Intentionally blank.
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 blue “i-button” flashes 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.
Intentionally blank.
Check for signs of Sudden Cardiac Arrest:  
- Unresponsive
- Not Breathing Normally

1 PULL  
2 PLACE  
3 PRESS
Intentionally blank.
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 HS1 family of defibrillators, including the HeartStart, the HeartStart OnSite, and the HeartStart First Aid Defibrillator. This information is subject to change. Please contact Philips at www.philips.com/productdocumentation or your local Philips representative for information on revisions.

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CAUTION: Federal law (USA) restricts this device to sale by or on the order of a physician.

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, Seattle, WA, USA 98121-1825.

Patents

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

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INTRODUCTION TO THE HEARTSTART

DESCRIPTION
The Philips HeartStart OnSite Defibrillator M5066A is part of the Philips HeartStart HS1 family of defibrillators. Small, lightweight, and battery powered, it is designed for simple and reliable operation.

SUDDEN CARDIAC ARREST
The OnSite is used to treat the most common causes of sudden cardiac arrest (SCA), including ventricular fibrillation (VF). 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.
TRAINING AND PRACTICE

The OnSite is one part of a well-designed emergency response plan. Any emergency response plan should be under the oversight of a physician and should include training in cardiopulmonary resuscitation (CPR). Philips recommends that you train on the device you will be using.

Several national and local organizations offer combined CPR/defibrillator training. Contact your Philips representative, or visit us online at www.philips.com/essentials for information, including certified training and web-based refresher training through Philips HeartStart Essentials program management services.

NOTE: Training accessories are available from Philips for practicing use of the OnSite. See Appendix A for information on ordering accessories.

NATIONAL AND LOCAL REQUIREMENTS

Check with your local health department to see if there are any national or local requirements about owning and using a defibrillator.

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/productdocumentation in the Technical Reference Manuals for HeartStart Automated External Defibrillators.

* Clinical summaries also include Heartstream 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
- 1 Adult SMART Pads Cartridge M5071A, containing one set of adhesive defibrillation pads
- 1 Owner’s Manual
- 1 Quick Reference Guide
- 1 Quick Start poster

Training materials and optional accessories for the HeartStart OnSite are also available from Philips. See Appendix A for a description of these items.

SETTING UP THE HEARTSTART ONSITE

Setting-up the OnSite is simple and quick.

1. Remove the OnSite from its packaging.
2. Remove a new SMART Pads Cartridge from its package.*

* To replace a used cartridge or insert a different cartridge, first 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 cartridge and replace as described in steps 2 and 3.
3. 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.

4. Remove the battery from its packaging. Install it in the battery compartment on the back of the OnSite.

5. The OnSite will automatically run a self-test when the battery is inserted. Press the Shock button when instructed. 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.

* As long as a battery is installed, turning the OnSite “off” puts it into standby mode, which means that it is ready for use.
6. Place the OnSite in the carry case, pressing it firmly into place. Insert the Quick Reference Guide, face up, in the clear plastic window on the inside of the case. If you purchased a spare SMART Pads Cartridge or an Infant/Child Pads Cartridge, place it in the storage area in the case.

**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.

7. Store the OnSite 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 defibrillator needs attention. Ideally, the OnSite should be stored 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. If possible, keep the spare SMART Pads Cartridge and other accessories with the defibrillator — in the carry case if one is used — for quick access when needed. In general, treat the OnSite as you would any piece of electronic equipment, such as a computer. Be sure to store the defibrillator 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 HeartStart has passed its most recent self-test and is therefore ready to use.

**NOTE:** If you have a training pads cartridge, it is recommended that you store it separately from the HeartStart, so the training pads cannot be confused with the regular pads in an emergency.

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* 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.
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 details.

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 are provided in Chapter 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 OnSite, 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 1: 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 \( \bigtriangleup \) begins flashing as a reminder.

If a shock is needed:
The Caution light \( \bigtriangleup \) goes from flashing to solid, the orange Shock button \( \bullet \) 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 \( \bullet \) 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 \( \bullet \) for CPR Coaching, if desired.

For CPR Coaching:
Press the flashing blue i-button \( \bullet \) 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 55 pounds or 8 years old, and you have an Infant/Child Pads Cartridge:

• Remove the Infant/Child Pads Cartridge from its package.*
• Locate the latch at the top edge of the OnSite, 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 Pads Cartridge inserted, the OnSite automatically reduces the defibrillation energy from the adult dose of 150 joules to 50 Joules† 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 55 pounds or 8 years old, but you do NOT have an Infant/Child 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 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 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 OnSite will disarm and tell you a shock is not advised.

