NWC EMSS Skill Performance Record Application & Use LUCAS® CPR DEVICE

Name:	1 st attempt:	Pass	□ Repeat
Date:	2 nd attempt:	Pass	Repeat

The NWC EMSS requires that LUCAS® External Cardiac Compressor only be used by: EMS personnel who have received training and have been competencied in how to use LUCAS®.

Performance standard 0 Step omitted (or leave blank) 1 Not yet competent: Unsuccessful; required critical or excess prompting; marginal or inconsistent technique 2 Successful; competent with correct timing, sequence & technique , no prompting necessary	Attempt 1 rating	Attempt 2 rating
*States indication : Intended for use as an adjunct to manual CPR on adult patients who have cardiac arrest in cases when effective manual CPR is not possible (e.g., during patient transport or extended CPR when fatigue may prohibit the delivery of effective/ consistent compressions to the victim, or when insufficient EMS personnel are available to provide effective CPR). Always follow local and/or international guidelines for CPR when you use the LUCAS Chest Compression System.		
 *States CONTRAINDICATIONS: Do NOT use LUCAS® device in the following cases: Impossible to position the LUCAS® device safely or correctly on patient's chest. Patient too small: If LUCAS® alerts with 3 fast signals when lowering Suction Cup and you cannot enter the PAUSE or ACTIVE modes. Patient too large: Cannot lock Upper Part to back plate without compressing pt's chest. Patient is a child Pregnant woman: Must lie 10-15° to side to prevent vena cava syndrome after 20 wks. No indication that chest compressions are likely to help patient (Triple zero) Valid POLST form with DNR marked 		
 States possible SIDE EFFECTS of using the device Rib fractures and other injuries are common but acceptable consequences of CPR. Assess patients after resuscitation for resuscitation-related injuries. Skin abrasions, bruising and chest soreness common after Lucas use 		
*Explains meaning of all User Control Panel keys ON/OFF: Device will power up/ power down when this key is pushed for 1 second. When device powers up, an audible signal sequence is heard and device automatically does a self-test. When self-test is complete, the audible signal stops and a green LED light beside the ADJUST key illuminates. This takes ~3 seconds.		
 ADJUST: Used to adjust position of the Suction Cup. When pushed, you can manually move Suction Cup up or down. To set Start Position, manually push Suction Cup down onto chest. To lift the Suction Cup, manually pull it up. Device can be set for manual or automatic movement of Suction Cup. 		
PAUSE: When PAUSE is pushed after adjusting Suction Cup to chest, the height position is fine-tuned and locked into Start Position. When pushed during compressions, the LUCAS® will stop compressions and lock the Suction Cup in its Start Position. Setup options: Device can be set up for different automatic height adjustments of Suction Cup.		
ACTIVE (continuous): When this key is pushed, LUCAS® performs continuous chest compressions. The green LED signal will blink 10 times/min to alert for ventilation during ongoing compressions. Setup options: Device can be setup for different numbers of ventilation alerts, audible alert signal on/off, ventilation pause duration, and automatic adjustment of Suction Cup. Rate and depth can be configured to different fixed values. Device can be configured to alter between rates by pushing the ACTIVE key (continuous or 30:2) during ongoing compressions.		

