



## Safe Work Procedures: ZOLL AED 3 Fully Auto

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**Purpose:** To provide staff with procedures to ensure they are protected against potential hazards associated with operating and servicing the ZOLL AED 3 Fully Automatic Biphasic defibrillator.

**Hazards:** High-voltage energy delivery during shock, lithium battery handling (risk of fire/explosion), trip/fall hazards in crowded emergency scenes, biohazard exposure to bodily fluids, and emotional stress during resuscitation events.

**WARNING:** Only trained personnel may use or service this device. Failure to comply may result in severe injury or death.

### 1. **General Safety:**

- 1.1. Read and follow the ZOLL AED 3 Operator's Manual before use.
- 1.2. Keep the device dry; do not use in standing water or flammable atmospheres.
- 1.3. Do not recharge, disassemble, or incinerate the battery.
- 1.4. Store and transport per manufacturer specifications (temperature/humidity).
- 1.5. Maintain privacy and scene safety; ensure adequate space around the patient.
- 1.6. Follow organizational emergency response and reporting procedures.

### 2. **Personal Protective Equipment (PPE)**

- 2.1. Medical-grade disposable gloves for patient contact and pad placement.
- 2.2. Eye protection if splash risk exists.
- 2.3. CPR barrier device (mask/shield) for ventilations.
- 2.4. Optional: high-visibility vest and sturdy footwear in public/crowded areas.

### 3. **Before Operations**

- 3.1. Perform standard first aid on the patient.
- 3.2. Assess scene safety; direct someone to call 911.
- 3.3. If no pulse is present and AED is not yet available, begin CPR as per first aid training.
  - 3.3.1. In the unlikely event that the AED does not operate properly, the responder shall continue with basic life support measures, including CPR, until a more highly trained medical authority arrives on the scene.
- 3.4. Confirm status indicator shows READY; perform readiness checks per site protocol.



- 3.5. Verify battery installation, charge level, and expiry date.
- 3.6. Verify electrode pads (CPR Uni-padz) are sealed, compatible, and within expiry date.
- 3.7. Ensure patient area is dry; remove moisture and clear clothing.
- 3.8. Shave or clip chest hair only if pad adhesion is compromised.
- 3.9. Remove medication patches and wipe area before pad placement. Do not use alcohol-based cleaners on chest immediately before pad placement.
  - 3.9.1. Use child mode if the patient is under eight years old or less than 25kg (55 lbs.) and follow device instructions. Do not delay therapy to determine precise age or weight of the child.
- 3.10. Understand device prompts—Fully Auto model delivers shock automatically after warning (no manual shock button).

#### **4. During Operation**

- 4.1. Follow the AED visual and voice prompts.
- 4.2. Place pads firmly on bare chest as indicated; ensure full adhesion.
- 4.3. Do **NOT** touch the patient during rhythm analysis or shock delivery.
- 4.4. Loudly warn: **'STAND CLEAR!'** and visually confirm no contact before shock.
- 4.5. Device will automatically deliver shock if advised—do not interfere.
- 4.6. Avoid use in moving vehicles unless necessary and safe.
- 4.7. When advised by the AED, initiate/resume CPR. Continue to perform CPR until otherwise promoted by the AED or EMS personnel upon arrival.
- 4.8. If the patient recovers consciousness or starts moving, place the patient in the recovery position and leave the AED attached.

#### **5. After Operation:**

- 5.1. Notify administration immediately.
- 5.2. Dispose of used pads and contaminated materials in biohazard containers.
- 5.3. Clean AED exterior with manufacturer-approved disinfectant; do not immerse.
- 5.4. Inspect device, battery, and connectors for damage; record issues per maintenance procedure.
- 5.5. Replace used pads and battery if indicated; restock accessories (razor, wipes, gloves, barrier mask).
- 5.6. Download event data and maintain patient privacy.
- 5.7. If device is damaged or inoperable, apply lockout/tagout and remove from service pending inspection. Post signage accordingly (ie. Device is temporarily inoperable.)



**6. Documentation and Post Incident Response**

- 6.1. The responder will document the event using the AED Post-Incident Detailed First Aid Report Form and will provide the completed form to the school/site administration who will forward the form to the District Joint Health and Safety Committee and the Superintendent on the next business day.
- 6.2. Complete injury report / Schools Protection Program (SPP) online form and First Aid Assessment Record.
- 6.3. Notify the District Critical Incident Response Team lead after AED use.
- 6.4. Critical Incidence Debriefing will be conducted by the school/site critical incidents team. Offer support through:
  - District Wellness Coordinator
  - Employee Assistance Program (Telus Health EAP)