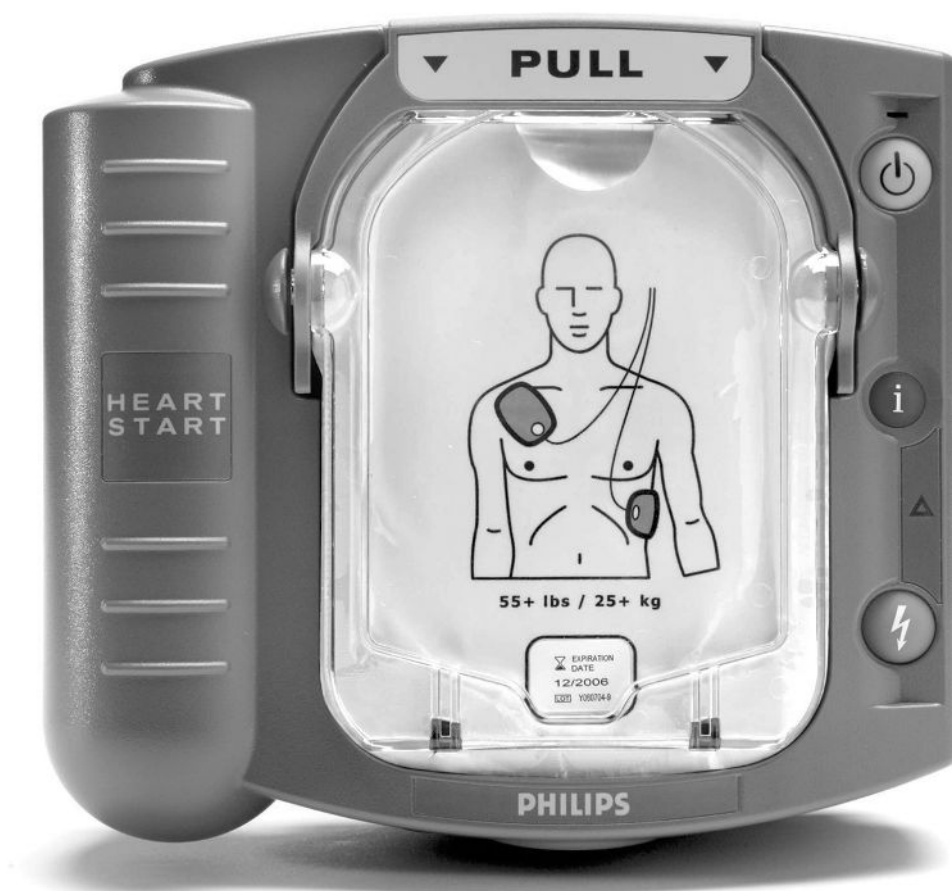


# HeartStart OnSite Defibrillator

## OWNER'S MANUAL

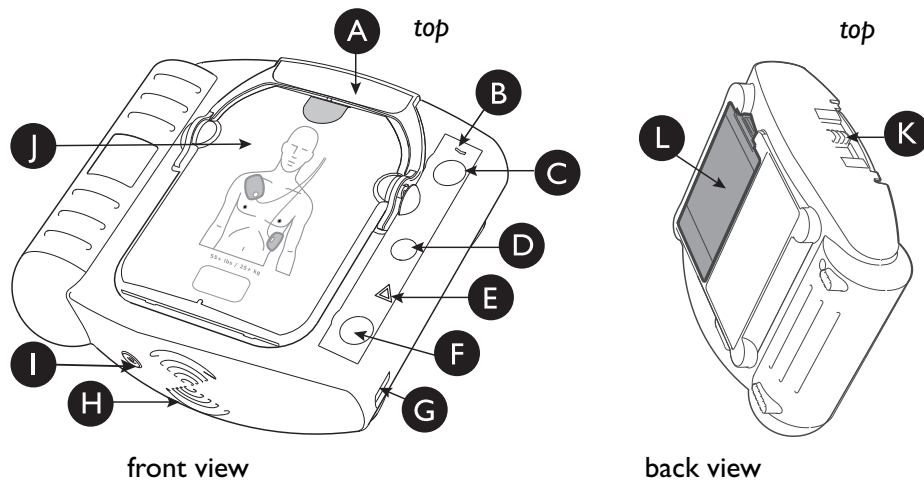
Guide to Set Up, Operation, Maintenance, and Accessories



M5066A  
Edition 14

# PHILIPS

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## The HeartStart OnSite Defibrillator M5066A

### **A** Pads Cartridge Handle.

Pull the handle to turn on the HeartStart and remove the cartridge's hard cover.

### **B** Ready Light. This green light tells you the readiness of the HeartStart.

Blinking: standby mode (ready for use)

Solid: in use

Off: needs attention (HeartStart "chirps" and i-button flashes)

### **C** On/Off Button. Press this green button to turn on the HeartStart. To turn off the HeartStart, press the green button again and hold it down for one (1) second.

### **D** Information Button. This "i-button" flashes blue when it has information you can access by pressing it. It also flashes at the beginning of a patient care pause when CPR coaching is enabled.

### **E** Caution Light. This triangular light flashes during rhythm analysis and is on when a shock is advised, as a reminder that no one should be touching the patient.

### **F** Shock Button. When instructed by the HeartStart to deliver a shock, press this flashing orange button .

### **G** Infrared (IR) Communications Port. This special lens, or "eye," is used to transfer HeartStart data directly to or from a computer.

### **H** Speaker. When the device is being used, its voice instructions come from this speaker.

### **I** Beeper. The HeartStart "chirps" through this beeper to alert you when it needs attention.

### **J** SMART Pads Cartridge. This disposable cartridge contains self-adhesive pads with attached cable. Shown with adult pads cartridge.

### **K** SMART Pads Cartridge Latch. Slide the latch to the right to release the pads cartridge for replacement.

### **L** Battery. The non-rechargeable battery is inserted in a recess on the back of the HeartStart.

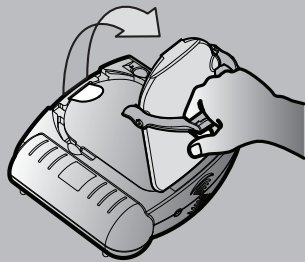
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# HeartStart OnSite Defibrillator

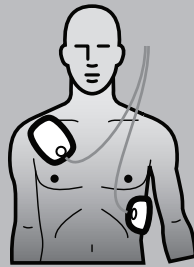
## QUICK REFERENCE

Check for signs of Sudden Cardiac Arrest:  Unresponsive  
 Not Breathing Normally

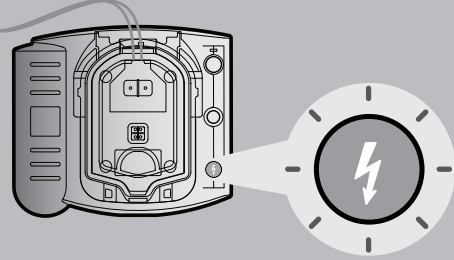
**1 PULL**



**2 PLACE**



**3 PRESS**



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# HeartStart OnSite

## M5066A

### Automated External Defibrillator

OWNER'S MANUAL  
Edition 14

#### IMPORTANT NOTE:

It is important to understand that survival rates for sudden cardiac arrest are directly related to how soon victims receive treatment. For every minute of delay, the chance of survival declines by 7% to 10%.

Treatment cannot assure survival. In some victims, the underlying problem causing the cardiac arrest is simply not survivable despite any available care.

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## About this edition

The information in this guide applies to the model M5066A HeartStart OnSite Defibrillator. Its technical contents apply to all models in the HeartStart HSI family of defibrillators, including the HeartStart, the HeartStart OnSite, and the HeartStart Home defibrillator. This information is subject to change. Please contact Philips at [www.philips.com/productdocs](http://www.philips.com/productdocs) or your local Philips representative for information on revisions.

## Edition history

### Edition 14

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## Notices

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## Authorized EU representative

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71034 Boeblingen, Germany  
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## Caution

The Philips HeartStart Defibrillator is designed to be used only with Philips-approved accessories. The HeartStart may perform improperly if non-approved accessories are used.

## Device tracking

In the U.S.A., this device is subject to tracking requirements by the manufacturer and distributors. If the defibrillator has been sold, donated, lost, stolen, exported, or destroyed, notify Philips Medical Systems or your distributor.

## Device manufacturer

Philips Medical Systems  
22100 Bothell Everett Highway  
Bothell, WA 98021-8431, USA

## Patents

This product is manufactured and sold under one or more of the following United States patents:

US5611815, US5632280, US5650750, US5773961, US5776166, US5800460, US5803927, US5868792, US5879374, US5889388, US5891046, US5891049, US5899926, US5902249, US5904707, US5951598, US6016059, US6047212, US6075369, US6185458, US6230054, US6287328, US6299574, US6317635, US6356785, US6417649, US6441582, US6553257, US6556864, US6662056, US6871093, US7463922, US7489972, US7689278, US7715913, US7822488, US8086306, US8209008, US8335562, USRE43050, and other patents pending.

## For Technical Support

If you need technical support, please contact your local Philips representative by calling the regional number on the back cover of this manual, or go to [www.philips.com/AEDsupport](http://www.philips.com/AEDsupport).

To download additional copies of this manual, go to [www.philips.com/productdocs](http://www.philips.com/productdocs).

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## APPENDICES

- A Accessories for the HeartStart OnSite
- B Glossary of terms
- C Glossary of symbols/controls
- D Warnings and precautions
- E Technical information
- F Configuration
- G Testing and troubleshooting
- H Additional technical information required for European conformity

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## I INTRODUCTION TO THE HEARTSTART ONSITE

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### DESCRIPTION

The Philips HeartStart OnSite Defibrillator M5066A (“OnSite”) is part of the Philips HeartStart HSI family of automated external defibrillators (AEDs). Small, lightweight, and battery powered, the OnSite is designed for simple and reliable operation.

### SUDDEN CARDIAC ARREST

The OnSite is used to treat ventricular fibrillation (VF), a common cause of sudden cardiac arrest (SCA), and certain ventricular tachycardias (VTs). SCA is a condition that occurs when the heart unexpectedly stops pumping. SCA can occur to anyone – infant, child, adult, male or female – anywhere, at any time. Many victims of SCA do not have warning signs or symptoms.

VF is a chaotic quivering of the heart muscle that prevents it from pumping blood. The only effective treatment for VF is defibrillation. The OnSite treats VF by sending a shock across the heart, so it can start beating regularly again. Unless this is successful within the first few minutes after the heart stops beating, the victim is not likely to survive.

### INDICATIONS FOR USE

The OnSite should be used to treat someone you think may be a victim of SCA.

A person in SCA:

- does not respond when shaken, and
- is not breathing normally.

If in doubt, apply the pads. Follow the voice instructions for each step in using the defibrillator.

## IMPLEMENTATION CONSIDERATIONS

Check with your local health department to see if there are any national or local requirements about owning and using a defibrillator. The OnSite AED is one part of a well-designed emergency response plan. Recognized resuscitation councils recommend that emergency response plans include physician oversight and training in cardiopulmonary resuscitation (CPR).

Several national and local organizations offer combined CPR/AED training. Philips recommends that you train on the device you will be using. Contact your Philips representative for information, or visit us online at [www.philips.com/AEDservices](http://www.philips.com/AEDservices) to learn about certified training and web-based refresher training (offered in select areas) available through Philips AED Services.

**NOTE:** Training accessories are available for practicing use of the AED. See Appendix A for information.

## FOR MORE INFORMATION

Contact your local Philips representative for additional information about the OnSite. We will be happy to answer any questions you may have and to provide you with copies of the clinical summaries of several key studies using Philips automated external defibrillators.\*

Technical information about all Philips HeartStart automated external defibrillators is also available online at [www.philips.com/productdocs](http://www.philips.com/productdocs) in the *Technical Reference Manuals* for HeartStart Automated External Defibrillators.

