
VENTRICULAR ASSIST DEVICE (VAD)

ALWAYS USE STANDARD PRECAUTIONS

INDICATION

For assessment, management, treatment, stabilization and/or transport of a patient with a VAD

CRITICAL INFORMATION

- Note unique **ASSESSMENTS** section below
- The VAD Coordinator (VADC) should be contacted immediately. Dispatch may have VADC contact information. The patient and caregiver will have contact information; it may also be found on the device, a medic alert bracelet, near a phone or other obvious location. The VADC may be on the phone upon EMS arrival.
- The VADC is a valuable resource but is NOT medical control. Request physician consult if necessary.
- If appropriate, request POLST/DNR status

ASSESSMENT - Patient

Patient assessment depends on complaint and presenting signs and symptoms. All VAD patient assessments will include the following:

NOTE: O2 sat and pulse will be absent or greatly diminished

- Neuro status
- **Manual** blood pressure (will be only one number)
- Skin signs
- ETCO2 monitoring
- Lung sounds
- Capillary refill
- Auscultate device (RUQ) cardiac monitor (ECG rhythm may be abnormal but unless patient is symptomatic, treat the patient, not the monitor)

ASSESSMENT – device

- Involve VADC, patient and family in assessing/troubleshooting device
- A green light indicates the device is powered. It does NOT mean the device is working
- Auscultation of a humming sound at the RUQ indicates the device is working
- Check ALL connections to be certain they are secure and batteries are charged

TREATMENT

- ALS RMC
- If signs of shock present, start IV NS, give 500ml bolus and reassess, including lung sounds.
- If the patient is to be defibrillated, do not place pads over patient's device
- Withhold chest compressions unless the patient is pulseless, unconscious, and you and the VADC have determined the device has stopped working
- Obtain 12-lead ECG – however, treat the patient, not the monitor

DOCUMENTATION- ESSENTIAL ELEMENTS

- VAD Coordinator name and contact info
- Assessment findings

RELATED POLICIES/ PROCEDURES

- Destination Guidelines Policy GPC 4
 - VAD related complaint: transport directly to a VAD center. If concerns about patient's stability or destination, refer to GPC 4 and get a physician consult
 - Non-VAD related complaint: transport per GPC 4