• If for any reason you want to turn off the OnSite 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.
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.”

2. Insert a new SMART Pads cartridge into the OnSite. Check supplies and accessories for damage and expiration dates. Replace any used, damaged or expired items. For directions on changing the pads and replacing the battery, please see Chapter 2, “Setting up the HeartStart OnSite.” The single-use pads must be replaced after being used.

3. 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.

4. Return the OnSite to its storage location so it will be ready for use when needed.

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.

* If you leave the battery in the OnSite 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.
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†)
- 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.
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.
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.

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 chirping, 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 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.

More detailed testing and troubleshooting information is available in Appendix G.
Accessories for the HeartStart OnSite Defibrillator available separately from your Philips representative or on-line at 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, 2 pairs of gloves, a pair of paramedic’s scissors, and an absorbent wipe) [REF: 68-PCHAT]
- **Data Management Software**
  - HeartStart Configure PDA software [REF: 989803143041]
  - HeartStart CaseCapture PDA software [REF: 989803143051]
  - HeartStart Review Express Connect [REF: 861311 option A01]
  - HeartStart Event Review, single PC license [REF: M3834A]
  - HeartStart Event Review, organization-wide license [REF: 989803141811]
  - HeartStart Event Review Pro, single PC license [REF: 861276 option A01]
  - HeartStart Event Review Pro, three-PC license [REF: 861276 option A02]
  - HeartStart Event Review Pro, organization-wide license [REF: 861276 option A03]
  - Infrared cable for use with HeartStart Event Review software [REF: ACT-IR]
- **HeartStart OnSite Defibrillator Quick Reference** [REF: M5066-97800]

* Certain accessories require a prescription in the United States.
• 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]
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 HeartStart OnSite Defibrillator. 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 OnSite.
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 HeartStart OnSite Defibrillator patient use and by authorized personnel to alter OnSite configuration. Information is available from Philips Medical Systems on the internet at www.philips.com/eventreview.

i-button
A blue “information” button on the front of the HeartStart OnSite Defibrillator. 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 HeartStart OnSite Defibrillator 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 OnSite 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 OnSite 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 HeartStart OnSite Defibrillator determines is not appropriate for defibrillation.

On/Off button
A green button located on the front of the HeartStart OnSite Defibrillator. 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.

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 HeartStart OnSite Defibrillator 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 HeartStart OnSite Defibrillator to direct patient care in the AED mode.

protocol pause  A pause provided by the HeartStart OnSite Defibrillator 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 HeartStart OnSite Defibrillator. 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 HeartStart OnSite Defibrillator. 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 HeartStart OnSite Defibrillator 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 HeartStart OnSite Defibrillator to decide if the shocks are part of the same shock series.

SMART analysis  The proprietary algorithm used by the HeartStart OnSite Defibrillator 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 HeartStart OnSite Defibrillator. 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 HeartStart OnSite Defibrillator. 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)  The sudden stopping of the heart’s pumping rhythm, accompanied by loss of consciousness, absence of respiration, and lack of a pulse.

