## Ventricular Assist Devices

Signs and Symptoms

VAD patient with:

Differential

Device failure

## VAD Patient · Signs of shock Asymptomatic dysrhythmias DNR/POLST · Difficulty breathing In cardiac arrest Assess the device Is the pump is functioning? No Assess the Patient There may be no palpable pulse, utilize other Device information, implant center, and parameters for patient assessment (e.g., LOC, VAD Coordinator contact number may be skin signs, capillary refill and EtCO<sub>2</sub>). located on the device itself, on the refrigerator, or medical alert bracelet If a caregiver is present, yield to their advice Cardiac arrest or if patient is unresponsive The VAD Coordinator can assist you with and the VAD is functioning Ε Exit to Cardiac Arrest TGs determining the best course of action Begin continuous chest compressions regarding assessment of the device Only the Base Hospital is authorized to provide medical direction For continuous flow devices (no palpable pulse), auscultate the left upper quadrant of abdomen and listen for the "hum" of the device Determine if the device has power Is the patient's complaint unrelated to • If the device has power, it does not the VAD? necessarily mean it is working properly No • If the device has power, you will see a green light on the Heartmate II, the most common device • On the HeartWare device, the display will tell you the liters per minute of blood flow Exit to appropriate TG and transport Minor medical or trauma with adequate perfusion to an appropriate receiving facility Check the device for secure connections and properly charged batteries No Suspected stroke patients Exit to Suspected Stroke TG Transport the patient to No their Bay Area VAD Center Suspected STEMI patients Exit to Suspected STEMI TG No **Bay Area VAD Centers** Stanford - Palo Alto Suspected trauma patients Exit to Trauma TGs Lucille Packard - Palo Alto California Pacific Med. Ctr. - SF UC San Francisco – SF Notify receiving facility. Kaiser Santa Clara - Santa Clara **Contact Base Hospital for UC Davis - Davis** medical direction, as needed.

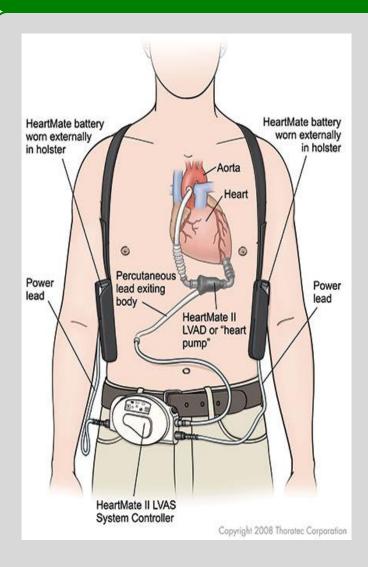


History

• Dispatch information about VAD at the location



## Ventricular Assist Devices



| 24-HOUR<br>HOTLINE |
|--------------------|
| (650) 723-6661     |
|                    |
| (415) 443-5823     |
| (408) 318-2387     |
| (916) 734-2020     |
|                    |

\*Stanford Hospital and Lucille Packard Children's Hospital at Stanford share the same VAD Coordinators

## **Pearls**

- Patients may be cardioverted or defibrillated if symptomatic, but asymptomatic dysrhythmias do not require treatment.
- Consider contacting the Base Hospital if there are questions concerning destination choices.
- If possible, the patient's family member or caregiver should accompany the patient in the ambulance, and all related VAD equipment, including spare batteries, should also be transported with the patient.
- In arrest situations, a POLST/DNR or advanced directive may be available. Many VAD patients have made end of life care decisions.



