NOR-CAL EMS	05-0911	Skills: Adult Synchronized Cardioversion/Defibrillation Annual Competency

Nor-Cal EMS Policy & Procedure Manual	BLS/ALS Protocols
Effective Date: 10/01/2020	Next Revision: 10/01/2023
Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR	SIGNATURE ON FILE

Authority: Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9.

Provider Name: Provider's Signature:	Cert #: Provider Agency:
Validator's Name: Validator's Signature:	Date:

PERFORMANCE CRITERIA	MET (Initials)	NOT MET (Initials)	COMMENTS
1. Verbalizes/demonstrates use of appropriate PPE.			
2. States indications and contraindications for synchronized cardioversion/defibrillation: Unstable tachydysrhythmia causing any of the following: hypotension, acutely altered mental status, signs of shock, ischemic chest discomfort, and acute heart failure. If the patient is pulseless then the patient requires defibrillation (unsynchronized cardioversion).			
3. Recognizes the rhythm on the monitor requiring cardioversion.			
4. Contraindications: Stable tachycardia, normal sinus rhythm, bradycardia, ventricular tachycardia (pulseless), ventricular fibrillation.			
5. States to consider premedicate/sedate/pain management.			
6. Ensure the patient is attached properly to a monitor/defibrillator capable of synchronized cardioversion. Correctly applies the hands-free defibrillation electrodes.			
7. Have all the equipment prepared for unsynchronized cardioversion/defibrillation if the patient fails synchronized cardioversion and the condition worsens.			
8. Turns on defibrillator and attaches monitor leads to the patient.			
9. Synchronizes the patient's rhythm by pushing the "sync" mode button; thereby placing the monitor in synchronized cardioversion mode.			
10. Identifies markers on the R waves indicating sync mode. If needed, adjusts the R wave gain until sync markers occur with each QRS.			
11. Selects the appropriate energy level A. Narrow regular: 50 – 100 J. B. Narrow irregular: 120 – 200 J. C. Wide regular: 100 J.			
12. Charges Defibrillator.			

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13. Announces “clear,” assuring that others and self are clear.			
14. Holds pressure on the “shock” button until the defibrillator discharges.			
15. Stay clear of the patient until you are sure the energy has been delivered. It may take a moment for “SYNC” to occur if substantial delay or patient deteriorates defibrillate.			
16. **Resets the sync mode after each synchronized cardioversion, because most defibrillators default back to unsynchronized mode** (this default to unsynchronized mode is to allow an immediate defibrillation if the cardioversion produces VF).			
17. Appropriately recognizes the cardiac rhythm on the monitor.			
18. Note the patient response and perform immediate unsynchronized/defibrillation if the patient’s rhythm has deteriorated into ventricular tachycardia/ventricular fibrillation.			
19. Repeats the cardioversion steps at least once, increasing the energy dose in a stepwise manner.			
20. The AEMT-OS or paramedic is advised that the patient has become pulseless and apneic.			
21. Recognizes the rhythm on the monitor requiring defibrillation.			
22. Reassess the patient to confirm absence of pulses.			
23. Turns off the “sync” button and selects the appropriate defibrillation energy dose based upon manufacturer recommendation. If unknown then chooses 200 J.			
24. Charges the defibrillator.			
25. Verbally states “clear” and visually checks that other rescuers are clear.			
26. Delivers defibrillation.			
27. Initiates High performance CPR.			
28. Reassesses patient and cardiac rhythm confirming patient remains pulseless and, in a rhythm, requiring defibrillation.			
29. Repeats defibrillation steps at least once utilizing the appropriate subsequent energy dose based on the manufacturer recommendation.			