waveform  See “SMART biphasic waveform.”
<table>
<thead>
<tr>
<th>symbol</th>
<th>description</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="Pads cartridge handle" /></td>
<td>Pads cartridge handle. Green. Pulling the handle turns on the OnSite and opens pads cartridge for use. Refer to operating instructions.</td>
</tr>
<tr>
<td><img src="image" alt="On/Off button" /></td>
<td>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.</td>
</tr>
<tr>
<td><img src="image" alt="Information button (i-button)" /></td>
<td>Information button (i-button). Blue. 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.</td>
</tr>
<tr>
<td><img src="image" alt="Caution light" /></td>
<td>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.</td>
</tr>
<tr>
<td><img src="image" alt="Shock button" /></td>
<td>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.</td>
</tr>
<tr>
<td><img src="image" alt="Defibrillation protection" /></td>
<td>Defibrillation protection. Defibrillation protected, type BF patient connection.</td>
</tr>
<tr>
<td><img src="image" alt="CE mark" /></td>
<td>Meets the requirements of the European medical device directives 93/42/EEC.</td>
</tr>
<tr>
<td>symbol</td>
<td>description</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>2005 GUIDELINES</td>
<td>Indicates that this device is optimized for Guidelines 2005.</td>
</tr>
<tr>
<td></td>
<td>Certified by the Canadian Standards Association.</td>
</tr>
<tr>
<td>REF</td>
<td>Reference order number.</td>
</tr>
<tr>
<td>EC REP</td>
<td>Authorized representative in the European Community.</td>
</tr>
<tr>
<td>MM / YYYY</td>
<td>Expiration date.</td>
</tr>
<tr>
<td>-cell</td>
<td>Lithium manganese dioxide battery.</td>
</tr>
<tr>
<td>QTY (n)</td>
<td>One battery in package.</td>
</tr>
<tr>
<td>!</td>
<td>Do not crush the battery.</td>
</tr>
<tr>
<td>!</td>
<td>Do not expose the battery to high heat or open flames.</td>
</tr>
<tr>
<td>!</td>
<td>Do not incinerate the battery.</td>
</tr>
<tr>
<td>!</td>
<td>Do not mutilate the battery or open the battery case.</td>
</tr>
<tr>
<td>Class 9 miscellaneous</td>
<td>Class 9 miscellaneous dangerous goods. (Symbol required on outer packaging</td>
</tr>
<tr>
<td>dangerous goods. (Symbol</td>
<td>by freight carrier regulations to identify shipments containing lithium</td>
</tr>
<tr>
<td>required on outer packaging</td>
<td>batteries.)</td>
</tr>
<tr>
<td>by freight carrier</td>
<td>Install the battery in the defibrillator before the date (MM-YYYY) shown on</td>
</tr>
<tr>
<td>regulations to identify</td>
<td>the associated label.</td>
</tr>
<tr>
<td>shipments containing lithium</td>
<td>Do not expose to moisture.</td>
</tr>
<tr>
<td>batteries.)</td>
<td>Handle with care.</td>
</tr>
</tbody>
</table>
This side up.

Transportation requirements (refer to associated thermometer symbol).

Storage requirements (refer to associated thermometer symbol).

Environmental (temperature and relative humidity) requirements.

These pads are disposable and are for single patient use only.

Cartridge contents: one set of two defibrillation pads.

Store the pads at temperatures between 0° and 43° C (32° and 110° F).

This product is not sterile.

This product does not contain natural rubber latex.

Meets the requirements of the European electromagnetic compatibility directive 89/336/EEC.

Pads intended for use on infant or child under 8 years or 25 Kg (55 lb).

Expiration (see associated date code).

Serial number.
<table>
<thead>
<tr>
<th>symbol</th>
<th>description</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="symbol.png" alt="LOT" /></td>
<td>Lot number.</td>
</tr>
<tr>
<td>Rx only</td>
<td>Federal law (USA) restricts this device to sale by or on the order of a physician.</td>
</tr>
<tr>
<td><img src="symbol.png" alt="symbol" /></td>
<td>Dispose of in accordance with your country’s requirements.</td>
</tr>
<tr>
<td><img src="symbol.png" alt="symbol" /></td>
<td>Printed on recycled paper.</td>
</tr>
</tbody>
</table>
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.

**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/productdocumentation.

PHYSICAL

<table>
<thead>
<tr>
<th>category</th>
<th>specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>size</td>
<td>2.80” H x 7.40” D x 8.30” W (7.1cm H x 19cm D x 21cm W).</td>
</tr>
<tr>
<td>weight</td>
<td>Approximately 3.3 lbs (1.5 kg) with battery and pads cartridge installed.</td>
</tr>
</tbody>
</table>

ENVIRONMENTAL

<table>
<thead>
<tr>
<th>category</th>
<th>specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>temperature and</td>
<td>Operating (battery and pads cartridge installed):</td>
</tr>
<tr>
<td>relative humidity</td>
<td>32° to 122° F (0° to 50° C)</td>
</tr>
<tr>
<td></td>
<td>0% to 95% RH (non-condensing).</td>
</tr>
<tr>
<td></td>
<td>Standby (battery and pads cartridge installed):</td>
</tr>
<tr>
<td></td>
<td>50° to 109° F (10° to 43° C)</td>
</tr>
<tr>
<td></td>
<td>10% to 75% RH (non-condensing).</td>
</tr>
<tr>
<td></td>
<td>Storage/shipping (with battery and pads cartridge):</td>
</tr>
<tr>
<td></td>
<td>-4° to 140° F (-20° to 60° C) for up to 2 days</td>
</tr>
<tr>
<td></td>
<td>0% to 85% RH (non-condensing)</td>
</tr>
<tr>
<td>altitude</td>
<td>Operates at 0 to 15,000 feet; can be stored at up to 8,500 feet, in standby mode.</td>
</tr>
<tr>
<td>shock/drop abuse</td>
<td>Withstands 1 meter drop to any edge, corner, or surface.</td>
</tr>
<tr>
<td>tolerance</td>
<td></td>
</tr>
<tr>
<td>vibration</td>
<td>Operating: meets EN1789 random, road ambulance.</td>
</tr>
<tr>
<td></td>
<td>Standby: meets EN1789 swept sine, road ambulance.</td>
</tr>
</tbody>
</table>
### CONTROLS AND INDICATORS

