

## **Suggestions for skills assessment** with the **LIFEPAK® 35** Monitor/Defibrillator

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No	niny	asive	pacing

Down arrows or dial on the touchscreen to begin

pacing (default setting is zero mA).

Name:	Unit:				
Reviewer:			Date:		
This skills checklist assesses a trained user's ability to perform add noninall information and skills required to operate the device safely and effect by a qualified instructor. Refer to the LIFEPAK 35 monitor/defibrillator O cautions, and potential adverse events. CAPITAL LETTERS indicate label "Press" is used when referring to softkeys on the touchscreen indicated b	ively. This checkli perating Instructions, screen messages	st is designed to be ons for complete di	completed after receiving or viewing in-service training rections for use, indications, contraindications, warnings		
Assessment criteria	Complete	Incomplete	Comments		
1. Pushes the <b>POWER</b> button.					
2. Connects the ECG cable to the monitor, attaches ECG wires to the simulator.			Instructor to choose bradycardic rhythm on the simulator. The participant chooses the lead with large QRS complexes.		
3. Describes skin prep for the pads and electrodes according to local protocol or per LIFEPAK 35 Operating Instructions.			For tips see Stryker "Minimizing ECG Artifact Pocket Guide."		
4. Applies therapy electrodes according to local protocol or Operating Instructions.					
5. Connects the therapy cable to the simulator.					
6. Presses <b>THERAPY.</b>					
7. Presses <b>PACING.</b>			If ECG leads are not attached, channel 1 will default to lead II and a prompt will appear directing the user to place active ECG waveform in this channel.		
8. Presses the blue question icon to view abbreviated noninvasive pacing instructions.					
9. Confirms that the device is in <b>DEMAND</b> mode, shown in the top therapy message line.			To change to non-demand, press the settings button and select NON-DEMAND		
10. Confirms that triangle sense markers appear near the middle of each intrinsic QRS.			Sensing markers appear in demand mode, but do not in non-demand mode.  Sensing markers only appear in Channel 1 ECG.		
<ul> <li>11. If sense markers are inconsistent or in the wrong locations, presses the ECG lead/size tab to:</li> <li>Change to an ECG lead with higher amplitudes to improve sensing.</li> <li>Changes the ECG SIZE to improve sensing.</li> </ul>					
12. Adjusts the pacing <b>RATE</b> by pressing the Up/Down arrows or dial on the touchscreen.					
13. Adjusts the pacing <b>CURRENT</b> by pressing the Up/					

14. Increases current until electrical capture occurs (wide ORS and tall T waves after each pacing spike).		
15. Recognized dashes (), not HR, are displayed in Channel 1.	Use the SpO2 displayed pulse rate.	
16. Verbalizes ways to confirm mechanical capture by palpating pulse, checking blood pressure, or considers use of SpO <sup>2</sup> pleth waveform or EtCO <sup>2</sup> values.	Large ECG artifact from noninvasive pacing can cause inaccurate HR calculations.	
17. Presses and holds <b>PAUSE</b> to slow programmed pacing rate to determine underlying intrinsic rhythm.	Pacing will occur at 25% of the programmed pacing rate for 15 seconds.	
18. Presses the collapse button or <b>HOME</b> to view all monitoring parameters during active pacing.		
19. Confirms pacing settings and status in the message at the top of the screen. Returns to the pacing screen by pressing PACING at the bottom of the screen.		
20. Troubleshoots displayed alerts and recognizes pacing continues in non-demand mode with continued visible pacer spikes.	Instructor to disconnect any limb lead from simulator.	
21. Stops pacing by using one of these options:  • Press STOP  • Reduce CURRENT to zero.		



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