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\* Clinical summaries also include ForeRunner and FR2 Defibrillators.

## 2 SETTING UP THE HEARTSTART ONSITE

### PACKAGE CONTENTS

Check the contents of the HeartStart OnSite Defibrillator M5066A box to be sure it contains:

- 1 HeartStart OnSite Defibrillator
- 1 battery M5070A, pre-installed
- 1 Adult SMART Pads Cartridge M5071A, containing one set of adhesive defibrillation pads, pre-installed
- 1 Quick Reference Guide
- 1 Owner's Manual
- 1 HeartStart Quick Setup Guide
- 1 inspection log/maintenance booklet with plastic storage sleeve and maintenance tags<sup>\*</sup>

If you have purchased the OnSite Ready-Pack configuration, the OnSite is installed in a carry case, which also contains a spare adult SMART Pads Cartridge.

Training materials and optional accessories for the HeartStart are also available from Philips. See Appendix A for information.

### SETTING UP THE HEARTSTART ONSITE

Setting up the OnSite is simple and quick. The HeartStart Quick Setup Guide provides illustrated instructions for setup, which is described in detail below.

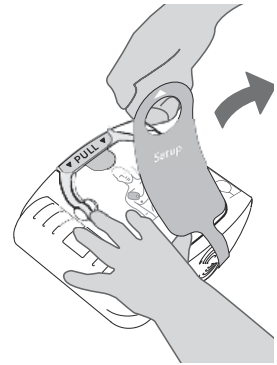
1. Remove the OnSite from its packaging. Check that the battery and pads cartridge are installed.<sup>†</sup>

<sup>\*</sup> In Japan, the defibrillator comes with a different style of maintenance tag and inspection log/maintenance booklet.

<sup>†</sup> If the battery and pads are not installed, or if you wish to install an infant/child SMART Pads Cartridge, follow the directions in Chapter 4, "After Using the HeartStart" to install the pads and battery.

**NOTE:** To prevent the pads' adhesive gel from drying out, do not open the hard cover or film seal of the cartridge until you need to use the pads.

2. Pull out and discard the green Setup tab.
3. The OnSite will automatically run a self-test. Press the Shock button when instructed. Be sure to let the self-test run all the way to completion. When the self-test is over, the OnSite will report the result, and tell you to push the green On/Off button in case of an emergency. *(Do not push the green button unless this is an actual emergency.)* Then the OnSite will turn off and go to standby mode.\* The green Ready light will be blinking to show the OnSite is ready for use.



4. Install the OnSite in its carry case, if it is not pre-installed. Ensure that the Quick Reference Guide<sup>†</sup> is face up in the clear plastic window on the inside of the carry case. Philips recommends that you store a spare pads cartridge and spare battery with your OnSite. If you are using a standard carry case, there is an area in the upper lid of the case, under the flap, to store a spare adult SMART Pads Cartridge or an infant/child SMART Pads Cartridge and a spare battery.<sup>‡</sup>

**NOTE:** Do not store anything in the defibrillator carry case that it is not designed to accommodate. Store all objects in their intended location in the case.

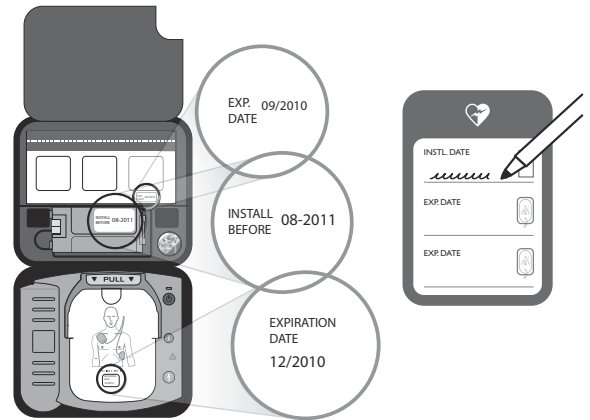
\* As long as a battery is installed, turning the OnSite “off” puts it into standby mode, which means that it is ready for use.

† The illustration on the cover of the Quick Reference Guide is a 3-step guide to using the OnSite. Detailed illustrated directions are inside, for reference in an emergency, or if you are hearing impaired or using the OnSite where it is hard to hear the voice instructions.

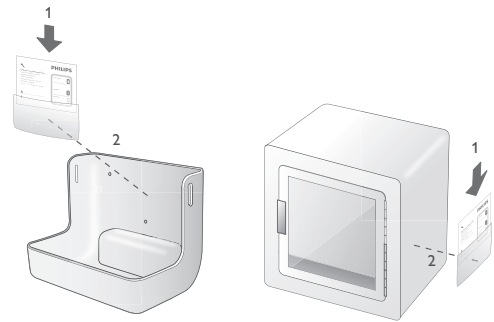
‡ See Chapter 4, “After Using the HeartStart OnSite,” for directions on how to replace the battery in the OnSite.



5. Use the maintenance tag\* provided to record the expiration date of the installed pads cartridge. If you have a spare pads cartridge and spare battery, record the pads expiration date and battery install-by date on the maintenance tag.



6. The maintenance tag and inspection log/maintenance booklet should be kept with your HeartStart. Adhere the plastic storage sleeve\* for the booklet to the AED wall mount or cabinet and store the booklet in it for ready reference.



7. Store the OnSite in its carry case in accordance with your site's emergency response protocol. Typically, this will be in a high-traffic area that is easy to access, convenient for checking the Ready light periodically, and easy to hear the alarm chirp if the battery power gets low or the OnSite needs attention. Ideally, the location will be near a telephone, so the Emergency Response Team or Emergency Medical Services can be alerted as fast as possible in the event of a possible SCA.

In general, treat the OnSite as you would any piece of electronic equipment, such as a computer. Be sure to store the OnSite according to its specifications. See Appendix E for details. As long as a battery and a pads cartridge are installed, the green Ready light should be blinking to show that the OnSite has passed its most recent self-test and is therefore ready to use.

\* In Japan, the defibrillator comes with a different style of maintenance tag and inspection log/maintenance booklet.

**NOTE:** Always store the OnSite with a pads cartridge and a battery installed, so it will be ready to use and can perform daily self-tests. Training pads should be stored separately from the OnSite to avoid confusion during a use.

## RECOMMENDED ACCESSORIES

It is always a good idea to have a spare battery and a spare pads set. Other things that are useful to keep with the OnSite include:

- scissors — for cutting the victim's clothes if needed
- disposable gloves — to protect the user
- a disposable razor — to shave the chest if hair prevents good pads contact
- a pocket mask or face shield — to protect the user
- a towel or absorbent wipes — to dry the victim's skin for good pads contact

Philips has a Fast Response Kit with all these items. See Appendix A for information.

*If you may need to defibrillate an infant or a child under 25 kg (55 pounds) or 8 years old, it is recommended that you order the infant/child SMART Pads cartridge, available separately. When the Infant/Child Pads cartridge is installed in the OnSite, the OnSite automatically reduces the defibrillation energy to an energy level more appropriate for infants and children. In addition, if optional CPR Coaching is selected, the OnSite provides coaching appropriate for infants and children. Directions for using the infant/child SMART Pads cartridge are provided in Chapter 3, "Using the HeartStart OnSite."*

## 3 USING THE HEARTSTART ONSITE


**IMPORTANT NOTE:** Be sure to read the Reminders section at the end of this chapter as well as the warnings and precautions in Appendix D.

### OVERVIEW

If you think someone is in SCA, act quickly and calmly. *If someone else is available*, ask him or her to call for emergency medical assistance while you get the OnSite. *If you are alone*, follow these steps:

- Call your emergency services provider.
- Quickly get the OnSite and bring it to the victim's side. If there is any delay in getting the defibrillator, check the patient and perform cardiopulmonary resuscitation (CPR) if needed until the OnSite is available.
- If the patient is an infant or child, first perform CPR, then call for emergency medical services (EMS) before you apply the OnSite. See special section on treating infants and children on page 3-5.
- Check the immediate environment for flammable gases. Do not use the OnSite in the presence of flammable gases, such as an oxygen tent. However, it is safe to use the OnSite on someone wearing an oxygen mask.

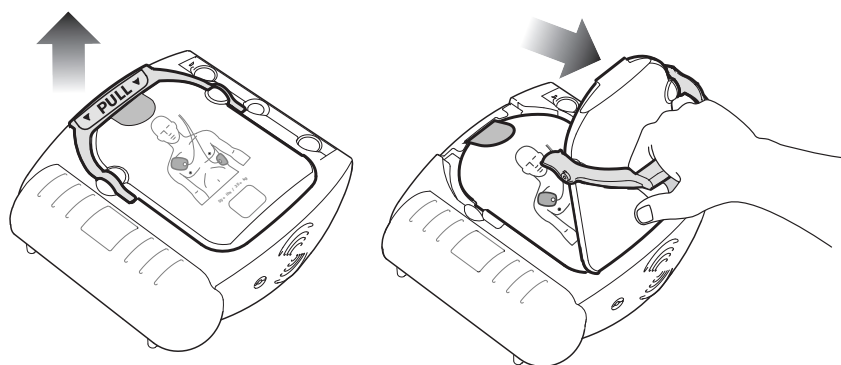
There are three basic steps to using the OnSite to treat someone who may be in sudden cardiac arrest:

1. **PULL** up the handle on the SMART Pads Cartridge.
2. **PLACE** the pads on the patient's bare skin.
3. **PRESS** the flashing Shock button  if instructed.

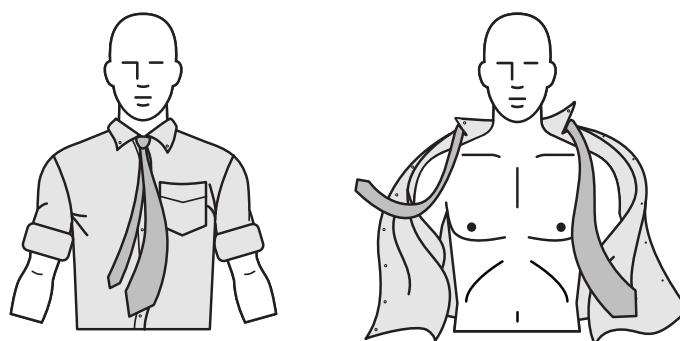
The following pages provide details about each step.

## STEP I: PULL THE GREEN HANDLE

Turn on the OnSite by pulling the SMART Pads Cartridge's green handle.\*  
Remove the hard cover from the pads cartridge and set it aside. Remain calm and follow the OnSite's instructions.



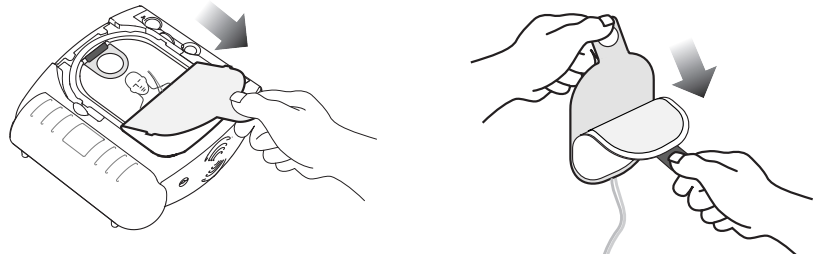
The OnSite starts by directing you to remove all clothes from the patient's chest. If necessary, rip or cut off the clothing to bare the person's chest



\* You can also turn on the OnSite by pressing the green On/Off button.