<table>
<thead>
<tr>
<th>category</th>
<th>specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>sealing</td>
<td>Drip proof per EN60529 class IPx1. Solid Objects per EN60529 class IP2x.</td>
</tr>
<tr>
<td>ESD/EMI (radiated and immunity)</td>
<td>See Electromagnetic Conformity tables.</td>
</tr>
</tbody>
</table>

**Controls**

- Green SMART Pads cartridge handle
- Green On/Off button
- Blue i-button
- 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: blue, flashes 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.

**Beep**

- Provides chirps when troubleshooting is needed.
DEFIBRILLATION WAVEFORM

<table>
<thead>
<tr>
<th>category</th>
<th>specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>waveform parameters</td>
<td>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 μs), and Ip is the peak current.</td>
</tr>
<tr>
<td></td>
<td>The HeartStart 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:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Load resistance (Ω)</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>65</td>
<td>128</td>
</tr>
<tr>
<td>50</td>
<td>4.5</td>
<td>4.5</td>
<td>40</td>
<td>150</td>
</tr>
<tr>
<td>75</td>
<td>6.25</td>
<td>5.0</td>
<td>30</td>
<td>155</td>
</tr>
<tr>
<td>100</td>
<td>8.0</td>
<td>5.3</td>
<td>24</td>
<td>157</td>
</tr>
<tr>
<td>125</td>
<td>9.65</td>
<td>6.4</td>
<td>21</td>
<td>159</td>
</tr>
<tr>
<td>150</td>
<td>11.5</td>
<td>7.7</td>
<td>18</td>
<td>160</td>
</tr>
<tr>
<td>175</td>
<td>12.0</td>
<td>8.0</td>
<td>16</td>
<td>158</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Load resistance (Ω)</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>28</td>
<td>35</td>
</tr>
<tr>
<td>50</td>
<td>5.1</td>
<td>3.4</td>
<td>20</td>
<td>46</td>
</tr>
<tr>
<td>75</td>
<td>6.2</td>
<td>4.1</td>
<td>15</td>
<td>52</td>
</tr>
<tr>
<td>100</td>
<td>7.2</td>
<td>4.8</td>
<td>12</td>
<td>54</td>
</tr>
<tr>
<td>125</td>
<td>8.3</td>
<td>5.5</td>
<td>10</td>
<td>56</td>
</tr>
<tr>
<td>150</td>
<td>9.0</td>
<td>6.0</td>
<td>9</td>
<td>57</td>
</tr>
<tr>
<td>175</td>
<td>9.0</td>
<td>6.0</td>
<td>8</td>
<td>55</td>
</tr>
</tbody>
</table>
#### Specifications