Performance standard	• • • • • •	•		
 Step omitted (or leave blank) Not yet competent: Unsuccessful; required critical or excess prompting; marginal or inconsistent technique Successful; competent with correct timing, sequence & technique , no prompting necessary 	Attempt 1 rating	Attempt 2 rating		
ACTIVE (30:2): When this key is pushed, the LUCAS® performs 30 chest compressions and then temporarily stops. During the stop, perform 2 ventilations. After the stop the cycle starts again. An intermittent LED in combination with an audible signal sequence alerts operator before each ventilation pause.				
 BATTERY indicator: 3 green LEDs show Battery charge status: 3 green LEDs: Fully charged; 2 green LEDs: 2/3 charged; 1 green LED: 1/3 charged One intermittent yellow LED and alarm during operation: low battery, ~10 minutes of operating capacity remaining One intermittent red LED and alarm signal: Battery is empty and must be recharged, or Battery is too hot Note: When LED to the far right is yellow and not green, Battery has reached end of service life. Replace this Battery with a new one. 				
MUTE: If this key is pushed when LUCAS® operates, alarm is muted for 60 seconds. If pushed when LUCAS is powered off, the Battery indicator shows Battery charge status.				
High priority alarms: One intermittent red LED and an alarm signal sequence indicate malfunction. A high priority alarm will take precedence over lower priority or information alarms.				
Transmit data: Push this key to send device data and receive new setup options. The device has to be in Power OFF mode to send and receive data.				
Application and use		1		
Follows manufacturer's recommendations regarding preparation of device, applications of straps to unit and charging battery				
Arrival at patient: *Confirm cardiac arrest and need for resuscitation. Start high quality, high perfusion, manual CPR for at least 3 rounds of 2-minute CPR cycles (first 6 min of resuscitation) BEFORE device application: *FTCO2 reading within 90 sec of first cardiac compression and again every 2 minutes *Place ECG defib pads and use real-time CPR feedback technology. *Check rhythm every 2 min and defibrillate per SOP (if indicated) at least 3 times before placing pt into LUCAS® device. Find pulse while compressions in place prior to rhythm check. When CPR paused, should know in 3 sec if present or absent. No pulse, resume CPR Once resuscitation started, use same monitor UNLESS an older unit w/out feedback capabilities *Zoll CPR feedback device stays in place throughout resuscitation regardless of CPR method *Use Physic Control CODE-STAT® sensor up to point of LUCAS® application. Turn on monitor metronome to ensure correct compression rate while device being applied. Obtain vascular access, give epinephrine and amiodarone (if VF/PVT) before placing LUCAS® Witnessed arrest: BLS airways + O2 15 L/NRM for 6 min (apnec oxygenation) w/ CPR in progress Unwitnessed arrest: BLS airways + O2 15 L/NRM (30:2 ratio) for first 6 minutes If arrest persists after 6 minutes, assume a prolonged period of CPR may be needed, and use of an automated device may be warranted unless contraindicated.				
Prepare patient & equipment for device application				
Mark chest with Sharpie to assess for migration of device				
Deploy device				

	Performance standard					
0	Step omitted (or leave blank) Not yet competent: Unsuccessful; required critical or excess prompting; marginal or inconsistent technique	Attempt 1 rating	Attempt 2 rating			
2	Successful; competent with correct timing, sequence & technique, no prompting necessary	Tracing	2 rating			
	*DO NOT interrupt CPR for longer than 5-10 seconds from last manual compression to first mechanical compression. Application time will be monitored and documented.					
	*Unpack device and Push ON/OFF on the User Control Panel for 1 sec to power up and start self-test. Green LED adjacent to ADJUST key illuminates when device is ready for use.					
	If LUCAS left in ADJUST mode, it will power off automatically after 5 minutes.					
	Option #1 placing back plate – must do one correctly					
	With manual CPR continuing - Position LUCAS back plate at head of pt.					
	Temporarily stop CPR. One member supports head and shoulders while another steps in front of pt, holds arms and both lift pt's upper body enough for a 3 rd member to slide back plate into position. Return pt to supine position, immediately resume manual CPR with < 10 sec of CPR interruption.					
*0	کption #2 placing back plate					
	Temporarily stop CPR. One member supports head while another positions self at patient's side and coordinates a log roll maneuver while a 3 rd member slides back plate into position. Return pt to supine position, immediately resume CPR with < 10 sec of CPR interruption.					
	*For both options; ensure back plate is below armpits and pt's arms are outside back plate.					
	Attach upper part (Hood)					
Α	djust Suction Cup					
	*Set device to ADJUST mode					
	* Correctly position suction cup on patient's ches t. Compression point should be at same spot as for manual CPR and according to guidelines.					
	*Stop manual compressions - Lower suction cup until pressure pad inside suction cup					
	touches pt's chest without compressing chest. When pressure pad is in correct position, the lower edge of the Suction Cup is immediately above end of sternum.					
	Person assembling device ensures correct position.					
	If the Suction Cup is pushed down too hard or too loose to the chest, LUCAS® will adjust Suction Cup to correct Start Position.					
*	nitiating mechanical compressions					
*/	Apply stabilization strap while LUCAS® is active					
	Remove neck strap (part of Stabilization Strap) from Carrying Case (support legs straps should already be attached to support legs)					
	Extend neck strap fully at the buckles.					
*Defibrillation						
Advanced airways						
L						