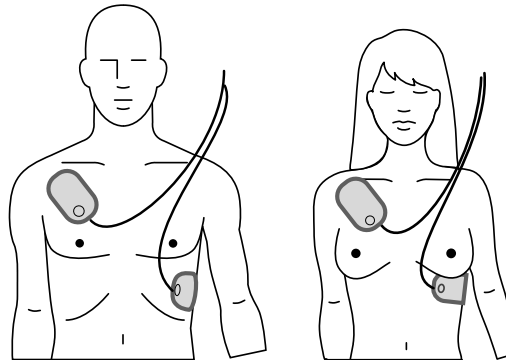
## STEP 2: PLACE THE PADS

Pull the tab at the top of the pads cartridge to peel off the film seal. Inside are two adhesive pads on a plastic liner. Remove the pads from the cartridge.

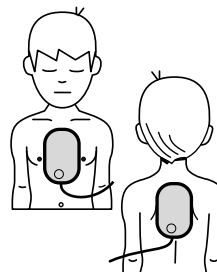


Peel one pad off the liner. Place the pad on the patient's bare skin, *exactly as shown in the picture on the pad*. Press the pad down firmly. Then repeat this with the other pad. Be sure the pads have been removed from the liner before placing them.


*Where to place pads on adults and children over 25 kg/55 pounds or 8 years old (anterior-anterior).*






*Where to place pads on infants or children under 25 kg/55 pounds or 8 years old (anterior-posterior).*




### STEP 3: PRESS THE SHOCK BUTTON

As soon as the OnSite detects that the pads are attached to the patient, it begins analyzing the patient's heart rhythm. It tells you that no one should be touching the patient, and the Caution light  begins flashing as a reminder.


*If a shock is needed:*

The Caution light  goes from flashing to solid, the orange Shock button  starts flashing, and the OnSite tells you to press the flashing orange button. Before you press the button, make sure no one is touching the patient. When you press the Shock button, the OnSite tells you that the shock has been delivered. Then the OnSite tells you it is safe to touch the patient, instructs you to begin CPR, and invites you to press the flashing blue i-button  for CPR Coaching if desired.

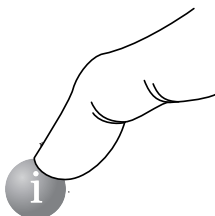
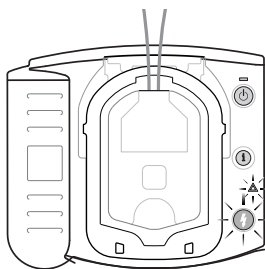
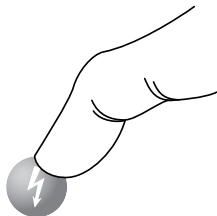
*If a shock is not needed:*

The OnSite tells you it is safe to touch the patient and instructs you to perform CPR if needed. (If CPR is not needed – for example, if the patient is moving or regaining consciousness – follow your local protocol until emergency medical personnel arrive.) Then the OnSite invites you to press the flashing blue i-button  for CPR Coaching, if desired.

*For CPR Coaching:*

Press the flashing blue i-button  during the first 30 seconds of the patient care pause to activate CPR Coaching.\* (If the Infant/Child SMART Pads Cartridge is inserted, CPR Coaching will provide coaching for infant/child CPR.) When the pause is over, the OnSite tells you to stop CPR, so it can analyze the patient's heart rhythm. The motion caused by CPR can interfere with analysis, so be sure to stop all motion when instructed.

\* The default configuration for the OnSite provides CPR Coaching when you press the i-button in this situation; however, the default setting can be revised by your Medical Director using Philips software available separately. See Appendix F for more information.



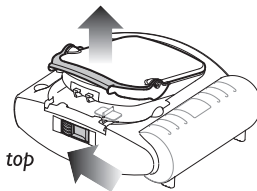
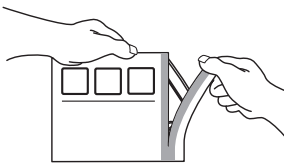
## TREATING INFANTS AND CHILDREN

**WARNING:** Most cardiac arrests in children are not caused by heart problems. When responding to cardiac arrest in an infant or child:

- Provide infant/child CPR while a bystander calls EMS and brings the OnSite.
- If no bystander is available, provide 1-2 minutes of CPR before calling EMS and retrieving the OnSite.
- If you witnessed the child's collapse, call EMS *immediately* and *then* get the OnSite.

Alternatively, follow your local protocol.

If the patient is under 25 kg (55 pounds) or 8 years old, and you have an infant/child SMART Pads Cartridge:



- Remove the Infant/Child Pads Cartridge from its package.\*
- Locate the latch at the top edge of the defibrillator, and slide it to the side. The pads cartridge will be released. Remove the old cartridge.
- Install the new cartridge: slide the bottom end of the cartridge into the recess, then press in the cartridge until the latch clicks into place. Be sure the green handle is pressed down firmly. The OnSite will tell you that infant/child pads have been inserted, then it will turn off to be ready for use.
- Pull the green handle to start the rescue.
- Remove all clothing from the upper body, to bare both the chest and the back. Place one pad in the center of the chest between the nipples, and the other in the center of the back (anterior-posterior).

With the infant/child SMART Pads Cartridge inserted, the OnSite automatically reduces the defibrillation energy from the adult dose of 150 joules to 50 Joules<sup>†</sup> and provides optional infant/child CPR Coaching. Place the pads exactly as shown on the illustration on the pads.

\* Philips recommends that the OnSite be stored with an adult pads cartridge installed, as pediatric cardiac arrest is not common.

† This lower energy level may not be effective for treating an adult.

*If the patient is under 25 kg (55 pounds) or 8 years old, but you do NOT have an infant/child SMART Pads Cartridge:*

- DO NOT DELAY TREATMENT.
- Remove all clothing from the torso, to bare both the chest and the back.
- Apply the OnSite using the adult pads cartridge, but place one pad in the center of the chest between the nipples, and the other in the center of the back (anterior-posterior).

*If the patient is over 25 kg (55 pounds) or 8 years old, or if you are not sure of the exact weight or age:*

- DO NOT DELAY TREATMENT.
- Remove all clothing from the chest.
- Apply the OnSite using the adult pads cartridge, and place the pads as illustrated on the pads (anterior-anterior). Make sure the pads do not overlap or touch each other.

## WHEN EMERGENCY MEDICAL SERVICES ARRIVE

When Emergency Medical Services (EMS) personnel arrive to care for the patient, they may decide to apply another defibrillator to allow monitoring of the patient. The SMART Pads should be removed from the patient prior to using another defibrillator. EMS personnel may want a summary of the last-use data\* stored in the OnSite. To hear the summary data, hold down the i-button until the OnSite beeps.

**NOTE:** After the EMS team removes the SMART Pads from the patient, remove the used pads cartridge, and insert a new pads cartridge before returning the OnSite to service, to be sure it is ready for use.

\* See Chapter 4, "After Using the HeartStart OnSite" for details about data storage.



## REMINDERS

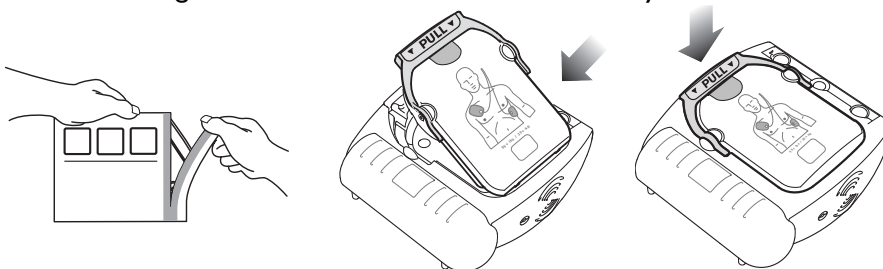
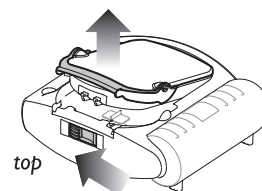
- Remove any medicine patches and residual adhesive from the patient's chest before applying the pads.
- Do not allow the pads to contact other electrodes or metal parts that are in contact with the patient.
- Avoid placing the pads directly over an implanted pacemaker or defibrillator. A noticeable lump with a surgical scar should indicate the position of an implanted device.
- If the pads do not stick well, check that the pads adhesive has not dried out. Each pad has a layer of adhesive gel. If the gel is not sticky to the touch, replace the pads with a new set.
- Keep the patient still and keep any movement around the patient to a minimum during rhythm analysis. Do not touch the patient or the pads while the Caution light is on solid or flashing. If the OnSite is unable to analyze due to electrical "noise" (artifact), it will tell you to stop all movement and remind you not to touch the patient. If the artifact continues for more than 30 seconds, the OnSite will pause briefly to allow you to deal with the source of the noise, then resume analysis.
- The OnSite will not deliver a shock unless you press the flashing orange Shock button. If you do not press the Shock button within 30 seconds after the OnSite tells you to, it will disarm itself, and (for the first CPR interval) give a reminder to make sure emergency medical services have been called, then begin a CPR interval. This is designed to minimize interruption of CPR and help ensure ongoing patient support.
- While waiting for you to press the Shock button, the OnSite will continue to analyze the heart rhythm. If the patient's rhythm changes before you press the Shock button, and a shock is no longer needed, the defibrillator will disarm and tell you a shock is not advised.
- If for any reason you want to turn off the defibrillator during a use, you can press the On/Off button – holding it down for at least one second – to return the device to standby mode.

NOTES

## 4 AFTER USING THE HEARTSTART ONSITE

### AFTER EACH USE

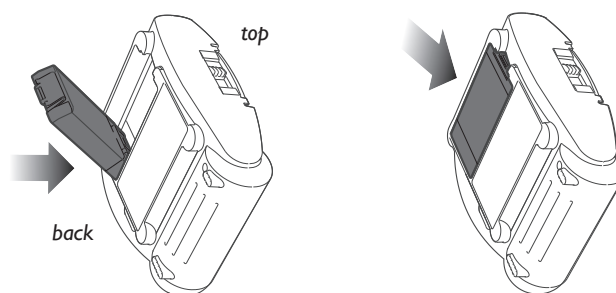
1. Check the outside of the OnSite for signs of damage, dirt, or contamination. If you see signs of damage, contact Philips for technical support. If the OnSite is dirty or contaminated, clean it according to the guidelines in Chapter 5, "Maintaining the HeartStart OnSite."
2. The single-use pads must be replaced after being used. Locate the latch at the top edge of the OnSite and slide it to the side. The pads cartridge will be released. Lift out the used pads cartridge.
3. Remove a new SMART Pads Cartridge from its package and insert the cartridge into the cartridge well on the front of the OnSite. It should click into place when properly seated. The green PULL handle should be all the way down.



**NOTE:** To prevent the pads' adhesive gel from drying out, do not open the hard cover or film seal of the cartridge until you need to use the pads.

4. Check supplies and accessories for damage and expiration dates. Replace any used, damaged or expired items. Use a new maintenance tag to record the pads expiration date for the new installed pads cartridge. If you replace the spare pads and/or battery be sure to record the dates for them on the maintenance tag as described in Chapter 2. Then sign and date the inspection log/maintenance booklet.

5. Unless your protocol requires that the battery remain installed, remove the battery for five seconds, then reinstall it to run the battery insertion self-test to check the operation of the OnSite.\* When the test is complete, check that the green Ready light is blinking.



*Battery installation.*

6. The OnSite will automatically run a self-test when the battery is inserted. Press the Shock button when instructed. Be sure to let the self-test run all the way to completion. When the self-test is over, the OnSite will report the result, and tell you to push the green On/Off button in case of an emergency. (Do not push the green button unless this is an actual emergency.) Then the OnSite will turn off and go to standby mode. The green Ready light will be blinking to show the OnSite is ready for use.†

**NOTE:** Always store the OnSite with a pads cartridge and a battery installed, so it will be ready to use and can perform daily self-tests.

