



# King County EMS – Training & Education Early Defibrillation Program

## AED Quality Assurance & Performance Report

Class Date: \_\_\_\_\_

Technician's Name: \_\_\_\_\_

EMS Number: \_\_\_\_\_

Fire Department: \_\_\_\_\_

Station Number: \_\_\_\_\_

Session: *Please mark one box*

Initial Class     1st Quarter     2nd Quarter     3rd Quarter     4th Quarter

Training Level:     EMT     1st Responder     Other

Defibrillator:     LP12     LP 300     Zoll M-Series     Philips MRX  
 Forerunner     FR-2     Other

### CPR and Obstructed Airway skills -- Instructor's initials required

- |   |  |
|---|--|
| _____ Adult conscious obstructed airway   | _____ Child one rescuer CPR                |
| _____ Adult unconscious obstructed airway | _____ Child two rescuer CPR                |
| _____ Adult one rescuer CPR               | _____ Infant conscious obstructed airway   |
| _____ Adult two rescuer CPR               | _____ Infant unconscious obstructed airway |
| _____ Child conscious obstructed airway   | _____ Infant one rescuer CPR               |
| _____ Child unconscious obstructed airway | _____ Infant two rescuer CPR               |

Yes    No

### Performance Objectives

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Verifies cardiac arrest and initiates proper CPR sequence ( <b>MUST PASS</b> )   |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Identifies: <input type="checkbox"/> self, <input type="checkbox"/> department, and <input type="checkbox"/> patient short report  |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Identifies correct placement of and properly places defibrillation pads  |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Completes 30 compressions prior to every rhythm analysis <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Clears patient prior to every rhythm analysis <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>            |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Clears patient prior to every shock ( <b>MUST PASS</b> ) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
|                          |                          | Time of first "shock": _____ OR first "no shock": _____   |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. First shock on board in less than 60 seconds: _____  |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Perform 2 minutes (or slightly more) of uninterrupted CPR after shock or no shock  |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Provides updated patient information at least once   |

**PLEASE TURN OVER**

CONTINUED – Performance Objectives

**Yes**    **No**

- |                          |                          |            |  |
|--------------------------|--------------------------|------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <b>10.</b> | Technician effectively directs resuscitation and patient care        |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>11.</b> | Technician announces arrival Medics                                  |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>12.</b> | Technician has command of the defibrillator protocols                |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>13.</b> | Does the technician understand the proper operation of their machine |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>14.</b> | Is scene safety a top consideration during resuscitation             |

Instructor's Comments and Notes:

Instructor's Printed Name: \_\_\_\_\_

Instructor's Signature: \_\_\_\_\_