0 1 2	1 Not yet competent: Unsuccessful; required critical or excess prompting; marginal or inconsistent technique			Attempt 1 rating	Attempt 2 rating
Мо	ving patient: Secure arms to device				
 *When ready to move pt, secure arms at the wrist with Patient Straps to LUCAS® hood. *Do not use straps for lifting. They are only to fixate patient to device. Caution - skin burns: Temps of hood and battery may rise above 118 °F / 48 °C. If hot, avoid prolonged contact to prevent skin burns. Remove patient hands from patient straps. 					
Lifting patient while device operates : Follow manufacturer's instructions regarding use of handholds below claw locks and moving patient to stretcher.					
Transporting patient The LUCAS® can deliver compressions while patient is moved and/or transported if: □ The device and patient are safely positioned on the transportation device □ The device stays in the correct position and angle on the patient's chest					
Ch	anging battery				
 Must always have a charged spare LUCAS Battery in the Carrying Case. Follow manufacturer's instructions for battery change. If battery changed in <60 seconds, device remembers Suction Cup Start Position. Quickly resume compressions by pushing ACTIVE (continuous or 30:2) key. If it takes >60 seconds, device performs a self-test and you must set the Start Position again. 					
*Can verbalize major manufacturer's cautions and warnings relative to device operation.					
 Documentation Standard cardiac arrest documentation plus *Time of device application *Any evidence of patient adverse effects (skin breakdown, suggested fracture or chest deformity must be reported to the EMS MD as soon as patient safety and welfare has been addressed. 					
Competency Check:					
	tual time in minutes from last manual compression to mechanical compression (must be <10 sec)	1 st attempt	2 nd attempt		
Cri	 Failed to do 6 minutes of quality manual CPR prior to deploying device Failed to activate CPR feedback device prior to deploying LUCAS Failed to obtain ETCO₂ within 90 sec of first compression Applied device in a dangerous or inappropriate manner Interrupted compressions for longer than 10 seconds at any time. 				

Factually document below your rationale for checking any of the above critical criteria.

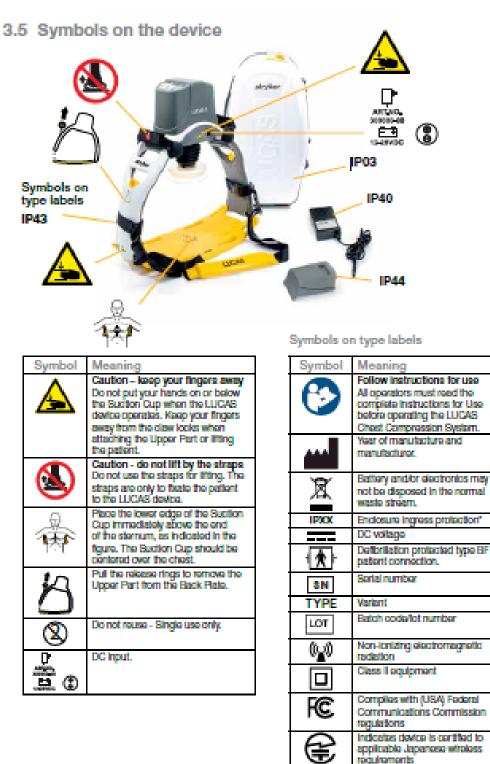
Scoring: All steps must be independently performed in correct sequence with appropriate timing and all starred (*) items must be explained/ performed correctly in order for the person to demonstrate competency. Any errors or omissions of these items will require additional practice and a repeat assessment of skill proficiency.

Rating: (Select 1)

- □ **Proficient**: The paramedic can sequence, perform and complete the performance standards independently, with expertise and to high quality without critical error, assistance or instruction.
- **Competent:** Satisfactory performance without critical error; minimal coaching needed.
- □ **Practice evolving/not yet competent:** Did not perform in correct sequence, timing, and/or without prompts, reliance on procedure manual, and/or critical error; recommend additional practice







-	IPXX	Mochanical (1ª number)	Water (2rd number)
	P09 (Carrying Case)	Non-protected	Weiler spraying from above up to ±60° from the vertical direction
	P40 (Power Supply)	fimm objects	Non-protected
	P42 (Devtor)	fimm objects	Weier spraying from above up to ±50° from the vertical direction
	P44 (Eatlery)	fmm objects	Weiler spraying from all directions

LUCAS⁹ 3 Chest Compression System – INSTRUCTIONS FOR USE 101034-00 Rev E, valid from COUS201 0 2018 Julie AB