



Trust Headquarters  
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West Sussex  
RH10 9BG

Date:

Email:

Dear ,

Tel: 0300 123 0999  
[www.secamb.nhs.uk](http://www.secamb.nhs.uk)

I am writing in response to your enquiry under the Freedom of Information Act 2000 (FOIA) reference FOI 240341.

You requested the following information, please see our response below:

**I am a student paramedic in my final year of study, currently working on my dissertation which concerns defibrillation.**

**Please could I request the following information from you regarding your cardiac arrest protocols:**

- 1. What make and model of defibrillator is used by your staff? (E.G Lifepak, Corpuls, Zoll etc)**

SECAmb use the LifePak 15 monitor on both our single responder cars and double crewed ambulances.

- 2. Do your staff perform manual defibrillation or is Automated External Defibrillation (AED) mode mandatory?**

Clinical staff are instructed to use the defibrillator in AED mode at the start of any resuscitation attempt. Once adequate resources arrive on scene and this must include a paramedic, the monitor can be changed to manual mode.

- 3. What is your defibrillation protocol for cardiac arrests?**

The trust protocol for defibrillation follows the standard European resuscitation council guidelines. The only deviation from this is that all shocks are delivered at 360j in adult patients.

- 4. If manual mode is used please could you provide additional rules (if any) required for its use. For example requirements for additional resources or staff numbers to be present.**

Answered in question 2.

**5. Which clinical grades can use manual defibrillation within your service and which must use AED?**

Manual defibrillation is allowed for any scope in paediatric patients for the purposes of dose attenuation. In adults only paramedics may use manual mode.

**6. If AED mode is mandated could you please provide the date that this mandate came into force and also the evidence used to inform the decision to use AED mode.**

We are unable to find the date this instruction was issued but it has been taught for at least the last 4 years. In terms of evidence, we follow each link in the chain of survival, this instructs that defibrillation should be delivered at the earliest opportunity. Given the multiple tasks expected of our clinicians during the initial treatment stages of a cardiac arrest, the use of AED mode removes the need for a clinician to keep timings whilst carrying out multiple other tasks.

I hope you find this information of some assistance.

If for any reason you are dissatisfied with our response, kindly in the first instance contact Caroline Smart, Head of Information Governance via the following email address:

[FOI@secamb.nhs.uk](mailto:FOI@secamb.nhs.uk)

Yours sincerely

**Freedom of Information Coordinator  
South East Coast Ambulance Service NHS Foundation Trust**