7. Return the OnSite to its storage location so it will be ready for use when needed. Place the updated inspection log/maintenance booklet on the defibrillator wall mount or cabinet.

\* If you leave the battery in the HeartStart after using the defibrillator, then transfer the last-use data to a computer running HeartStart Event Review software, the software will calculate the local date and time of the device use. However, if you remove the battery prior to transferring the data, the software will only show elapsed time.

† As long as a battery is installed, turning the OnSite “off” puts it into standby mode, which means that it is ready for use.

## ONSITE DATA STORAGE

The OnSite automatically stores data about its last clinical use in its internal memory. The stored data can be conveniently transferred to a personal computer or a handheld computer running the appropriate application in the Philips HeartStart Event Review data management software suite. Event Review software is for use by trained personnel only. Information about HeartStart Event Review is available online at [www.philips.com/eventreview](http://www.philips.com/eventreview).

Follow your local protocol with regard to prompt data transfer for medical review after using the OnSite.\* Details about data transfer and timing are provided in Event Review documentation.

The information automatically stored by the OnSite includes a summary of last-use data and detailed data about its last clinical use. You can get a voice summary of information about the last use of the OnSite by holding the i-button down until it beeps once. The OnSite will tell you how many shocks were delivered and how long it has been since it was turned on. Summary data are available anytime the defibrillator is ready for use (the battery and pads are installed, and the defibrillator is not turned on) or while it is actually in use. Removing the battery erases the summary data for the last use.

Last-use data stored in internal memory include:

- ECG recordings (a maximum of 15 minutes following pads application<sup>†</sup>)
- the OnSite's status (entire incident)
- the OnSite's rhythm analysis decisions (entire incident)
- the elapsed time associated with stored events (entire incident)

\* The OnSite automatically stores information about its last clinical use in its internal memory for at least 30 days, so the data can be downloaded to a computer running appropriate Event Review software. (If the battery is removed during this period, the OnSite retains the files. When the battery is reinstalled, the last-use ECG recording will be kept in OnSite memory for an additional 30 days.) After this time, the last-use ECG recordings will automatically be erased to prepare for a future use.

† If ECG recordings from a previous use have not been erased, the maximum time for new ECG recordings may be less.

NOTES

## 5 MAINTAINING THE HEARTSTART ONSITE

### ROUTINE MAINTENANCE

The OnSite is very simple to maintain. The OnSite performs a self-test every day. In addition, a battery insertion self-test is run whenever a battery is installed in the device. The OnSite's extensive automatic self-test features eliminate the need for any manual calibration. The OnSite has no user-serviceable parts.

**WARNING: Electrical shock hazard.** Do not open the OnSite, remove its covers, or attempt repair. There are no user-serviceable components in the OnSite. If repair is required, return the OnSite to Philips for service.

#### REMINDERS:

- Do not leave the OnSite without a pads cartridge installed; the OnSite will start chirping and the i-button will start flashing. For directions on changing the pads cartridge, see Chapter 2, "Setting up the HeartStart OnSite."
- The OnSite runs daily self-tests. As long as the green Ready light is blinking, it is not necessary to test the OnSite by initiating a battery insertion self-test. This uses battery power and risks draining the battery prematurely.

### PERIODIC CHECKS

Other than the checks recommended after each use of the OnSite, maintenance is limited to periodically checking the following:

- Check the green Ready light. If the green Ready light is not blinking, see Troubleshooting Tips, below.
- Replace any used, damaged or expired supplies and accessories
- Check the outside of the OnSite. If you see cracks or other signs of damage, contact Philips for technical support.

Record each periodic check in your inspection log/maintenance booklet.

## CLEANING THE ONSITE

The outside of the OnSite and its carry case can be cleaned with a soft cloth dampened in soapy water, chlorine bleach (2 tablespoons per quart or liter of water), or ammonia-based cleaners.

### REMINDERS:

- Do not use *isopropyl (rubbing) alcohol*, strong solvents such as acetone or acetone-based cleaners, abrasive materials, or enzymatic cleaners to clean your OnSite.
- Do not immerse the OnSite in fluids or allow fluids to spill onto it.
- Do not sterilize the OnSite or its accessories.

## DISPOSING OF THE ONSITE

The OnSite and its accessories should be disposed of in accordance with local regulations.

## READY LIGHT TROUBLESHOOTING TIPS

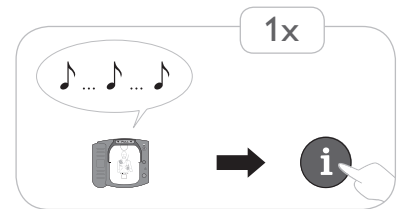
The OnSite's green Ready light is your guide to knowing if the defibrillator is ready for use.

- If the Ready light is blinking: The OnSite has passed the battery insertion self-test and the last periodic self-test and is therefore ready for use.
- If the Ready light is solid: The OnSite is in use or running a self-test.
- If the Ready light is off, the OnSite is emitting a series of single chirps, and the i-button is flashing: A self-test error has occurred, there is a problem with the pads or the battery power is low. Press the i-button for instructions.
- If the Ready light is off, and the OnSite is emitting a series of triple chirps, please call Philips for technical support. See "Troubleshooting a chirping HeartStart" on page 5-3 for more information.
- If the Ready light is off but the OnSite is not chirping and the i-button is not flashing: there is no battery inserted, the battery is depleted, or the OnSite needs repair. Insert/replace battery and run the self-test. As long as the OnSite passes the self-test, you can be assured it is ready for use.

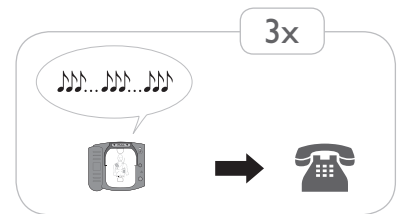


## TROUBLESHOOTING A CHIRPING HEARTSTART

Your Philips AED tests itself at regular intervals to ensure it is ready for use. If your AED emits a series of single chirps (♪ ... ♪ ... ♪ ...), press the blue i-button for information.



A triple-chirp alert (♪♪♪...♪♪♪...♪♪♪...) could mean that a potentially serious problem was detected during self-test that could prevent your AED from delivering therapy in an emergency. If you ever hear your AED emit a series of triple chirps:



- in stand-by mode — please call Philips immediately for technical support at the regional number listed on the back cover of this manual.
- in an emergency rescue — press the flashing blue i-button and follow the voice prompts. Removing and reinserting the battery can clear some errors and equip the device to deliver therapy in a rescue. The battery removal and reinsertion procedure should only be done in an emergency situation. Once the emergency is over, please call Philips immediately for technical support.

**WARNING:** Removing and reinserting the battery one or more times when an AED emits a series of triple chirps may reset the device and cause it to report it is ready for use, though it may be unable to deliver therapy during a rescue. Removing and reinserting the battery when your AED is emitting a pattern of triple chirps should only be done during an emergency. *If your device is emitting a series of triple chirps in stand-by mode, or after an emergency, please remove the AED from service and contact Philips immediately.*

More detailed testing and troubleshooting information is available in Appendix G.

NOTES

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## A ACCESSORIES FOR THE HEARTSTART ONSITE

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Accessories\* for the HeartStart OnSite Defibrillator available separately from your Philips representative or on-line at [www.philips.com/heartstart](http://www.philips.com/heartstart) include:

- Battery (spare recommended) [REF: M5070A]
- Pads
  - Adult SMART Pads Cartridge (spare recommended) [REF: M5071A]
  - Infant/Child SMART Pads Cartridge [REF: M5072A]
- Carry Cases
  - Standard carry case, with paramedic's scissors and room for spare pad cartridge and battery [REF: M5075A]
  - Slim carry case, with paramedic's scissors [REF: M5076A]
  - Plastic waterproof hardshell carry case [REF: YC]
- Fast Response Kit (pouch containing a pocket mask, a disposable razor, two pairs of gloves, a pair of paramedic's scissors, and an absorbent wipe) [REF: 68-PCHAT]
- Cabinets and Wall Mounts
  - AED wall mount bracket [REF: 989803170891]
  - Basic surface-mounted cabinet [REF: 989803136531]
  - Premium surface-mounted cabinet [REF: PFE7024D]
  - Premium semi-recessed cabinet [REF: PFE7023D]
- AED Signage
  - AED awareness placard, red [REF: 989803170901]
  - AED awareness placard, green [REF: 989803170911]
  - AED Wall Sign, red [REF: 989803170921]
  - AED Wall Sign, green [REF: 989803170931]

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\* Certain accessories require a prescription in the United States.

- Data Management Software
  - HeartStart Configure [REF: 861487]
  - HeartStart Data Messenger [REF: 861451]
  - HeartStart Event Review [REF: 861489]
  - HeartStart Event Review Pro [REF: 861431]
  - HeartStart Event Review Pro, upgrade [REF: 861436]
- Infrared cable for use with HeartStart Event Review software [REF:ACT-IR]
- HeartStart OnSite Defibrillator Quick Reference [REF: M5066-97800]
- Training
  - Adult Training Pads Cartridge [REF: M5073A]
  - Adult Training Replacement Pads [REF: M5093A]
  - Adult Pads Placement Guide [REF: M5090A]
  - Infant/Child Training Pads Cartridge [REF: M5074A]
  - Infant/Child Training Replacement Pads [REF: M5094A]
  - Infant/Child Pads Placement Guide [REF: 989803139281]
  - HeartStart OnSite Instructor's Training Toolkit [REF: M5066-89100]
  - HeartStart Trainer [REF: M5085A]
  - Internal Manikin Adapter [REF: M5088A]
  - External Manikin Adapter, 5 pack [REF: M5089A]

## B GLOSSARY OF TERMS

The terms listed in this Glossary are defined in the context of the Philips HeartStart OnSite Defibrillator and its use.

AED	Automated external defibrillator (a semi-automatic defibrillator).
AED mode	The standard treatment mode for the OnSite. It provides voice instructions guiding the rescuer through applying the adhesive pads, waiting for rhythm analysis, and delivering a shock if needed.
analysis	See “SMART analysis.”
arrhythmia	An unhealthy, often irregular, beating of the heart.
artifact	Electrical “noise” caused by sources such as muscle movements, CPR, patient transport, or static electricity that may interfere with rhythm analysis.
battery	The sealed lithium manganese dioxide battery used to power the HeartStart OnSite Defibrillator. It is provided in a pack that fits into a compartment on the back of the defibrillator.
Caution light	A triangular light on the front of the HeartStart OnSite Defibrillator that flashes during rhythm analysis and is on solid when a shock is advised, as a reminder not to touch the patient.
configuration	The settings for all operating options of the HeartStart OnSite Defibrillator, including treatment protocol. The factory default configuration can be modified by authorized personnel using HeartStart Event Review software.
CPR	Cardiopulmonary resuscitation. A technique for providing artificial respiration and heart compressions.
CPR Coaching	Basic verbal instructions for performing cardiopulmonary resuscitation, including hand placement, rescue breathing, compression depth and timing, provided by the OnSite when the flashing blue i-button is pressed during the first 30 seconds of a patient care pause.
defibrillation	Termination of cardiac fibrillation by applying electrical energy.
ECG	Electrocardiogram, a record of the electrical rhythm of the heart as detected through defibrillation pads.
fibrillation	A disturbance of the normal heart rhythm that results in chaotic, disorganized activity that cannot effectively pump blood. Ventricular fibrillation (fibrillation in the lower chambers of the heart) is associated with sudden cardiac arrest.

