



Wearable Cardioverter Defibrillator Vest



History

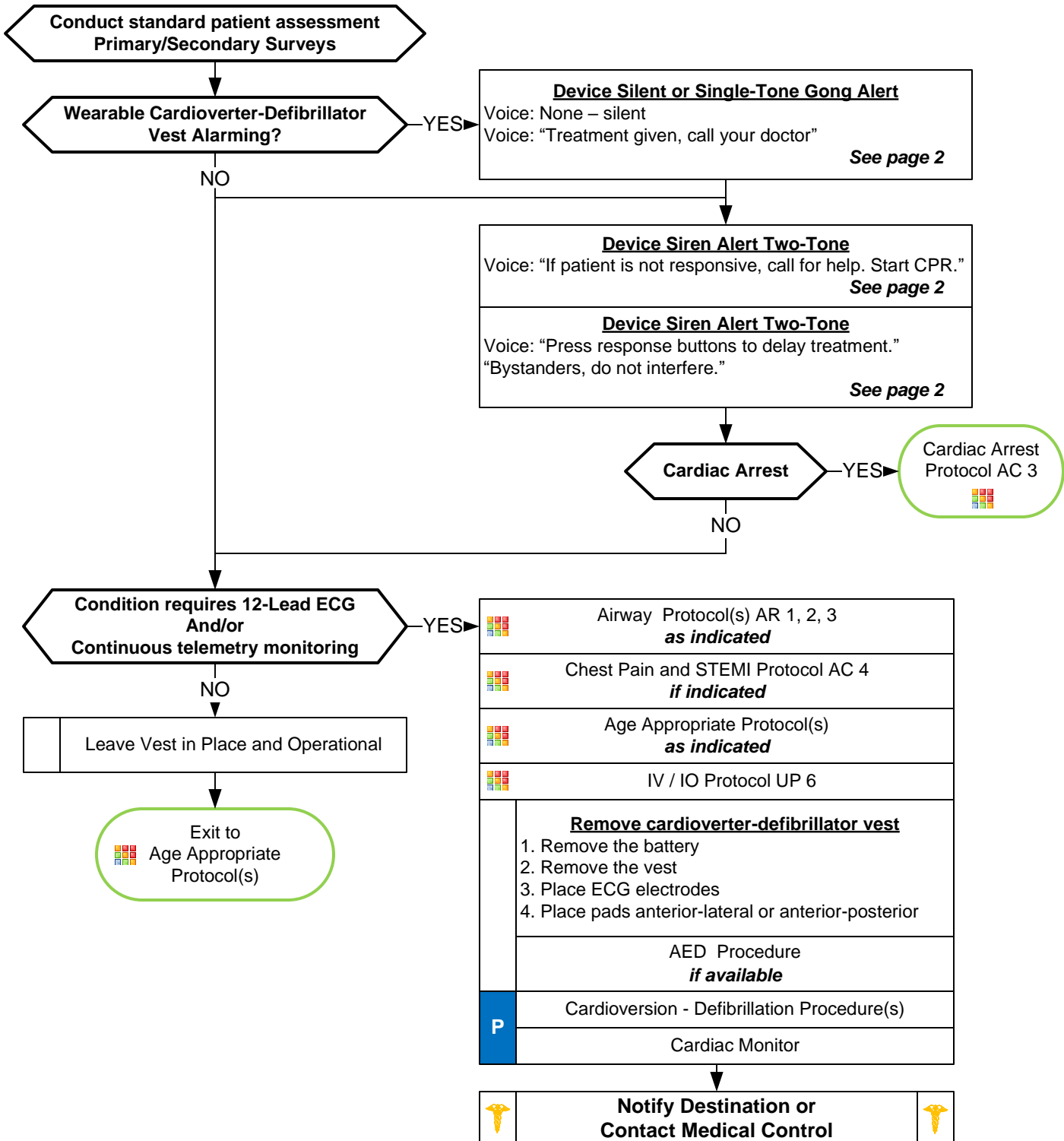
- SAMPLE
- Known risk for Sudden Cardiac Death
- Risk for life-threatening arrhythmia
- No implanted defibrillator
- Heart failure – cardiomyopathy
- Decreased ejection fraction

Signs and Symptoms

- Chest pain, dyspnea
- Palpitations
- Received shock from vest
- Poor capillary refill / skin color
- AMS or decreased mental status

Differential

- See Reversible Causes below
- Arrhythmia
- Infection/Sepsis
- Hypovolemia
- Cardiac arrest
- Hemorrhage





1. Garment

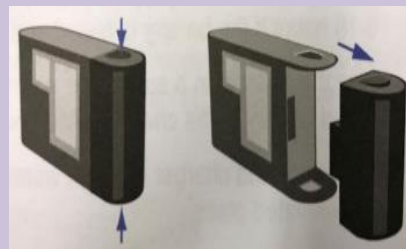
- Worn under your normal clothing, directly against skin
- Includes the electrode belt

2. Electrode Belt

- Designed to detect dangerous heart rhythms and deliver a treatment shock

3. Monitor

- Worn around waist or with shoulder strap
- Continuously records heart rate



Battery Removal



Response button

Pearls

- **Recommended exam:** Mental status, skin color, capillary refill, peripheral pulses, blood pressure.
- **Wearable Cardioverter-Defibrillator Vest:**
 - Device is preparing to delivery a shock to the patient:**
 - Before device delivers a shock, it tests to see if patient is conscious – voice prompt instructs patient to press the “response” button (see diagram above).
 - Only the patient should press the “response” button.
 - Once a treatable arrhythmia is detected it takes between 25 and 60 seconds to deliver the shock.
- **Audible and tactile warning system:**
 - The device will provide a vibration, a siren tone, and voice prompts to check if the patient is conscious and give them an opportunity to press the “response” button to abort a shock.
 - See audible warning system above.
- **Reasons for use:**
 - Currently only device on the market is the Zoll LifeVest.
 - Worn by patients at risk of sudden cardiac arrest or risk of abnormal and/or lethal arrhythmia.
- **Blue gel on the patient’s skin from the device:**
 - Electrode pads release a blue gel prior to treatment to improve shock conduction and reduce burning.
 - Do not remove the gel if the vest is left in place during treatment.
 - Remove gel if vest is removed for prehospital care.
- **Shock to providers:**
 - Do not touch the patient when the device is instructing you that a shock will be delivered.
 - Providers can be shocked by the device during energy delivery if provider is touching the patient.
- **Removing the device for prehospital care:**
 - The device should only be removed when ECG monitor and defibrillator is available.
 - Continuous ECG monitoring and electrode pads should be in place when vest is removed.
- **Defibrillation/cardioversion with vest in place:**
 - Disconnect the device from the vest before you deliver a cardioversion or defibrillation
- **Transcutaneous Pacing:**
 - May be utilized with vest in place – disconnect the device from the vest before you perform transcutaneous pacing.