<table>
<thead>
<tr>
<th>Category</th>
<th>Specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Energy*</td>
<td>Using HeartStart Adult SMART Pads: 150 J nominal (±15%) into a 50 ohm load.</td>
</tr>
<tr>
<td>(pediatric doses indicated are based</td>
<td>Using HeartStart Infant/Child SMART Pads: 50 J nominal (±15%) into a 50 ohm</td>
</tr>
<tr>
<td>on CDC growth charts for the 50th</td>
<td>load. Sample pediatric energy doses:</td>
</tr>
<tr>
<td>percentile weights for boys.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>age</td>
</tr>
<tr>
<td></td>
<td>newborn</td>
</tr>
<tr>
<td></td>
<td>1 year</td>
</tr>
<tr>
<td></td>
<td>2 – 3 years</td>
</tr>
<tr>
<td></td>
<td>4 – 5 years</td>
</tr>
<tr>
<td></td>
<td>6 – 8 years</td>
</tr>
<tr>
<td></td>
<td>* National Center for Health</td>
</tr>
<tr>
<td></td>
<td>Statistics in collaboration</td>
</tr>
<tr>
<td></td>
<td>with the National Center for</td>
</tr>
<tr>
<td></td>
<td>Chronic Disease Prevention</td>
</tr>
<tr>
<td></td>
<td>and Health Promotion.</td>
</tr>
<tr>
<td></td>
<td>CDC growth charts: weight-for-age percentiles, revised and corrected</td>
</tr>
<tr>
<td></td>
<td>November 28, 2000. Atlanta,</td>
</tr>
<tr>
<td></td>
<td>GA: Centers for Disease</td>
</tr>
<tr>
<td></td>
<td>Control and Prevention © 2000.</td>
</tr>
<tr>
<td>Charge control</td>
<td>Controlled by Patient Analysis System for automated operation.</td>
</tr>
<tr>
<td>“charge complete” indicator</td>
<td>Shock button flashes, audio tone sounds.</td>
</tr>
<tr>
<td>Shock-to-shock cycle time</td>
<td>&lt;20 seconds, typical, including analysis.</td>
</tr>
<tr>
<td>Patient care pause-to-shock time</td>
<td>Quick Shock. 8 seconds, typical, from end of patient care pause to shock</td>
</tr>
<tr>
<td>Disarm (AED mode)</td>
<td>delivery.</td>
</tr>
<tr>
<td>Adult shock delivery vector</td>
<td>Once charged, the defibrillator will disarm if:</td>
</tr>
<tr>
<td>Infant/child shock delivery vector</td>
<td>* the patient’s heart rhythm changes to non-shockable rhythm,</td>
</tr>
<tr>
<td></td>
<td>* a shock is not delivered within 30 seconds after the OnSite has charged for</td>
</tr>
<tr>
<td></td>
<td>* the On/Off button is pressed and held down for at least one (1) second to</td>
</tr>
<tr>
<td></td>
<td>* the adhesive pads are removed from the patient or the pads cartridge is</td>
</tr>
<tr>
<td></td>
<td>* the impedance between pads is out of range.</td>
</tr>
<tr>
<td></td>
<td>Via adhesive pads placed in the anterior-anterior (Lead II) position.</td>
</tr>
<tr>
<td></td>
<td>Via adhesive pads typically placed in the anterior-posterior position.</td>
</tr>
</tbody>
</table>
### ECG ANALYSIS SYSTEM

<table>
<thead>
<tr>
<th>category</th>
<th>specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>function</td>
<td>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.</td>
</tr>
</tbody>
</table>
| 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. 

*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.* |
| 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

<table>
<thead>
<tr>
<th>Rhythm Class</th>
<th>ECG Test Sample Size</th>
<th>Sensitivity/Specificity</th>
<th>Lower Confidence Limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shockable Rhythm — ventricular fibrillation</td>
<td>300</td>
<td>&gt;90% (meets AAMI DF80 requirement)</td>
<td>(87%)</td>
</tr>
<tr>
<td>Shockable Rhythm — ventricular tachycardia</td>
<td>100</td>
<td>&gt;75% (meets AAMI DF80 requirement)</td>
<td>(67%)</td>
</tr>
<tr>
<td>Non-shockable Rhythm — normal sinus rhythm</td>
<td>300</td>
<td>&gt;99% (meets AAMI DF80 requirement)</td>
<td>(97%)</td>
</tr>
<tr>
<td>Non-shockable Rhythm — asystole</td>
<td>100</td>
<td>&gt;95% (meets AAMI DF80 requirement)</td>
<td>(92%)</td>
</tr>
<tr>
<td>Non-shockable Rhythm — all other non-shockable rhythms</td>
<td>450</td>
<td>&gt;95% (meets AAMI DF80 requirement)</td>
<td>(88%)</td>
</tr>
</tbody>
</table>

---

a. From Philips Medical Systems Heartstream ECG rhythm databases.


c. Supraventricular tachycardia (SVT) is specifically included in the non-shockable rhythm class, in accordance with AHA recommendations and the AAMI standard DF80.
**ACCESSORIES SPECIFICATIONS**

