BASIC MONITORING

(Information not covered here may be found in the LP12 Operating Manual)

A. Explain the procedure to the patient

B. Using four electrodes (12 Lead Cable shown), connect the patient to the monitor. Placements of the limb leads are RA, LA, RL, LL.

1. Remember to place the RA and LA on the deltoids (slightly posterior) and place the RL and LL on the iliac crest.
Diagram of Optimized Electrode Locations
2. Connect electrodes to lead cable prior to placing on the patient. Skin prep is very important prior to applying electrodes.

3. Alcohol preps and razors can be utilized.

C. Turn the monitor on.
1. The monitor will come up with three channels (lead II, oxygen saturation and capnography). The monitor will print out your initial strip.

Example of Display

D. Set alarms by pushing “ALARMS” button and then selecting “Quick Set”. This sets the parameters for the current patient.

Note: Use the Quick-Combo pads when you have determined that the patient will need pacing or defibrillation. You do not need to constantly print strips. The monitor will record any changes in the patient’s ECG rhythm automatically. You can print originals for yourself and the hospital.
**LIFE PAK 12 MONITOR (LP12)**

Escambia County, Florida - ALS/BLS Medical Protocol

**Quick Set Alarms Display**

<table>
<thead>
<tr>
<th>Alarms</th>
<th>Limits</th>
<th>Silence</th>
<th>VF/VT Alarm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quick Set Limits</td>
<td>Wide</td>
<td>2 min</td>
<td>Off</td>
</tr>
<tr>
<td>Silence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VF/VT Alarm</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Version: 3.1
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Approved by:
Charles Neal, D.O. Medical Director
RECORDING INTERVENTIONS

A. The LP12 will automatically record the vital signs.

B. You may record your interventions on the monitor by pushing the “EVENT” button, then turn the selector knob to the desired item or "GENERIC" and push the selector knob.
C. The monitor will automatically record the time this is done.

D. The interventions are listed in order by time.

E. The incident number must be entered in the patient information area (OPTIONS).

PRINTING

A. Push the “PRINT” button once to begin printing and a second time to end printing of the present screen.

B. Push the “EVENT” button.

C. Turn the selector knob to “PRINT”.

D. Turn the selector knob to the desired report to print and push the selector knob.

E. The LP12 will print the report.
PATIENT
Enters patient name, patient ID, incident, age, and sex.

PACING
Selects demand or nondemand pacing. Selects Internal Pacer Deflection on/off.

DATE/TIME
Sets the date and time. For changes to take effect, cycle power.

ALARMS VOLUME
Adjusts volume for alarms, tones, and voice prompts.

ARCHIVES
Accesses archived patient records. See page 6-11.

PRINT
Selects printer REPORT, FORMAT, MODE, and SPEED for printing a current patient report.

USER TEST
Initiates automatic self-test. See page 8-3.
Transmissions to Hospitals

After completing a 12 lead EKG you must transmit a copy to the receiving hospital (if hospital capable of receiving). This applies to normal and abnormal EKG’s.

The current procedure:

1. After 12 lead EKG is done and patient is still connected to monitor
2. Push transmit button on front of monitor
3. This will bring up the screen for data transmissions
4. Select data
5. Select site (example: SHH, WFH)
6. Select report (12 Lead EKG)
7. Select Send
8. After transmission is complete the monitor will print out a strip
9. Read the strip to make sure transmission was complete
10. In radio report to hospital make sure you notify them that you transmitted a 12 lead EKG
Input Patient Data Prior to Transmission

Options

<table>
<thead>
<tr>
<th>Options</th>
<th>Archives...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pacing...</td>
<td>Print...</td>
</tr>
<tr>
<td>Date/Time...</td>
<td>User Test...</td>
</tr>
<tr>
<td>Alarm Volume...</td>
<td></td>
</tr>
</tbody>
</table>

To enter or edit a patient’s name, incident, or patient ID:

Options / Patient

<table>
<thead>
<tr>
<th>Last Name</th>
<th>MORTIMER</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name</td>
<td>JOHN</td>
</tr>
<tr>
<td>Patient ID</td>
<td>528760004</td>
</tr>
<tr>
<td>Incident</td>
<td>BF301</td>
</tr>
</tbody>
</table>

Options / Patient / Last Name

MORTIMER

ABCDEFGHIJKLMNOPQRSTUVWXYZ

End  End
Space Space
Backspace Clear

1234567890,.;:/?@#$%^&* ()<>{}
Transmissions to Hospital after monitor has been turned off

1. Turn Monitor on
2. Select options
3. Select archives
4. Select yes to close this record
5. Select send data
6. Select the patient record you want to send (the records are date/time coded or the patient name will appear if entered)
7. Select 12 Lead EKG record
8. Select site (example: SHH, WFH)
9. Select send

10. Monitor will print out after transmission is complete (read strip to ensure transmission complete)

11. Turn monitor off to exit archives
End of Shift Transmissions

1. Turn Monitor on
2. Select Options on front Right hand side of monitor
3. Select archives
4. Select yes to end this record
5. Select send data
6. The monitor will default to EMS site and all patients
7. Select send
8. The monitor will print out a strip when transmission is completed

   Note: Carefully read the print out to ensure the transmission was completed, if strip reads transmission incomplete, transmission failure or unable to transmit retransmit.

   This message will often be received due to a busy signal at the receiving hospital.
9. Select Home Screen button on front of monitor
10. Select delete
11. Select delete and delete each patient record in the monitor until it reads none
12. Turn off monitor to exit archives
13. Tear off strip and turn it into the stock clerk (The stock Clerk will check off that monitor has been downloaded.)
Notes:

Phones and monitors are numbered alike. (Monitor #1 and Phone #1). The phone and monitor must stay together. If a monitor is removed from a unit, the phone, charger and all components of the monitor (B/P and pulse ox) must be removed together.

Patient name and incident number should be entered prior to transmission. Alarms should be set for rate changes as a safeguard by selecting “Quick Set”. The VF/VT alarm is already set and will alarm if the patient’s rhythm changes. This is indicated by a voice prompt, “Check Patient”.

When battery one is depleted, an alarm tone will sound. You should rotate battery two
forward to replace battery one and replace battery two with a fully charged battery. If both batteries become depleted, a voice prompt announcing “Replace Battery” will occur.
On Pediatric patients weighing below 33 lbs. use the set of pads in the A/P (anterior/posterior) placement.