

OPERATOR AND SERVICE MANUAL



POWERHEART® AED

G3 PRO 9300P

70-02063-02 A



AT THE HEART OF SAVING
LIVES™

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Patents

This device is covered by the following U.S. and foreign patents:

5,792,190; 5,999,493; 5,402,884; 5,579,919; 5,749,902; 5,645,571; 6,029,085; 5,984,102; 5,919,212; 5,700,281; 5,891,173; 5,968,080; 6,263,239; 5,797,969; D402,758; D405,754; 6,088,616; 5,897,576; 5,955,956; 6,083,246; 6,038,473; 5,868,794; 6,366,809; 5,474,574; 6,246,907; 6,289,243; 6,411,846; 6,480,734; 6,658,290; 5,850,920; 6,125,298; EP0725751; EP0757912; EP00756878

Other U.S. and foreign patents pending.



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Limited Warranty

Limited Warranty

Cardiac Science Corporation ("Cardiac Science") warrants to the original purchaser that its AEDs and stated battery operating life will be free of any defect in material and workmanship according to the terms and conditions of this Limited Warranty ("Limited Warranty"). For purposes of this Limited Warranty, the original purchaser is deemed to be the original end user of the product purchased. This Limited Warranty is NONTRANSFERABLE and UNASSIGNABLE.

For How Long?

This Limited Warranty covers the following products or parts for the following time periods:

1. Seven (7) years from the date of the original shipment to the original purchaser for Powerheart AED automated external defibrillators. Warranty duration for the pads, batteries and accessories are covered below.
2. Disposable defibrillation pads shall be warranted until the expiration date.
3. Lithium batteries P/N (9145) have a full operational replacement guarantee of one year or 12 hours of use from the point of installation into a Powerheart AED G3 Pro, whichever comes first.
4. One (1) year from the date of original shipment to the original purchaser for Powerheart AED accessories. The terms of the Limited Warranty in effect as of the date of original purchase will apply to any warranty claims.

What You Must Do:

Please complete and submit the Product Registration online at <http://www.cardiacscience.com/services-support/product-registration/>.

To obtain warranty service for your product:

Inside the US, call us toll free at 800.426.0337 seven days a week, 24 hours a day. Our technical support representative will try to resolve your issue over the phone. If necessary, and at our sole discretion, we will arrange for service or a replacement of our product.

Outside the US, contact your local Cardiac Science representative.

What We Will Do:

If your Cardiac Science product is returned within 30 days of the date it was purchased, at the direction of a technical support representative, we will repair or replace it with a new product of equal value at no charge to you or offer a full refund of the purchase price, provided the warranty applies. Cardiac Science retains the exclusive right to repair or replace the product or offer a full refund of the purchase price at its sole discretion. SUCH REMEDY SHALL BE YOUR SOLE AND EXCLUSIVE REMEDY FOR ANY BREACH OF WARRANTY.

If your Cardiac Science product is returned, at the direction of a technical support representative, after 30 days but within the warranty period, Cardiac Science, at its sole discretion, will repair your product or replace it. The repaired or replacement product will be warranted subject to the terms and conditions of this Limited Warranty for either (a) 90 days or (b) the remainder of the original warranty period, whichever is longer, provided the warranty applies and the warranty period has not expired.

Obligations and Warranty Limits:

Limited Warranty Obligation: Exclusive Remedy

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What This Warranty Does Not Cover:

This Limited Warranty does not cover defects or damages of any sort resulting from, but not limited to, accidents, damage while in transit to our service location, product tampering, unauthorized product alterations, unauthorized service, unauthorized product case opening, failure to follow instructions, improper use, abuse, neglect, fire, flood, war or acts of God. Cardiac Science makes no warranty claim as to the compatibility of Cardiac Science products with any non-Cardiac Science products, parts or accessories.

This Limited Warranty is Void if:

1. Any Cardiac Science product is serviced or repaired by any person or entity other than Cardiac Science unless specifically authorized by Cardiac Science.
2. Any Cardiac Science product case is opened by unauthorized personnel or if a product is used for an unauthorized purpose.
3. Any Cardiac Science product is used in conjunction with incompatible products, parts or accessories, including but not limited to batteries. Products, parts and accessories are not compatible if they are not Cardiac Science products intended for use with the Powerheart AED.