**BATTERY M5070A**

<table>
<thead>
<tr>
<th>category</th>
<th>specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>battery type</td>
<td>9 VDC, 4.2 Ah, lithium manganese dioxide. Disposable, long-life primary cell.</td>
</tr>
<tr>
<td>capacity</td>
<td>When new, a minimum of 200 shocks or 4 hours of operating time at 77° F (25° C). (IEC 60601-2-4 2002)</td>
</tr>
<tr>
<td>shelf life (prior to insertion)</td>
<td>A minimum of 5 years from date of manufacture when stored and maintained according to directions provided in this Owner’s Manual.</td>
</tr>
<tr>
<td>standby life (after insertion)</td>
<td>Typically, 4 years when stored and maintained according to directions provided in this Owner’s Manual.</td>
</tr>
<tr>
<td>training life</td>
<td>Supports 10 hours of use in training mode.</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>category</th>
<th>specifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>adult pads</td>
<td>Disposable, adhesive defibrillation pads with a nominal active surface area of 85 cm² each, provided in a snap-in cartridge with an integrated 54” (137.1 cm), typical, cable.</td>
</tr>
<tr>
<td>infant/child pads</td>
<td>Disposable, adhesive defibrillation pads with a nominal active surface area of 85 cm² each, provided in a snap-in cartridge with an integrated 40 inch (101.6 cm), typical, cable. Cartridge incorporates teddy bear icon on cover of seal for ready identification.</td>
</tr>
<tr>
<td>defibrillation pad requirements</td>
<td>Use only HeartStart Adult SMART Pads M5071A or Infant/Child SMART Pads M5072A with the HeartStart OnSite Defibrillator.</td>
</tr>
</tbody>
</table>
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.

<table>
<thead>
<tr>
<th>product</th>
<th>information</th>
</tr>
</thead>
<tbody>
<tr>
<td>defibrillator</td>
<td>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.</td>
</tr>
<tr>
<td>battery</td>
<td>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.</td>
</tr>
<tr>
<td>pads</td>
<td>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.</td>
</tr>
</tbody>
</table>
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.

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

<table>
<thead>
<tr>
<th>parameter</th>
<th>settings</th>
<th>default</th>
<th>default description</th>
</tr>
</thead>
<tbody>
<tr>
<td>speaker volume</td>
<td>1, 2, 3, 4, 5, 6, 7, 8</td>
<td>8</td>
<td>The volume of the OnSite’s speaker is set to 8, highest.</td>
</tr>
<tr>
<td>auto send periodic self-test (PST) data</td>
<td>On, Off</td>
<td>On</td>
<td>Enables the periodic self-test data to be broadcast through the device’s infrared data port.</td>
</tr>
<tr>
<td>ECG out data</td>
<td>On, Off</td>
<td>On</td>
<td>Enables the ECG data to be broadcast through the device’s infrared data port.</td>
</tr>
</tbody>
</table>
### PATIENT TREATMENT PROTOCOL OPTIONS

<table>
<thead>
<tr>
<th>parameter</th>
<th>settings</th>
<th>default</th>
<th>default description</th>
</tr>
</thead>
</table>
| “call EMS” voice reminder timing | • At power on (when the user turns on the OnSite)  
• At power on and at the start of the first patient care pause  
• At the start of the first patient care pause  
• No reminder | 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, ∞ (infinity) | 1 | The automatic protocol pause for CPR is activated each time a shock is delivered.  
During the protocol pause, the OnSite does not perform rhythm analysis.  
The length of the protocol pause after a shock series is completed is determined by the protocol pause timer setting. |
| shock series interval (minutes) | 1.0, 2.0, ∞ (infinity) | 1.0 | A delivered shock must occur within 1 minute of the previous shock to be counted as part of the current shock series.  
*NOTE: This parameter is only applicable when the shock series is not configured to the default 1 shock.* |

* 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.
### Protocol Pause Timer

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Settings</th>
<th>Default</th>
<th>Default Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protocol Pause Timer (Minutes)</td>
<td>0.5, 1.0, 1.5, 2.0, 2.5, 3.0</td>
<td>2.0</td>
<td>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 OnSite returns to rhythm analysis. 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. <strong>NOTE:</strong> 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.</td>
</tr>
</tbody>
</table>

### NSA Pause Type

- **Standard NSA Pause**: OnSite does not perform rhythm analysis during the NSA pause.
- **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. **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 OnSite does not perform rhythm analysis.
### NSA pause timer (minutes)

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Settings</th>
<th>Default</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSA pause timer</td>
<td>0.5, 1.0, 1.5, 2.0, 2.5, 3.0</td>
<td>2.0</td>
<td>A 2-minute NSA pause for CPR automatically starts after voice instruction is given when no shock is advised (NSA). 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. <strong>Note:</strong> 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.</td>
</tr>
</tbody>
</table>

### CPR prompt

- **CPR1:** Instructs the user to begin CPR.
- **CPR2:** Instructs the user that it is safe to touch the patient and to begin CPR.
- **CPR3:** Instructs the user to begin CPR and to press the i-button for CPR Coaching.
- **CPR4:** Instructs the user that it is safe to touch the patient, to begin CPR, and to press the i-button for CPR Coaching.

