. The code commander will verify that the resuscitation protocol has been fully executed up to this point.
6. On rhythm check, the code commander will confirm the rhythm.
   a. If a shockable rhythm is detected, CPR will resume immediately. The code commander will verify that both cardiac monitor/defibrillators are attached to the patient, that all pads are well adhered, and direct the simultaneous charging of both attached cardiac monitors. When both monitors are charged to maximum energy and all persons are clear, the code commander will push both shock buttons as synchronously as possible. CPR will resume as appropriate.
   b. If a non-shockable rhythm is present care will resume according to the appropriate protocol.

Certification Requirements:

- Maintain knowledge of the indications, contraindications, technique, and possible complications of the procedure. Assessment of this knowledge may be accomplished via quality assurance mechanisms, classroom demonstrations, skills stations, or other mechanisms as deemed appropriate by the local EMS System.