OCEANPORT VOLUNTEER FIRST AID & RESCUE SQUAD

ZOLL AUTOPULSE CPR BOARD

AutoPulse Non-Invasive Cardiac Support Pump. Consistent Compressions. No Interruptions.

For victims of Sudden Cardiac Arrest (SCA), only one thing is certain - chest compressions will be required. Yet, manual compressions - even when they are done well - only provide 10 - 20% of normal blood flow to the heart and 30 - 40 % to the brain.[1]

FEATURES

Non-invasive cardiac support pump

Now, there's an alternative. The only device of its kind, the ZOLL® AutoPulse® is a revolutionary **non-invasive cardiac support pump** that moves more blood, more consistently than is possible with human hands.[2,3,4] Easy to use and battery operated, its load-distributing LifeBand® squeezes the entire chest. As a result, victims receive more consistent, high-quality compressions than those delivered by simple automated CPR devices, which means improved blood flow.

Minimizes no-flow time

AutoPulse also minimizes no-flow time. It allows rescuers to provide compressions while performing other life-saving activities, or while transporting a victim down the stairs or in the back of a moving ambulance.

Improved blood flow for cardiac arrest victims

The **AutoPulse cardiac support pump** delivers improved blood flow without interruptions of fatigue and provides hospital caregivers better access to the patient resulting in the possibility of improved survival for cardiac arrest victims. In fact, the AutoPulse cardiac support pump has been shown to triple survival-to-hospital discharge[5].

OCEANPORT VOLUNTEER FIRST AID & RESCUE SQUAD

Ensures clinical safety

- Ensures improved blood flow by squeezing the entire chest, not just pushing on a single spot like manual CPR and other mechanical devices
- Is fast, easy and intuitive to start-up and use - it doesn't require manual adjustments because it automatically calculates the size, shape and resistance of each patient's chest
- Functions as an "additional person"
- Ensures clinical safety
- Ensures rescuer safety during transport

References

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3. Ikeno F et al. *Resuscitation*. 2006;68:109-118.
4. Timerman S et al. *Resuscitation*. 2004;61:273-280.5.
5. Ornator JP et al. American Heart Association Annual Meeting. 2005