HeartStart Event Review	A suite of data management software applications for use by trained personnel to review and analyze OnSite patient use and by authorized personnel to alter OnSite configuration. Information is available from Philips Healthcare on the internet at <a href="http://www.philips.com/eventreview">www.philips.com/eventreview</a> .
i-button	An “information” button on the front of the OnSite. If the i-button is pressed during the 30 seconds it flashes during a patient care pause, the OnSite provides CPR Coaching;* if the i-button is pressed when it is flashing and the OnSite is chirping, the OnSite provides troubleshooting guidance. At other times, if the i-button is pressed and held until it beeps once, the OnSite provides summary information about its last clinical use and device status. When the i-button is on solid (not flashing), it indicates the user may safely touch the patient.
infrared communications	A method of sending information using a special part of the light spectrum. It is used to transmit information between the HeartStart OnSite Defibrillator and a computer running HeartStart Event Review software.
NSA	“No Shock Advised,” a decision made by the OnSite that a shock is not needed, based on analysis of the patient’s heart rhythm.
NSA pause	A pause provided by the OnSite following an NSA decision. The pause can be configured to a “standard” NSA pause or a “SMART” NSA pause. During a standard NSA pause the OnSite performs no background monitoring of patient rhythm. During a SMART NSA pause, the defibrillator conducts background monitoring and, if it detects an artifact-free shockable rhythm, will exit the pause and begin rhythm analysis. If the OnSite detects artifact such as that created by CPR, or if the user presses the i-button for CPR Coaching during a SMART NSA pause, the defibrillator will not exit the pause for rhythm analysis in order to allow CPR to be completed uninterrupted.
non-shockable rhythm	A heart rhythm that the OnSite determines is not appropriate for defibrillation.
On/Off button	A green button located on the front of the OnSite. Pressing the On/Off button when the defibrillator is in standby mode turns the defibrillator on; pressing and holding the On/Off button for one second when the OnSite is on turns the defibrillator off and disarms it. In addition, pressing the On/Off button stops the battery insertion self-test that automatically runs when a battery is inserted.
pads	See “SMART pads.”
patient care pause	A defined pause to allow patient assessment, treatment, and/or CPR. See “NSA pause” and “protocol pause.”








\* Pressing the i-button for CPR Coaching during a SMART NSA pause turns off background monitoring.














periodic self-tests	Daily, weekly, and monthly tests automatically conducted by the OnSite when it is in its standby mode. The tests monitor many key functions and parameters of the OnSite, including battery capacity, pads cartridge readiness, and the state of its internal circuitry.
protocol	A sequence of operations performed by the OnSite to direct patient care in the AED mode.
protocol pause	A pause provided by the OnSite after a shock series, during which the responder can administer CPR. The OnSite does not conduct background monitoring of the patient's heart rhythm during this pause.
Ready light	A green LED showing the readiness for use of the OnSite. A blinking Ready light means the OnSite is ready for use; a solid Ready light means the OnSite is being used.
rhythm analysis	See "SMART analysis."
Shock button	An orange button with a lightning bolt symbol on it, located on the front of the OnSite. The Shock button flashes when a shock is advised. You must press the button for the shock to be delivered.
shockable rhythm	A heart rhythm that the OnSite determines is appropriate for defibrillation, such as ventricular fibrillation and some ventricular tachycardias associated with sudden cardiac arrest.
shock series interval	A configurable interval between shocks, used by the OnSite to decide if the shocks are part of the same shock series.
SMART analysis	The proprietary algorithm used by the OnSite to analyze the patient's heart rhythm and determine whether the rhythm is shockable.
SMART biphasic waveform	The patented, low-energy defibrillation shock waveform used by the OnSite. It is an impedance-compensated biphasic waveform. Used with the Adult SMART Pads, it delivers 150 Joules, nominal, into a 50 ohm load; used with the Infant/Child SMART Pads, it delivers 50 Joules, nominal, into a 50 ohm load.
SMART NSA pause	See "NSA pause."
SMART Pads	The adhesive pads, supplied in a cartridge, used with the OnSite. Pulling the handle on the cartridge turns on the OnSite and opens the cartridge. The pads are applied to the patient's bare skin and used to detect the patient's heart rhythm and to transfer the defibrillation shock. Only HeartStart SMART Pads can be used with the OnSite.
standby mode	The operating mode of the HeartStart OnSite Defibrillator when a battery has been installed, and the unit is turned off and ready for use when needed. Shown by blinking green READY light.








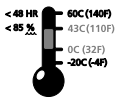




standard NSA pause	See “NSA pause.”
sudden cardiac arrest (SCA)	Sudden cardiac arrest is the abrupt cessation of the heart’s normal pumping of blood, frequently caused by an electrical malfunction in the heart. SCA results in a stoppage of blood flow, absent or abnormal breathing, and unconsciousness.
waveform	See “SMART biphasic waveform.”














## C GLOSSARY OF SYMBOLS/CONTROLS

symbol	description
	Pads cartridge handle. Green. Pulling the handle turns on the OnSite and opens pads cartridge for use.
	Refer to operating instructions.
	On/Off button. Green. Pressing the On/Off button when the OnSite is in standby mode turns the OnSite on; pressing and holding the On/Off button for one second when the OnSite is on turns the OnSite off and disarms the defibrillator. In addition, pressing the On/Off button stops the battery insertion self-test that automatically runs when a battery is inserted.
	Information button (i-button). Pressing the i-button while it is flashing during a patient care pause provides CPR Coaching; pressing it while it is flashing and the OnSite is chirping provides troubleshooting guidance. Pressing it until it beeps at other times provides summary information about the OnSite's last clinical use and device status.
	Caution light. Flashes during rhythm analysis, and is on but not flashing when a shock is advised, as a reminder not to touch the patient.
	Shock button. Orange. Flashes when the OnSite is charged. If a shock is needed, the OnSite directs the user to press the Shock button to deliver a shock to the patient.
	Defibrillation protection. Defibrillation protected, type BF patient connection.

symbol	description
	Meets the requirements of the applicable European Directives, including RoHS Directive 2011/65/EU, The Restriction of the Use of Certain Hazardous Substances in Electrical and Electronic Equipment.
	Meets the requirements of the European Medical Device Directive 93/42/EEC. The four numerical digits indicate the identification number of the Notified Body involved in assessing the product's conformity with the directive.
	Device manufacturer.
	Indicates the AHA/ERC/ILCOR resuscitation Guidelines version for which the device is optimized (expressed as a year).
	Certified by the Canadian Standards Association.
	Reference order number.
	Authorized EU representative.
	Expiration date.
	Lithium manganese dioxide battery.
	One battery in package.
	Do not crush the battery.
	Do not expose the battery to high heat or open flames. Do not incinerate the battery.
	Do not mutilate the battery or open the battery case.

symbol	description
	<p>Class 9 miscellaneous dangerous goods. (Symbol required on outer packaging by freight carrier regulations to identify shipments containing lithium batteries.)</p>
	<p>Install the battery in the defibrillator before the date (MM-YYYY) shown on the associated label.</p>
	<p>Needs to be protected from moisture.</p>
	<p>Handle with care.</p>
	<p>This side up.</p>
	<p>Transportation requirements (refer to associated thermometer symbol).</p>
	<p>Storage requirements (refer to associated thermometer symbol).</p>
	<p>Environmental requirements for transportation (black text) and storage (gray text).</p>
	<p>Environmental requirements.</p>
	<p>Relative humidity requirements.</p>
	<p>These pads are disposable and are for single patient use only.</p>
	<p>Cartridge contents: one set of two defibrillation pads.</p>

symbol	description
	Store the pads at temperatures between 0° and 50° C (32° and 122° F).
	This product is not sterile.
	This product is not made with natural rubber latex.
	Pads intended for use on infant or child under 8 years or 25 Kg (55 lb).
	Expiration (see associated date code).
	Serial number.
	Lot number.
Rx only	Federal law (USA) restricts this device to sale by or on the order of a physician.
	Do not use the HeartStart in a magnetic resonance environment.
	Wastes must be discarded in an environmentally sound manner in compliance with local regulations.
	Printed on recycled paper.
MADE IN USA	Made in USA.
	Example of the Unique Device Identification (UDI) bar-code

## D WARNINGS AND PRECAUTIONS

It is important to understand how to use your HeartStart OnSite Defibrillator safely. Please read these warnings and precautions carefully.

A **warning** describes something that could cause serious personal injury or death. A **precaution** describes something that could cause minor personal injury, damage to the OnSite, loss of data stored in the OnSite, or less chance of successful defibrillation.

**NOTE:** The HeartStart OnSite Defibrillator is designed to be used only with Philips-approved accessories. The OnSite may perform improperly if non-approved accessories are used.

### WARNINGS

flammable gases	If the OnSite is used to give a shock in the presence of flammable gases such as in an oxygen tent, there is a risk of explosion. Move supplemental oxygen and oxygen delivery devices away from the defibrillation pads. (However, it is safe to use the OnSite on someone wearing an oxygen mask.)
battery	The HeartStart M5070A battery is not rechargeable. Do not try to recharge, open, crush, or burn the battery, or it may explode or catch fire.
fluids	Do not let fluids get into the OnSite. Avoid spilling any fluids on the OnSite or its accessories. Spilling fluids into the OnSite may damage it or cause a fire or shock hazard. Do not sterilize the OnSite or its accessories.
accessories	Using damaged or expired equipment or accessories may cause the OnSite to perform improperly, and/or injure the patient or the user.
patient handling	Performing CPR or otherwise handling or moving the patient while the OnSite is analyzing heart rhythm can cause an incorrect or delayed analysis. If the OnSite tells you a shock is advised while you are handling or moving the patient, stop the vehicle or CPR and keep the patient as still as possible for at least 15 seconds. This will give the OnSite time to reconfirm the analysis before telling you to press the Shock button.
cell phones	The OnSite can work correctly when it is fairly close to equipment like emergency two-way radios and cell phones. Normally, using a cell phone near the patient should not cause a problem for the OnSite. However, it is best to keep such equipment only as close as necessary to the patient and the OnSite.

- pads Do not allow the pads to contact other electrodes or metal parts that are in contact with the patient.
- children Keep the HeartStart out of reach of children to avoid the potential risk of inhalation or swallowing of small parts or strangulation by pads cables.

#### PRECAUTIONS

- device handling The OnSite was designed to be sturdy and reliable for many different use conditions. However, handling the OnSite too roughly can damage it or its accessories and will invalidate the warranty. Check the OnSite and accessories regularly for damage, according to directions.
- maintenance Improper maintenance may damage the OnSite or cause it to function improperly. Maintain the OnSite according to directions.
- skin burns Do not let the pads touch each other or other electrodes, lead wires, dressings, medicine patches, etc. Such contact can cause electrical arcing and skin burns during a shock and may also divert the electrical current away from the patient's heart. During a shock, air pockets between the skin and pads can cause skin burns. To help prevent air pockets, make sure pads stick well to the skin. Do not use dried out pads because they will not provide good contact with the skin.
- patient handling Before delivering a shock, it is important to disconnect the patient from other medical electrical equipment, such as blood-flow meters, that may not incorporate defibrillation protection. In addition, make sure the pads are not in contact with metal objects such as a bed frame or stretcher.

## E TECHNICAL INFORMATION

### HEARTSTART ONSITE DEFIBRILLATOR SPECIFICATIONS

The specifications provided in the following tables are nominal values. Additional information can be found in the *Technical Reference Manuals* for HeartStart Automated External Defibrillators, located online at [www.philips.com/productdocs](http://www.philips.com/productdocs).

#### PHYSICAL

category	specifications
size	7.2cm H x 19cm D x 21cm W (2.85" H x 7.40" D x 8.30" W).
weight	Approximately 1.5 kg (3.3 lbs) with battery and pads cartridge installed.