If The Warranty Period has Expired:

If your Cardiac Science product is not covered by our Limited Warranty:

Inside the US, call us toll free at 800.426.0337 for advice as to whether we can repair your Powerheart AED, and for other repair information, including charges. Charges for non-warranty repairs will be assessed and are your responsibility. Upon completion of the repair, the terms and conditions of this Limited Warranty shall apply to such repair or replacement product for a period of 90 days.

Outside the US, contact your local Cardiac Science representative.

This warranty gives you specific legal rights, and you may also have other rights, which vary from state to state.

Contents

Chapter 1: Product Information and Safety

Contact information	1-2
Defibrillator tracking	1-2
Product models	1-2
Warranty information	1-3
Safety terms and definitions	1-3
Safety alert descriptions	1-3
Symbol descriptions	1-7
Electromagnetic emissions standards compliance	1-11
Guidance and manufacturer's declaration— electromagnetic emissions	1-11
Guidance and manufacturer's declaration— electromagnetic immunity	1-13
Recommended separation distances between portable and mobile RF communications equipment and the AED	1-19

Chapter 2: Introduction

AED description	2-1
Indications for use	2-2
Powerheart AED G3 Pro	2-2
9131 Defibrillation Electrodes	2-2
9660 Defibrillation Electrodes	2-3
RHYTHMx AED ECG analysis algorithm	2-4
Detection rate	2-4
Asystole threshold	2-4
Noise detection	2-4
Non-committed shock	2-5
Synchronized shock	2-5
Pacemaker pulse detection	2-5
SVT discriminators	2-5
SVT rate	2-5
Rescue protocol	2-6
STAR® biphasic waveform	2-6

STAR biphasic energy protocols for Powerheart G3 AEDs..... 2-6

Operator training requirements..... 2-8

Chapter 3: Getting Started

AED indicators 3-1

 Rescue Ready status indicator 3-1

 Diagnostic panel 3-2

 Z-Bar Indicator..... 3-4

 Audible maintenance indicator 3-5

Control buttons 3-6

 Shock button 3-6

 Manual override button 3-6

Setting the AED internal clock..... 3-7

Voice prompts and text display 3-8

Chapter 4: Data Management

Recording rescue data..... 4-1

Reviewing rescue data..... 4-2

Chapter 5: Troubleshooting and Maintenance

Self-tests 5-2

Indicator troubleshooting table 5-3

Scheduled maintenance 5-4

 Daily maintenance 5-4

 Monthly maintenance 5-4

 Annual maintenance 5-5

Cleaning and care..... 5-6

Authorized repair service 5-7

Frequently Asked Questions..... 5-8

Chapter 6: Technical Data

Parameters..... 6-2

STAR biphasic waveform 6-7

1

Product Information and Safety

Contents

◆	Contact information	1-2
◆	Defibrillator tracking	1-2
◆	Product models	1-2
◆	Warranty information	1-3
◆	Safety terms and definitions	1-3
◆	Safety alert descriptions	1-3
◆	Symbol descriptions	1-7
◆	Electromagnetic emissions standards compliance	1-11

Before Operating the Powerheart G3 AED:

- ◆ Become familiar with the various safety alerts in this section.
- ◆ Safety alerts identify potential hazards using symbols and words to explain what could potentially harm you, the patient, or the Powerheart G3 AED.

Contact information

Inside the United States:

To order additional Powerheart G3 AEDs or accessories, contact Cardiac Science Customer Care:

- ◆ Toll Free (USA): 1.800.426.0337 (option 2)
- ◆ Telephone: +1.262.953.3500 (option 2)
- ◆ Fax: +1.262.953.3499
- ◆ Email: care@cardiacscience.com

Cardiac Science provides 24-hour telephone technical support. You can also contact Technical Support though fax, email, or live web chat.

There is no charge to the customer for a technical support call. Please have the serial and model numbers available when contacting Technical Support. (The serial and model numbers are located on the underside of the AED.)

