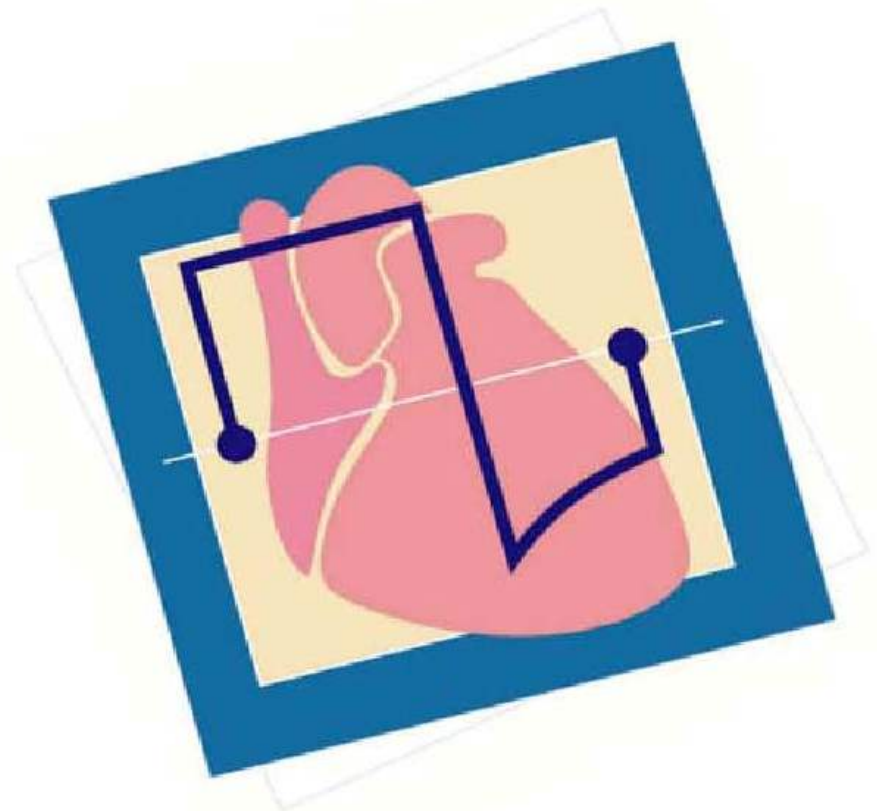


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## Important facts about defibrillation:

### Current Defibrillates



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# Important facts about defibrillation: Current Defibrillates

*Everyone wants the best outcomes for their patients, but giving more Joules doesn't necessarily mean giving the best care...*

Joules are actually a composite value made up from **Voltage** (or electrical potential), **Current** (or electrical flow) and **Shock Duration**. So increasing any of the **Current**, the **Voltage** or the **Shock Duration** will increase the joules.



## **But is that enough?**

Believe it or not, a AA pencil battery can deliver 200J if discharged over a long enough duration... the **Voltage is set**, so the **Current has to compensate**.

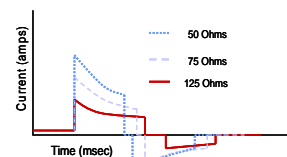
Clearly the **Current is important to defibrillation!** If you are relying on extending the duration of your shock to produce High Energy Joules, you may be surprised by what **Current** your patient is actually receiving.

## **Current Matters**

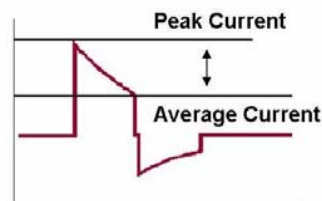
In fact, current is responsible for defibrillating<sup>1-4</sup>, more specifically **Average Current**. 9-11 Amps of current are required to stop a heart from fibrillating<sup>5</sup>.

Whilst high **Average Current** can be therapeutic<sup>6,7</sup>, high **Peak Current** is associated with decreased ejection fractions and other myocardial dysfunction<sup>8,9</sup>.

A waveform that minimises **Peak Current** and maximises **Average Current** reduces the risk of post resuscitation myocardial dysfunction. That's why ZOLL developed the Rectilinear Biphasic Waveform, for Low Energy, High Efficacy



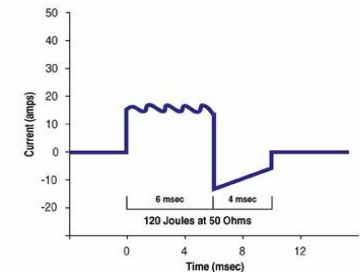
BTE waveform adapting to give more Joules, for high impedance patients



## **Timing is everything**

The length of shock is important to only provide the minimum amount of voltage needed to terminate fibrillation.

Every waveform has its own optimal shock duration that gives the lowest defibrillation threshold<sup>10</sup>. That's why **ZOLL fixes our waveform duration** at our optimal shock duration, 10ms<sup>11,12</sup>.



ZOLL's 10ms Rectilinear Biphasic Waveform gives minimal damaging Peak Current & high Average Current

## **Great potential and variable impedance**

Now that we have an optimal Low Energy waveform, we need to think about patient **Impedance**.



We know that **high Impedance** patients are hard to defibrillate. That's because **Average Current** delivered to your patient depends on the **Voltage** stored in the defibrillator and the patient's **Impedance** to the **Current** flow.

*The higher the **Impedance** for a given **Voltage**, the lower the **Average Current**.* That's why ZOLL stores the highest **Voltage** at any **Impedance**.

When treating **lower Impedance** patients, ZOLL's impedance matching prevents overdosing.

When treating **high Impedance** patients, ZOLL stores **more Voltage** in the defibrillator and delivers **more Average Current**, giving your patient the safest most efficacious defibrillation possible... with low energy.