#### ENVIRONMENTAL

category	specifications
temperature and relative humidity	<p>Operating (battery and pads cartridge installed): 0° to 50° C (32° to 122° F); 0% to 95% RH (non-condensing).</p> <p>Standby (between uses with battery and pads cartridge installed): 10° to 43° C (50° to 109° F); 10% to 75% RH (non-condensing).</p> <p>Storage/shipping (with battery and pads cartridge): -20° to 60° C (-4° to 140° F) for up to 2 days; 0% to 85% RH (non-condensing).</p>
altitude	Operates at 0 to 4,572 m (15,000 feet); can be stored at up to 2,591 m (8,500 feet), in standby mode.
atmospheric pressure	Operates at 1013 hPa to 590 hPa; can be stored at up to 750 hPa, in standby mode.
shock/drop abuse tolerance	Withstands 1 meter (3.3 foot) drop to any edge, corner, or surface.

category	specifications
vibration	Operating: meets ENI789 random, road ambulance. Standby: meets ENI789 swept sine, road ambulance.
sealing	Meets IEC 60529 class IP21. Protected against access to hazardous parts with a finger and protected against ingress of solid foreign objects of 1.25 cm (0.5 in) diameter and greater per IEC 60529 class IP2x. Protected against a uniform flow of water drops over the defibrillator per IEC 60529 class IPx1.
ESD/EMI (radiated and immunity)	See Electromagnetic Conformity tables.

#### CONTROLS AND INDICATORS

category	specifications
controls	Green SMART Pads Cartridge handle Green On/Off button i-button (flashes blue) Orange Shock button
indicators	Ready light: green; blinks when the OnSite is in standby mode (ready for use); solid when the defibrillator is being used. i-button: flashes blue when information is available, on solid during patient care pause. Caution light: flashes when the OnSite is analyzing, comes on solid when the OnSite is ready to deliver a shock. Shock button: orange, flashes when the OnSite is charged and ready to deliver a shock.
audio speaker	Provides voice prompts and warning tones during normal use.
beeper	Provides chirps when troubleshooting is needed.



## DEFIBRILLATION WAVEFORM

category	specifications																																																																																										
<p>waveform parameters</p>	<p>Biphasic truncated exponential. Waveform parameters are automatically adjusted as a function of patient defibrillation impedance. In the diagram at left, D is the duration of phase 1 and E is the duration of phase 2 of the waveform, F is the interphase delay (500 <math>\mu</math>s), and <math>I_p</math> is the peak current.</p> <p>The OnSite delivers shocks to load impedances from 25 to 180 ohms. The duration of each phase of the waveform is dynamically adjusted based on delivered charge, in order to compensate for patient impedance variations, as shown below:</p> <table style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="5" style="text-align: center;">adult defibrillation</th> </tr> <tr> <th>load resistance (<math>\Omega</math>)</th> <th>phase 1 duration (ms)</th> <th>phase 2 duration (ms)</th> <th>peak current (A)</th> <th>delivered energy (J)</th> </tr> </thead> <tbody> <tr><td>25</td><td>2.8</td><td>2.8</td><td>55</td><td>128</td></tr> <tr><td>50</td><td>4.5</td><td>4.5</td><td>32</td><td>150</td></tr> <tr><td>75</td><td>6.3</td><td>5.0</td><td>23</td><td>155</td></tr> <tr><td>100</td><td>8.0</td><td>5.3</td><td>18</td><td>157</td></tr> <tr><td>125</td><td>9.7</td><td>6.4</td><td>14</td><td>159</td></tr> <tr><td>150</td><td>11.5</td><td>7.7</td><td>12</td><td>160</td></tr> <tr><td>175</td><td>12.0</td><td>8.0</td><td>11</td><td>158</td></tr> </tbody> </table> <table style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="5" style="text-align: center;">pediatric defibrillation (using M5072A infant/child reduced-energy defibrillator pads)</th> </tr> <tr> <th>load resistance (<math>\Omega</math>)</th> <th>phase 1 duration (ms)</th> <th>phase 2 duration (ms)</th> <th>peak current (A)</th> <th>delivered energy (J)</th> </tr> </thead> <tbody> <tr><td>25</td><td>4.1</td><td>2.8</td><td>24</td><td>35</td></tr> <tr><td>50</td><td>5.1</td><td>3.4</td><td>16</td><td>46</td></tr> <tr><td>75</td><td>6.2</td><td>4.1</td><td>12</td><td>52</td></tr> <tr><td>100</td><td>7.2</td><td>4.8</td><td>10</td><td>54</td></tr> <tr><td>125</td><td>8.3</td><td>5.5</td><td>8</td><td>56</td></tr> <tr><td>150</td><td>9.0</td><td>6.0</td><td>7</td><td>57</td></tr> <tr><td>175</td><td>9.0</td><td>6.0</td><td>6</td><td>55</td></tr> </tbody> </table>	adult defibrillation					load resistance ( $\Omega$ )	phase 1 duration (ms)	phase 2 duration (ms)	peak current (A)	delivered energy (J)	25	2.8	2.8	55	128	50	4.5	4.5	32	150	75	6.3	5.0	23	155	100	8.0	5.3	18	157	125	9.7	6.4	14	159	150	11.5	7.7	12	160	175	12.0	8.0	11	158	pediatric defibrillation (using M5072A infant/child reduced-energy defibrillator pads)					load resistance ( $\Omega$ )	phase 1 duration (ms)	phase 2 duration (ms)	peak current (A)	delivered energy (J)	25	4.1	2.8	24	35	50	5.1	3.4	16	46	75	6.2	4.1	12	52	100	7.2	4.8	10	54	125	8.3	5.5	8	56	150	9.0	6.0	7	57	175	9.0	6.0	6	55
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category	specifications												
energy* (pediatric doses indicated are based on CDC growth charts for the 50th percentile weights.)	<p>Using HeartStart Adult SMART Pads: 150 J nominal (<math>\pm 15\%</math>) into a 50 ohm load. Using HeartStart Infant/Child SMART Pads: 50 J nominal (<math>\pm 15\%</math>) into a 50 ohm load. Sample pediatric energy doses:</p> <table border="1"> <thead> <tr> <th>age</th> <th>energy dose</th> </tr> </thead> <tbody> <tr> <td>newborn</td> <td>14 J/kg</td> </tr> <tr> <td>1 year</td> <td>5 J/kg</td> </tr> <tr> <td>2 – 3 years</td> <td>4 J/kg</td> </tr> <tr> <td>4 – 5 years</td> <td>3 J/kg</td> </tr> <tr> <td>6 – 8 years</td> <td>2 J/kg</td> </tr> </tbody> </table> <p>* National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion. <i>CDC growth charts: weight-for-age percentiles, modified</i> November 21, 2000. Atlanta, GA: Centers for Disease Control and Prevention © 2000.</p>	age	energy dose	newborn	14 J/kg	1 year	5 J/kg	2 – 3 years	4 J/kg	4 – 5 years	3 J/kg	6 – 8 years	2 J/kg
age	energy dose												
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6 – 8 years	2 J/kg												
charge control	Controlled by Patient Analysis System for automated operation.												
“charge complete” indicator	Shock button flashes, audio tone sounds.												
shock-to-shock cycle time	<20 seconds, typical, including analysis.												
patient care pause-to-shock time	Quick Shock. 8 seconds, typical, from end of patient care pause to shock delivery.												
disarm (AED mode)	<p>Once charged, the defibrillator will disarm if:</p> <ul style="list-style-type: none"> <li>• the patient’s heart rhythm changes to non-shockable rhythm,</li> <li>• a shock is not delivered within 30 seconds after the OnSite has charged for shock delivery,</li> <li>• the On/Off button is pressed and held down for at least one (1) second to turn off the OnSite,</li> <li>• the adhesive pads are removed from the patient or the pads cartridge is disconnected from the OnSite,</li> <li>• the battery is removed or is completely depleted or</li> <li>• the impedance between pads is out of range.</li> </ul>												
adult shock delivery vector	Via adhesive pads placed in the anterior-anterior (Lead II) position.												
infant/child shock delivery vector	Via adhesive pads typically placed in the anterior-posterior position.												

## ECG ANALYSIS SYSTEM

category	specifications
function	Evaluates impedance of adhesive pads for proper contact with the patient's skin, and evaluates the ECG rhythm and signal quality to determine if a shock is appropriate.
shockable rhythms	Ventricular fibrillation (VF) and some ventricular tachycardias associated with a lack of circulation, including ventricular flutter and polymorphic ventricular tachycardia (VT). The HeartStart uses multiple parameters to determine if a rhythm is shockable.  <i>NOTE: For patient safety reasons, some very low-amplitude or low-frequency rhythms may not be interpreted as shockable VF rhythms. Also, some VT rhythms usually associated with circulation will not be interpreted as shockable rhythms.</i>
non-shockable rhythms	SMART Analysis is designed to detect non-shockable rhythms as defined by AHA/AAMI DF-80. See following table. On detection of any non-shockable rhythm, the HeartStart prompts user to perform CPR if needed.
pacemaker detection	Pacemaker artifact is removed from the signal for rhythm analysis.
artifact detection	If electrical "noise" (artifact) is detected which interferes with accurate rhythm analysis, analysis will be delayed until the ECG signal is clean.
analysis protocol	Depending on results of analysis, either prepares for shock delivery or provides a pause. For details of protocol, see Appendix F, "Configuration."

## ECG ANALYSIS PERFORMANCE

rhythm class	ECG test sample <sup>a</sup> size	meets AHA recommendations <sup>b</sup> for adult defibrillation	
		observed performance	90% one-sided lower confidence limit
shockable rhythm — ventricular fibrillation	300	sensitivity >90% (meets AAMI DF80 requirement)	(87%)
shockable rhythm — ventricular tachycardia	100	sensitivity >75% (meets AAMI DF80 requirement)	(67%)
non-shockable rhythm — normal sinus rhythm	300	specificity >99% (meets AAMI DF80 requirement)	(97%)
non-shockable rhythm — asystole	100	specificity >95% (meets AAMI DF80 requirement)	(92%)
non-shockable rhythm — all other non-shockable rhythms <sup>c</sup>	450	specificity >95% (meets AAMI DF80 requirement)	(88%)

a. From Philips Medical Systems ECG rhythm databases.

b. American Heart Association (AHA) AED Task Force, Subcommittee on AED Safety & Efficacy. Automatic External Defibrillators for Public Access Use: Recommendations for Specifying and Reporting Arrhythmia Analysis Algorithm Performance, Incorporation of New Waveforms, and Enhancing Safety. *Circulation* 1997;95:1677-1682.

c. Supraventricular tachycardia (SVT) is specifically included in the non-shockable rhythm class, in accordance with AHA recommendations<sup>b</sup> and the AAMI standard DF80.

## ACCESSORIES SPECIFICATIONS

### BATTERY M5070A

category	specifications
battery type	9 VDC, 4.2 Ah, lithium manganese dioxide. Disposable, long-life primary cell.
capacity	When new, a minimum of 200 shocks or 4 hours of operating time at 25° C (77° F).
shelf life (prior to insertion)	A minimum of 5 years from date of manufacture when stored and maintained according to directions provided in this <i>Owner's Manual</i> .
standby life (after insertion)	Typically, 4 years when stored and maintained according to directions provided in this <i>Owner's Manual</i> .
training life	Supports 10 hours of use in training mode.