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. **Note:** CPR Coaching is available only with the CPR3 and CPR4 settings.

---

* 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.
<table>
<thead>
<tr>
<th>Parameter</th>
<th>Settings</th>
<th>Default</th>
<th>Default Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPR Coaching adult ventilation</td>
<td>Yes, No</td>
<td>Yes</td>
<td>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. NOTE: if this parameter is configured to NO, CPR Coaching will always be compressions-only when an adult pads cartridge is installed.</td>
</tr>
<tr>
<td>instruction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CPR Coaching infant/child ventilation</td>
<td>Yes, No</td>
<td>Yes</td>
<td>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. NOTE: if this parameter is configured to NO, CPR Coaching will always be compressions-only when an infant/child pads cartridge is installed.</td>
</tr>
<tr>
<td>instruction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CPR Coaching compression:ventilation</td>
<td>30:2 adult and 30:2 infant/child, 30:2 adult and 15:2 infant/child, 15:2 adult and 15:2 infant/child</td>
<td>30:2 adult and 30:2 infant/child</td>
<td>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.</td>
</tr>
</tbody>
</table>
TESTING AND TROUBLESHOOTING

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 Manual, available online at www.philips.com/productdocumentation, 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 OnSite is first put into service.
- after each time the OnSite is used to treat a patient.
- when the battery is replaced.
- when the OnSite may have been damaged.

If you need to use the OnSite 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 OnSite is ready for use. The OnSite 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 OnSite, remove the battery and replace it with a new battery if available and press the On/Off button to turn on the OnSite. 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)

<table>
<thead>
<tr>
<th>OnSite tells you:</th>
<th>possible cause</th>
<th>recommended action</th>
</tr>
</thead>
<tbody>
<tr>
<td>... to replace the battery immediately</td>
<td>The battery is nearly depleted. The OnSite will turn off if a new battery is not inserted.</td>
<td>Replace the battery with a new battery immediately.</td>
</tr>
<tr>
<td>... there is no cartridge installed, and</td>
<td>• The pads cartridge has been removed.</td>
<td>Insert a new pads cartridge.</td>
</tr>
<tr>
<td>... to insert a pads cartridge</td>
<td>• The pads cartridge has been damaged.</td>
<td></td>
</tr>
<tr>
<td>... to press the pads firmly to the skin</td>
<td>• The pads are not properly applied to the patient.</td>
<td>• Make sure that the pads are sticking completely to the patient’s skin.</td>
</tr>
<tr>
<td>... to make sure the pads have been</td>
<td>• The pads are not making good contact with the patient’s bare chest because of moisture or excessive hair.</td>
<td>• If the pads are not sticking, dry the patient’s chest and shave or clip any excessive chest hair.</td>
</tr>
<tr>
<td>removed from the liner</td>
<td>• The pads are touching each other.</td>
<td>• Reposition the pads.</td>
</tr>
<tr>
<td>... the pads should not be touching the</td>
<td>• The pads may not have been removed from the liner or may be on the patient’s clothing.</td>
<td>• Make sure the pads are not on the liner or the patient’s clothing.</td>
</tr>
<tr>
<td>patient’s clothing.</td>
<td></td>
<td>If the voice instruction continues after you do these things, insert another pads cartridge.</td>
</tr>
<tr>
<td>... to insert new pads cartridge</td>
<td>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.</td>
<td>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.</td>
</tr>
<tr>
<td>OnSite tells you:</td>
<td>possible cause</td>
<td>recommended action</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>... to stop all motion</td>
<td>• The patient is being moved or jostled.</td>
<td>• Stop CPR; do not touch the patient. Minimize patient motion. If the patient is being transported, stop the vehicle.</td>
</tr>
<tr>
<td></td>
<td>• The environment is dry and movement around the patient is causing static electricity to interfere with ECG analysis.</td>
<td>• Check for possible causes of radio and electrical interference and turn them off or remove them from the area.</td>
</tr>
<tr>
<td></td>
<td>• Radio or electrical sources are interfering with ECG analysis.</td>
<td></td>
</tr>
<tr>
<td>... the shock was not delivered</td>
<td>• The pads may not be making good contact with the patient's skin.</td>
<td>• Press the pads firmly to the patient's chest.</td>
</tr>
<tr>
<td></td>
<td>• The pads may be touching each other.</td>
<td>• Make sure the adhesive pads are correctly positioned on the patient.</td>
</tr>
<tr>
<td></td>
<td>• The pads may be damaged.</td>
<td>• Replace the pads if necessary.</td>
</tr>
<tr>
<td>... the shock button was not pressed</td>
<td>Shock has been advised but the shock button has not been pressed within 30 seconds.</td>
<td>When next prompted, press the Shock button to deliver shock.</td>
</tr>
</tbody>
</table>
## Troubleshooting While the OnSite is Not in Use  
*(green Ready light is not on)*