- ◆ Toll Free (USA): 1.800.426.0337 (option 1)
- ◆ Telephone: +1.262.953.3500 (option 1)
- ◆ Fax: +1.262.798.5236
- ◆ Email: techsupport@cardiacscience.com
- ◆ Web site: <http://www.cardiacscience.com>

Outside the United States:

Contact your local Cardiac Science representative to order devices or accessories and to receive technical support for your AED products.

Defibrillator tracking

Defibrillator manufacturers and distributors are required, under the Safe Medical Devices Act of 1990, to track the location of defibrillators they sell. Please notify Cardiac Science Technical Support in the event that your defibrillator is sold, donated, lost, stolen, exported, destroyed or if it was not purchased directly from Cardiac Science or an authorized dealer.

Product models

This manual is for Powerheart G3 Pro model 9300P.

Warranty information

The Powerheart G3 AED *Operator and Service Manual* and any and all information contained herein (except for the [Limited Warranty](#) chapter) do not constitute any warranty as to the Powerheart G3, Powerheart G3 Automatic or any related products in any manner whatsoever. The [Limited Warranty](#) chapter in this manual serves as the sole and exclusive warranty provided by Cardiac Science regarding Powerheart G3 AED products.

Safety terms and definitions

The symbols shown below identify potential hazard categories. The definition of each category is as follows:



DANGER

This alert identifies hazards that will cause serious personal injury or death.



WARNING

This alert identifies hazards that may cause serious personal injury or death.



Caution

This alert identifies hazards that may cause minor personal injury, product damage, or property damage.

Safety alert descriptions

The following is a list of Powerheart G3 AED safety alerts that appear in this section and throughout this manual.

Read and understand these safety alerts before operating the AED.



Caution: Read this Operator and Service Manual carefully.

It contains information about your safety and the safety of others. Become familiar with the controls and how to use the AED properly before operating the product.



DANGER! Fire and Explosion Hazard

To avoid possible fire or explosion hazard, do not operate the AED:

- In the presence of flammable gases
- In the presence of concentrated oxygen
- In a hyperbaric chamber



WARNING! Shock Hazard and Possible Equipment Damage

Defibrillation shock current flowing through unwanted pathways is potentially a serious electrical shock hazard and results in potential damage to the equipment. To avoid this hazard during defibrillation abide by all of the following:

- Do not use in standing water or rain. Move patient to dry area
- Do not touch the patient, unless performance of CPR is indicated
- Do not touch metal objects in contact with the patient
- Keep defibrillation pads clear of other pads or metal parts in contact with patient
- Disconnect all non-defibrillator proof equipment from the patient before defibrillation



WARNING! Battery model 9145 is Not Rechargeable.

Do not attempt to recharge the battery. Any attempt to recharge the battery may result in an explosion or fire hazard.



WARNING! Possible Radio Frequency (RF) Susceptibility.

RF susceptibility from cellular phones, CB radios, FM 2-way radios and other wireless devices may cause incorrect rhythm recognition and subsequent shock advisory. When attempting a rescue using the AED, do not operate wireless radiotelephones within 1 meter of the AED – turn power OFF to the radiotelephone and other like equipment near the incident.



WARNING! Possible Interference with Implanted Pacemaker.

Therapy should not be delayed for patients with implanted pacemakers and a defibrillation attempt should be made if the patient is unconscious and not breathing. The AED has pacemaker detection and rejection, however with some pacemakers the AED may not advise a defibrillation shock. (Cummins, R., ed., Advanced Cardiac Life Support; AHA (1994): Ch. 4)

When placing Pads:

- Do not place the pads directly over an implanted device.
- Place the pad at least one inch from any implanted device.



WARNING! Electromagnetic Compatibility.

Use of accessories or cables other than those specified, with the exception of accessories and cables sold by Cardiac Science Corporation as replacement parts for internal components, may result in increased emissions or decreased immunity of the AED.



WARNING! Improper Equipment Placement.

Position the AED away from other equipment. If it is necessary to use the AED adjacent to or stacked with other equipment, then observe the AED to verify normal operations.