### HEARTSTART ADULT SMART PADS M5071A AND INFANT/CHILD SMART PADS M5072A

category	specifications
adult pads	Disposable, adhesive defibrillation pads with a nominal active surface area of 85 cm <sup>2</sup> each, provided in a snap-in cartridge with an integrated 137.1 cm (54"), typical, cable.
infant/child pads	Disposable, adhesive defibrillation pads with a nominal active surface area of 85 cm <sup>2</sup> each, provided in a snap-in cartridge with an integrated 101.6 cm (40"), typical, cable. Cartridge incorporates teddy bear icon on cover of seal for ready identification.
defibrillation pad requirements	Use only HeartStart Adult SMART Pads M5071A or Infant/Child SMART Pads M5072A with the HeartStart OnSite Defibrillator.

## ENVIRONMENTAL CONSIDERATIONS

By complying with your national regulations regarding disposal of electric, electronic, and battery waste, you can make a positive contribution to our shared environment. Such waste can introduce harmful elements into the environment as a whole and may also endanger human health.

product	information
defibrillator	The defibrillator contains electronic components. Do not dispose of it as unsorted municipal waste. Collect such electronic waste separately and dispose of it at an appropriate recycling facility according to your country's regulations.
battery	The battery cells contain chemicals. The chemistry used in each battery is identified by a symbol on the label; symbols are defined in the defibrillator User's Guide/Instructions for Use/Owner's Manual. Recycle the battery at an appropriate recycling facility.
pads	The used pads may be contaminated with body tissue, fluid, or blood. Cut them off and dispose of them as infectious waste. Recycle the remaining cartridge components at an appropriate recycling facility in accordance with local regulations.

The Registration, Evaluation, Authorization, and Restriction of Chemicals (REACH), a European Union regulation, requires Philips Healthcare to provide chemical content information for Substances of Very High Concern (SVHC) if they are present above 0.1% of the article weight. The SVHC list is updated on a regular basis. Therefore, refer to the following Philips REACH website for the most up-to-date list of products containing SVHC above the threshold: <http://www.philips.com/about/sustainability/REACH.page>

## F CONFIGURATION

### OVERVIEW

The Philips HeartStart OnSite Defibrillator comes with a factory default configuration designed to meet the needs of most users. This configuration can only be changed by an authorized person using HeartStart Configure software. This software is for use by trained personnel. Information about HeartStart data management products is available online at [www.philips.com/eventreview](http://www.philips.com/eventreview).

### DEVICE OPTIONS

The following table includes the features of HeartStart OnSite Defibrillator operation that are not related to patient treatment.

parameter	settings	default	default description
speaker volume	1, 2, 3, 4, 5, 6, 7, 8	8	The volume of the OnSite's speaker is set to 8, highest.
auto send periodic self-test (PST) data	On, Off	On	Enables the periodic self-test data to be broadcast through the device's infrared data port.
ECG out data	On, Off	On	Enables the ECG data to be broadcast through the device's infrared data port.

## PATIENT TREATMENT PROTOCOL OPTIONS

parameter	settings	default	default description
“call EMS” voice reminder timing	<ul style="list-style-type: none"> <li>• At power on (when the user turns on the OnSite)</li> <li>• At power on and at the start of the first patient care pause</li> <li>• At the start of the first patient care pause</li> <li>• No reminder</li> </ul>	At the start of the first patient care pause	Provides a voice reminder to make sure emergency medical services have been called, at the start of the first patient care pause.
shock series	1, 2, 3, 4	1	<p>The automatic protocol pause for CPR is activated each time a shock is delivered.</p> <p>During the protocol pause, the OnSite does not perform rhythm analysis.</p> <p>The length of the protocol pause after a shock series is completed is determined by the protocol pause timer setting.</p>
shock series interval (minutes)	1.0, 2.0, ∞ (infinity)	1.0	<p>A delivered shock must occur within 1 minute of the previous shock to be counted as part of the current shock series.</p> <p><i>NOTE: This parameter is only applicable when the shock series is not configured to the default 1 shock.</i></p>

\* A shock series begins when a shock is delivered after the OnSite is turned on. A new shock series begins after a protocol pause. If shock series is configured for 2 or more, a new shock series also begins if the time since the previous shock exceeds the shock series interval setting.



parameter	settings	default	default description
protocol pause timer (minutes)	0.5, 1.0, 1.5, 2.0, 2.5, 3.0	2.0	<p>A 2-minute protocol pause for CPR automatically starts after voice instruction is given when a shock series is completed. After the protocol pause, the defibrillator returns to rhythm analysis.</p> <p>If the user presses the i-button for optional CPR coaching, the OnSite provides coaching for 5 cycles of CPR, starting and ending with compressions, when the CPR Coaching parameters are also set to their default values. The number of CPR cycles varies for other protocol pause timer and CPR Coaching parameter settings.</p> <p><i>NOTE: Because the protocol pause ends upon completion of a CPR cycle in order to maximize the benefits of CPR, the actual duration of the pause may differ slightly from the timer setting.</i></p>
NSA pause type	<ul style="list-style-type: none"> <li>Standard NSA pause: OnSite does not perform rhythm analysis during the NSA pause.</li> <li>SMART NSA pause: OnSite conducts background monitoring during the SMART NSA pause. If a potentially shockable rhythm is detected, OnSite terminates the SMART NSA pause and resumes rhythm analysis.</li> </ul>	SMART NSA pause	<p>During a SMART NSA pause, the defibrillator conducts background monitoring. If a potentially shockable rhythm is detected in a motionless patient, the defibrillator terminates the SMART NSA pause and resumes rhythm analysis.</p> <p><i>NOTE: If the OnSite detects CPR in progress or if the responder has pressed the i-button for CPR Coaching, the SMART NSA pause will be converted to a standard NSA pause. During the standard NSA pause, the defibrillator does not perform rhythm analysis.</i></p>



parameter	settings	default	default description
NSA pause timer (minutes)	0.5, 1.0, 1.5, 2.0, 2.5, 3.0	2.0	<p>A 2-minute NSA pause for CPR automatically starts after voice instruction is given when no shock is advised (NSA).*</p> <p>If the user presses the i-button for optional CPR coaching, the OnSite provides coaching for 5 cycles of CPR, starting and ending with compressions, when the CPR Coaching parameters are also set to their default values. The number of CPR cycles varies for other NSA pause timer and CPR Coaching parameter settings.</p> <p><i>NOTE: Because the NSA pause ends upon completion of a CPR cycle in order to maximize the benefits of CPR, the actual duration of the pause may differ slightly from the timer setting.</i></p>
CPR prompt	<ul style="list-style-type: none"> <li>• CPR1: Instructs the user to begin CPR.</li> <li>• CPR2: Instructs the user that it is safe to touch the patient and to begin CPR.</li> <li>• CPR3: Instructs the user to begin CPR and to press the i-button for CPR Coaching.</li> <li>• CPR4: Instructs the user that it is safe to touch the patient, to begin CPR, and to press the i-button for CPR Coaching.</li> </ul>	<p>CPR4: Instructs the user that it is safe to touch the patient, to begin CPR, and to press the i-button for CPR Coaching.</p>	<p>The CPR reminder voice instructions provided at the beginning of a pause interval assures the user that it is safe to touch the patient, instructs the user to begin CPR, and invites the user to press the i-button for guidance in the basic steps of CPR.</p> <p><i>NOTE: CPR Coaching is available only with the CPR3 and CPR4 settings.</i></p>

\* If the shock series is configured to 2 or more, and a shock has been delivered as part of a series, the length of the first NSA pause within that shock series is determined by the protocol pause timer setting. Otherwise, the length of an NSA pause is determined by the NSA pause timer setting.

parameter	settings	default	default description
CPR Coaching adult ventilation instruction	Yes, No	Yes	Optional CPR Coaching includes rescue breaths at the rate determined by the CPR Coaching compression:ventilation ratio for adults when an adult pads cartridge is installed. <i>NOTE: if this parameter is configured to NO, CPR Coaching will always be compressions-only when an adult pads cartridge is installed.</i>
CPR Coaching infant/child ventilation instruction	Yes, No	Yes	Optional CPR Coaching includes rescue breaths at the rate determined by the CPR Coaching compression:ventilation ratio for infants and children when an infant/child pads cartridge is installed. <i>NOTE: if this parameter is configured to NO, CPR Coaching will always be compressions-only when an infant/child pads cartridge is installed.</i>
CPR Coaching compression:ventilation ratio	<ul style="list-style-type: none"> <li>• 30:2 adult and 30:2 infant/child</li> <li>• 30:2 adult and 15:2 infant/child</li> <li>• 15:2 adult and 15:2 infant/child</li> </ul>	30:2 adult and 30:2 infant/child	If the user presses the i-button for optional CPR Coaching during a protocol pause or NSA pause, the OnSite provides coaching in basic CPR for cycles of 30 compressions and 2 ventilations for adults, children, and infants. Pauses begin and end with compressions.

NOTES

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## G TESTING AND TROUBLESHOOTING

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### TESTING

As long as a battery is installed, the HeartStart OnSite Defibrillator automatically tests itself every day and alerts you if it finds a problem. The self-test includes pads readiness testing. In addition, it runs a pads self-test each time a pads cartridge is inserted. It alerts you if it finds a problem. See the *Technical Reference Manuals*, available online at [www.philips.com/productdocs](http://www.philips.com/productdocs), for a detailed discussion of the self-tests.

You can also test the OnSite at any time by removing the battery for five seconds then reinstalling it. This test takes about one minute. Because the battery insertion self-test is very detailed and uses battery power, running it more often than necessary will drain the battery prematurely. It is recommended that you run the battery insertion self-test only:

- when the defibrillator is first put into service.
- after each time the defibrillator is used to treat a patient.
- when the battery is replaced.
- when the defibrillator may have been damaged.

If you need to use the defibrillator in an emergency while you are running a battery self-test, pull the SMART Pads Cartridge handle to stop the test and to turn on the HeartStart for use.

### TROUBLESHOOTING

The OnSite's green Ready light is the signal that tells you if the defibrillator is ready for use. The defibrillator also uses chirps and the i-button flashes to alert you to a problem.

### RECOMMENDED ACTION DURING AN EMERGENCY

If for any reason the OnSite does not turn on when you pull the SMART Pads Cartridge handle, press the On/Off button.

If that does not turn on the defibrillator, remove the battery and replace it with a new battery if available and press the On/Off button to turn on the

defibrillator. If no spare battery is available, remove the installed battery for five seconds, then reinsert it and run a battery insertion self-test.

If the problem continues, do not use the OnSite. Attend to the patient, providing CPR if needed, until Emergency Medical Services Personnel arrive.

## TROUBLESHOOTING WHILE THE ONSITE IS IN USE

(green Ready light is solid)

OnSite tells you:	possible cause	recommended action
... to replace the battery immediately	The battery is nearly depleted. The OnSite will turn off if a new battery is not inserted.	Replace the battery with a new battery immediately.
... there is no cartridge installed, and ... to insert a pads cartridge	<ul style="list-style-type: none"> <li>The pads cartridge has been removed.</li> <li>The pads cartridge has been damaged.</li> </ul>	Insert a new pads cartridge.
... to press the pads firmly to the skin ... to make sure the pads have been removed from the liner ... the pads should not be touching the patient's clothing.	<ul style="list-style-type: none"> <li>The pads are not properly applied to the patient.</li> <li>The pads are not making good contact with the patient's bare chest because of moisture or excessive hair.</li> <li>The pads are touching each other.</li> <li>The pads may not have been removed from the liner or may be on the patient's clothing.</li> </ul>	<ul style="list-style-type: none"> <li>Make sure that the pads are sticking completely to the patient's skin.</li> <li>If the pads are not sticking, dry the patient's chest and shave or clip any excessive chest hair.</li> <li>Reposition the pads.</li> <li>Make sure the pads are not on the liner or the patient's clothing.</li> </ul> <p>If the voice instruction continues after you do these things, insert another pads cartridge.</p>
... to insert new pads cartridge	The pads cartridge has been opened and the pads peeled off the liner, but the pads have not been successfully attached to the patient. There may be a problem with the pads cartridge.	Replace the damaged pads cartridge. Pull up the handle on the cartridge cover, and replace pads on patient with new pads to continue with the rescue.