<table>
<thead>
<tr>
<th>behavior</th>
<th>possible cause</th>
<th>recommended action</th>
</tr>
</thead>
<tbody>
<tr>
<td>chirps or</td>
<td>• The battery power is low or the SMART Pads cartridge needs to be replaced.</td>
<td>• Press the blue i-button. Replace the battery or pads cartridge if instructed.</td>
</tr>
<tr>
<td>i-button flashes</td>
<td>• The OnSite may have been turned off without a pads cartridge installed, or the installed pads cartridge may not have its hard cover in place.</td>
<td>• Make sure the pads cartridge is properly installed with the hard cover in place. (See Chapter 5, “Maintaining the HeartStart OnSite,” for directions on installing the pads cartridge.)</td>
</tr>
<tr>
<td></td>
<td>• The training pads cartridge has been left in the OnSite.</td>
<td>• Remove the training pads cartridge and replace it with an Adult or Infant/Child Pads Cartridge.</td>
</tr>
<tr>
<td></td>
<td>• The OnSite has been stored outside the recommended temperature range.</td>
<td>• 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 OnSite. If it passes, store the OnSite within the recommended temperature range.</td>
</tr>
<tr>
<td></td>
<td>• The OnSite has detected an error during a self-test or cannot perform a self-test, or the Shock button is damaged.</td>
<td>• Contact Philips for service if needed.</td>
</tr>
</tbody>
</table>
| no chirping and/or i-button does not flash | • The battery is missing or completely depleted.  
• The OnSite may have been physically damaged. | 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 OnSite. Contact Philips for service. |
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

<table>
<thead>
<tr>
<th>emissions test</th>
<th>compliance</th>
<th>electromagnetic environment – guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>RF CISPR 11</td>
<td>Group I Class B</td>
<td>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. The OnSite is suitable for use in all establishments, including domestic establishments and those directly connected to the public low-voltage power supply network that supplies buildings used for domestic purposes.</td>
</tr>
</tbody>
</table>
### Electromagnetic Immunity

<table>
<thead>
<tr>
<th>Immunity Test</th>
<th>IEC 60601 Test Level</th>
<th>Compliance Level</th>
<th>Electromagnetic Environment - Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Electrostatic discharge (ESD) IEC 61000-4-2</td>
<td>± 6 kV contact ± 8 kV air</td>
<td>± 6 kV contact ± 8 kV air</td>
<td>There are no special requirements with respect to electrostatic discharge.(^a)</td>
</tr>
<tr>
<td>Power frequency (50/60 Hz) magnetic field IEC 61000-4-8</td>
<td>3 A/m</td>
<td>3 A/m</td>
<td>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.</td>
</tr>
<tr>
<td>Radiated RF IEC 61000-4-3</td>
<td>10 V/m 80 MHz to 2.5 GHz</td>
<td>20 V/m</td>
<td>Portable and mobile RF communications equipment should be used no closer to any part of the OnSite, including cables, than is absolutely necessary.(^b,c) The recommended separation distances for various transmitters and the AED are shown in the following table. Interference may occur in the vicinity of equipment marked with the following symbol:</td>
</tr>
</tbody>
</table>

**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.

\(^a\) 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.

\(^c\) 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 OnSite is used exceeds the applicable RF compliance level above, the OnSite should be observed to verify normal operation. If abnormal performance is observed, additional measures may be necessary, such as re-orienting or relocating 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.

<table>
<thead>
<tr>
<th>rated maximum output power of transmitter (W)</th>
<th>separation distance according to frequency of transmitter (m)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>80 MHz to 800 MHz</td>
</tr>
<tr>
<td></td>
<td>( d = 0.6 \sqrt{P} )</td>
</tr>
<tr>
<td>0.01</td>
<td>0.06</td>
</tr>
<tr>
<td>0.1</td>
<td>0.19</td>
</tr>
<tr>
<td>1</td>
<td>0.6</td>
</tr>
<tr>
<td>10</td>
<td>1.9</td>
</tr>
<tr>
<td>100</td>
<td>6.0</td>
</tr>
</tbody>
</table>

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 \( \frac{10}{3} \) 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 OnSite 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.
Intentionally blank.