Caution: Restricted Use.

Federal law restricts this device for sale by or on the order of a physician or practitioner licensed by law of the state in which he/she practices.



Caution: Lithium Sulfur Dioxide Battery (model 9145).

Pressurized contents: never recharge, short circuit, puncture, deform, or expose to temperatures above 65°C (149°F). Remove the battery when discharged.



Caution: Battery Disposal.

Recycle or dispose of the lithium battery in accordance with all federal, state and local laws. To avoid fire and explosion hazard, do not burn or incinerate the battery.



Caution: Use only Cardiac Science Approved Equipment.

Using batteries, pads, cables, or optional equipment other than those approved by Cardiac Science may cause the AED to function improperly during a rescue.



Caution: Possible Improper AED Performance.

Using pads that are damaged or expired may result in improper AED performance.



Caution: Moving the Patient During a Rescue.

During a rescue attempt, excessive jostling or moving of the patient may cause AEDs to improperly analyze the patient's cardiac rhythm. Stop all motion or vibration before attempting a rescue.



Caution: Systems Statement.

Equipment connected to the analog and digital interfaces must be certified to the respective IEC standards (i.e. IEC 60950 for data processing equipment and IEC 60601-1 for medical equipment).

Furthermore, all configurations shall comply with the system standard IEC 60601-1-1. Anybody who connects additional equipment to the signal input part or signal output part configures a medical system, and is therefore, responsible that the system complies with the requirements of the system standard IEC 60601-1-1.



Caution: Equipment Malfunction.

Portable and RF communications equipment may affect the AED. Always observe the recommended separation distances as defined in the EMC declaration tables.















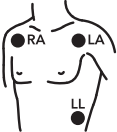
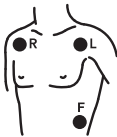





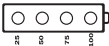


Caution: Equipment Malfunction.




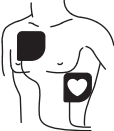









The AED requires special precautions regarding EMC. Use the AED according to the guidelines of the EMC declaration tables.











Symbol descriptions

The following symbols may appear in this manual, on the AED, or on its optional components. Some of the symbols represent standards and compliances associated with the AED and its use.

Symbol	Description	Symbol	Description
	Caution. Consult accompanying documentation.		Additional information is provided in the accompanying documentation.
	Dangerous Voltage: The defibrillator output has high voltage and can present a shock hazard. Please read and understand all safety alerts in this manual before attempting to operate the AED.		Defibrillator Proof Type BF Equipment: The AED, when connected to the patient's chest by the pads, can withstand the effects of an externally applied defibrillation shock.
IP24	The AED is protected against the effects of splashing water in accordance with IEC 60529.		Do not recharge battery.
	Classified by CSA International with respect to electric shock, fire and mechanical hazards only in accordance with CAN/CSA C22.2 No.60601-1:08, EN60601-1 and EN60601-2-4. Certified to CAN/CSA Standard C22.2 No. 60601-1:08.		
	When the SHOCK indicator is lit, press this button to deliver a defibrillation shock.		Indicates the AED battery status. The illuminated areas indicate the remaining battery capacity.

Symbol	Description	Symbol	Description
	The Z-Bar provides a relative visual indicator of the total transthoracic impedance between the two defibrillation pads.		Indicates AED requires maintenance by authorized service personnel.
	A red indicator with a BLACK X means the AED requires operator attention or maintenance, and is not Rescue Ready.		A green indicator without a BLACK X means the AED is Rescue Ready.
	Indicates placement of ECG leads and electrodes (AHA).		Indicates placement of ECG leads and electrodes (IEC).
	When pressed and confirmed, activates manual mode.		Indicates that the manual override function has been disabled.
	Symbol for ON. Open the lid to power on the AED.		Test button: Press to view battery capacity.
	Charge LED: Solid yellow indicates battery charging. Blinking yellow indicates charging error.		Battery capacity: Indicates the AED battery status. The illuminated areas indicate the remaining battery capacity when the test button is pressed.
	Date of manufacture: year and month.		Date of factory recertification (R): year and month.