OnSite tells you:	possible cause	recommended action
... to stop all motion	<ul style="list-style-type: none"> <li>• The patient is being moved or jostled.</li> <li>• The environment is dry and movement around the patient is causing static electricity to interfere with ECG analysis.</li> <li>• Radio or electrical sources are interfering with ECG analysis.</li> </ul>	<ul style="list-style-type: none"> <li>• Stop CPR; do not touch the patient. Minimize patient motion. If the patient is being transported, stop the vehicle.</li> <li>• Responders and bystanders should minimize motion, particularly in dry environments that can generate static electricity.</li> <li>• Check for possible causes of radio and electrical interference and turn them off or remove them from the area.</li> </ul>
... the shock was not delivered	<ul style="list-style-type: none"> <li>• The pads may not be making good contact with the patient's skin.</li> <li>• The pads may be touching each other.</li> <li>• The pads may be damaged.</li> </ul>	<ul style="list-style-type: none"> <li>• Press the pads firmly to the patient's chest.</li> <li>• Make sure the adhesive pads are correctly positioned on the patient.</li> <li>• Replace the pads if necessary.</li> </ul>
... the shock button was not pressed	Shock has been advised but the shock button has not been pressed within 30 seconds.	When next prompted, press the Shock button to deliver shock.

## TROUBLESHOOTING WHILE THE ONSITE IS NOT IN USE

(green Ready light is *not* on)

**NOTE:** In the event of a triple-chirp alert, even if the failure is cleared by a battery insertion test, please contact Philips for service. In the event of repeated instances of a self-test failure resulting in single-chirp alerts, even if such failures are cleared by a battery insertion test, please contact Philips for service.

behavior	recommended action	
chirps or i-button flashes	<ul style="list-style-type: none"> <li>• The battery power is low or the pads cartridge needs to be replaced.</li> <li>• The defibrillator may have been turned off without a pads cartridge installed, or the installed pads cartridge may not have its hard cover in place.</li> <li>• The training pads cartridge has been left in the defibrillator.</li> <li>• The defibrillator has been stored outside the recommended temperature range.</li> <li>• The defibrillator has detected an error during a self-test or cannot perform a self-test, or the Shock button is damaged.</li> </ul>	<ul style="list-style-type: none"> <li>• Press the flashing blue i-button. Replace the battery or pads cartridge if instructed.</li> <li>• Make sure the pads cartridge is properly installed with the hard cover in place. (See Chapter 5, “Maintaining the HeartStart,” for directions on installing the pads cartridge.)</li> <li>• Remove the training pads cartridge and replace it with an adult or infant/child SMART Pads Cartridge.</li> <li>• Remove the battery for five seconds then reinstall it to start the battery insertion self-test. If it fails, insert a new battery to repeat the test. If it fails again, do not use the defibrillator. If it passes, store the defibrillator within the recommended temperature range.</li> <li>• Contact Philips for service.</li> </ul>
no chirping and/or i-button does not flash	<ul style="list-style-type: none"> <li>• The battery is missing or completely depleted.</li> <li>• The defibrillator may have been physically damaged.</li> </ul>	<p>Remove the battery for five seconds then reinstall it to start the battery insertion self-test. If it fails, insert a new battery and repeat the test. If it fails again, do not use the defibrillator. Contact Philips for service.</p>



## H ADDITIONAL TECHNICAL INFORMATION REQUIRED FOR EUROPEAN CONFORMITY

### ELECTROMAGNETIC CONFORMITY

**Guidance and manufacturer's declaration:** The HeartStart OnSite Defibrillator is intended for use in the electromagnetic environment specified in the tables below. The customer or user of the OnSite should assure that it is used in such an environment.

### ELECTROMAGNETIC EMISSIONS


emissions test	compliance	electromagnetic environment – guidance
RF CISPR 11	Group I Class B	<p>The OnSite uses RF energy only for its internal function. Therefore, its RF emissions are very low and are not likely to cause any interference in nearby electronic equipment.</p> <p>The OnSite is suitable for use in all establishments, including industrial establishments, domestic establishments, and those directly connected to the public low-voltage power supply network that supplies buildings used for domestic purposes.</p>

## ELECTROMAGNETIC IMMUNITY

The HeartStart is intended for use in the electromagnetic environment specified below. The customer or user of the HeartStart should assure that it is used in such an environment.

immunity test	IEC 60601 test level	compliance level	electromagnetic environment - guidance
electrostatic discharge (ESD) IEC 61000-4-2	± 6 kV contact ± 8 kV air	± 8 kV contact ± 15 kV air	There are no special requirements with respect to electrostatic discharge. <sup>a</sup>
power frequency (50/60 Hz) magnetic field IEC 61000-4-8	3 A/m	30 A/m	Power frequency magnetic fields should be at levels characteristic of a typical location in a typical commercial/hospital environment.  There are no special requirements for non-commercial/non-hospital environments.
conducted RF IEC 61000-4-6	3 Vrms 150 kHz to 80 MHz outside ISM bands <sup>b</sup>	3 Vrms	Recommended separation distance: $d = 1.2 \sqrt{P^c}$
	10 Vrms 150 kHz to 80 MHz in ISM bands <sup>b</sup>	10 Vrms	$d = 1.2 \sqrt{P^c}$

- a. Generally, AEDs are sometimes susceptible to interference generated by patient and/or responder motion in environments in which a high static electric field is present (e.g., low humidity, synthetic carpets, etc.). As a safety measure, Philips AEDs incorporate a patented method to sense possible corruption of the ECG signal by such interference and to respond by directing the user to stop all motion. In these cases, it is important to minimize movement in the vicinity of the patient during rhythm analysis in order to ensure that the signal being analyzed accurately reflects the patient's underlying heart rhythm.
- b. The ISM (industrial, scientific and medical) bands between 150 kHz and 80 MHz are 6.765 MHz to 6.795 MHz; 13.553 MHz to 13.567 MHz; 26.957 MHz to 27.283 MHz; and 40.66 MHz to 40.70 MHz.
- c. The compliance levels in the ISM frequency bands between 150 kHz and 80 MHz and in the frequency range 80 MHz to 2.5 GHz are intended to decrease the likelihood that mobile/portable communications equipment could cause interference if it is inadvertently brought into patient areas. For this reason, an additional factor of 10/3 has been incorporated into the formulae used in calculating the recommended separation distance for transmitters in these frequency ranges.

immunity test	IEC 60601 test level	compliance level	electromagnetic environment - guidance
radiated RF IEC 61000-4-3	10V/m 80 MHz to 2.5 GHz	20V/m	$d = 0.60 \sqrt{P}$ 80 MHz to 800 MHz $d = 1.2 \sqrt{P}$ 80 MHz to 2.5 GHz where P is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer and d is the recommended separation distance in meters (m). <sup>a</sup> Field strengths from fixed RF transmitters, as determined by an electromagnetic site survey, <sup>b</sup> should be less than the compliance level in each frequency range. <sup>c</sup> Interference may occur in the vicinity of equipment marked with the following symbol: 

NOTE 1. At 80 MHz and 800 MHz, the higher frequency range applies.

NOTE 2. These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from structures, objects and people.

- a. The compliance levels in the ISM frequency bands between 150 kHz and 80 MHz and in the frequency range 80 MHz to 2.5 GHz are intended to decrease the likelihood that mobile/portable communications equipment could cause interference if it is inadvertently brought into patient areas. For this reason, an additional factor of 10/3 has been incorporated into the formulae used in calculating the recommended separation distance for transmitters in these frequency ranges.
- b. Field strengths from fixed transmitters, such as base stations for radio (cellular/cordless) telephones and land mobile radios, amateur radio, AM and FM radio broadcast, and TV broadcast cannot be predicted theoretically with accuracy. To assess the electromagnetic environment due to fixed RF transmitters, an electromagnetic site survey should be considered. If the measured field strength in the location in which the HeartStart is used exceeds the applicable RF compliance level above, the HeartStart should be observed to verify normal operation. If abnormal performance is observed, additional measures may be necessary, such as re-orienting or relocating the HeartStart.
- c. Over the frequency range 150 kHz to 80 MHz, field strengths should be less than 3V/m.

RECOMMENDED SEPARATION DISTANCES BETWEEN PORTABLE AND MOBILE RF COMMUNICATIONS EQUIPMENT AND THE ONSITE

The OnSite is intended for use in an electromagnetic environment in which radiated RF disturbances are controlled. The customer or the user of the OnSite can help prevent electromagnetic interference by maintaining a minimum distance between portable and mobile RF communications equipment (transmitters) and the OnSite as recommended below, according to the maximum output power of the communications equipment.

rated maximum output power of transmitter (W)	separation distance according to frequency of transmitter (m)			
	150 kHz to 80 MHz outside ISM bands $d = 1.2\sqrt{P}$	150 kHz to 80 MHz in ISM bands $d = 1.2\sqrt{P}$	80 MHz to 800 MHz $d = 0.60\sqrt{P}$	800 MHz to 2.5 GHz $d = 1.15\sqrt{P}$
0.01	0.12	0.12	0.06	0.115
0.1	0.38	0.38	0.19	0.36
1	1.2	1.2	0.60	1.15
10	3.8	3.8	1.9	3.64
100	12	12	6.0	11.5

For transmitters rated at a maximum output power not listed above, the recommended separation distance  $d$  in meters (m) can be determined using the equation applicable to the frequency of the transmitter, where  $P$  is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer.

NOTE 1. At 80 MHz and 800 MHz, the separation distance for the higher frequency range applies.

NOTE 2. The ISM (industrial, scientific and medical) bands between 150 kHz and 80 MHz are 6.765 MHz to 6.795 MHz; 13.553 MHz to 13.567 MHz; 26.957 MHz to 27.283 MHz; and 40.66 MHz to 40.70 MHz.

NOTE 3. An additional factor of 10/3 is used in calculating the recommended separation distance for transmitters in the ISM frequency bands between 150 kHz and 80 MHz and in the frequency range 80 MHz to 2.5 GHz to decrease the likelihood that mobile/portable communications equipment could cause interference if it is inadvertently brought into patient areas.

NOTE 4. These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from structures, objects and people.

## IMPORTANT WARNINGS AND REMINDERS

- Do not allow the pads to contact other electrodes or metal parts that are in contact with the patient.
- Before delivering a shock, it is important to disconnect the patient from other medical electrical equipment, such as blood-flow meters, that may not incorporate defibrillation protections. In addition, make sure the pads are not in contact with metal objects such as a bedframe or stretcher.
- Check supplies, accessories, packaging, and spares for damage and expiration dating.

## ENVIRONMENTAL CONSIDERATIONS

- The defibrillator contains electronic components. Dispose of it at an appropriate recycling facility.
- The battery cells contain chemicals. Recycle the battery at an appropriate recycling facility.
- The used pads may be contaminated. Cut them off and dispose of them properly. Recycle the remaining cartridge components at an appropriate recycling facility.

## SHOCK CYCLE TIMING

The OnSite's Quick Shock feature allows it to deliver a shock within 8 seconds, typical, following the prompt ending a CPR Interval. From shock to shock, the OnSite takes <20 seconds, typical, including analysis. After 15 shocks, the OnSite takes <30 seconds from analyzing to ready-to-shock. After 200 shocks, the OnSite takes <40 seconds from initial power-on to ready-to-shock.

NOTES

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