Symbol	Description	Symbol	Description
	Latex free.		Disposable. Single patient use only.
	Tear here to open.		<ul style="list-style-type: none">- Position of defibrillation pads on the chest of patient.- When pads on screen are flashing, check defibrillation pads. The defibrillation pads are missing, not connected, or have compromised functionality.
	For use by or on the order of a Physician, or persons licensed by state law.		Separate one pad from blue liner by peeling from the tabbed corner.
	Do not incinerate or expose to open flame.		
	Upper and lower operating temperature limits.		Use pads by this date.
	Serial Number		Device model number; battery model number
	Option number		Lot number

Symbol	Description	Symbol	Description
	Lithium ion		Rechargeable battery
	Lithium sulfur dioxide		Authorized representative in the European Community
	CE Mark: This equipment conforms to essential requirements of the Medical Device Directive 93/42/EEC.		Manufacturer
	Waste Electronic Electrical Equipment (WEEE). Separate collection for waste electrical and electronic equipment.		Waste Electronic Electrical Equipment (WEEE) containing lead. Separate collection for waste electrical and electronic equipment.
	Recycle cardboard according to local law.		Dispose of properly in accordance with all state, province, and country regulations.

Electromagnetic emissions standards compliance

Guidance and manufacturer’s declaration—electromagnetic emissions

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

Emissions test	Compliance	Electromagnetic environment—guidance
RF emissions CISPR 11	Group 1	The AED 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.

Emissions test	Compliance	Electromagnetic environment—guidance
RF emissions	Class B	The AED 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.
CISPR 11		
Harmonic emissions	Not applicable	
IEC 61000-3-2		
Voltage fluctuations/flicker emissions	Not applicable	
IEC 61000-3-3		

Guidance and manufacturer's declaration—electromagnetic immunity

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


Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment—guidance
Electrostatic discharge (ESD)	±6 kV contact	±6 kV contact	Floors should be wood, concrete or ceramic tile. If floors are covered with synthetic material, the relative humidity should be at least 30%
IEC 61000-4-2	±8 kV air	±8 kV air	
Electrical fast transient/burst	±2 kV for power supply lines	Not applicable	
IEC 61000-4-4	±1 kV for input/output lines		
Surge	±1 kV differential mode	Not applicable	
IEC 61000-4-5	±2 kV common mode		

Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment—guidance
Voltage dips, short interruptions and voltage variations on power supply input lines	<5% U _T (>95% dip in U _T) for 0.5 cycle	Not applicable	
61000-4-11	40% U _T (60% dip in U _T) for 5 cycles		
	70% U _T (30% dip in U _T) for 25 cycles		
	<5% U _T (>95% dip in U _T) for 5 sec.		
Power frequency (50/ 60 Hz) magnetic field	3 A/m	80 A/m	Power frequency magnetic fields should be at levels no higher than those characteristic of a typical location in typical heavy industrial and power plants and the control rooms of H.V. sub-stations.
IEC 61000-4-8			

Note: U_T is the a.c. mains voltage prior to application of the test level.

Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment—guidance
Conducted RF	3 Vrms	Not Applicable	
IEC 61000-4-6	150 kHz to 80 MHz outside ISM bands ^a		
	10 Vrms	Not Applicable	
	150 kHz to 80 MHz in ISM bands ^a		

Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment—guidance
			Portable and mobile RF communications equipment should be used no closer to any part of the AED, including cables, than the recommended separation distance calculated from the equation applicable to the frequency of the transmitter.
			Recommended separation distance $d = 1.2 \sqrt{P}$ 80 MHz to 800 MHz
Radiated RF	10 V/m	10 V/m	
IEC 61000-4-3	80 MHz to 2.5 GHz		$d = 2.3 \sqrt{P}$ 800 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) ^b .

Immunity test	IEC 60601 test level	Compliance level	Electromagnetic environment—guidance
			<p>Field strengths from fixed RF transmitters, as determined by an electromagnetic site survey,^c should be less than the compliance level in each frequency range.^d</p> <p>Interference may occur in the vicinity of equipment marked with the following symbol:</p> 

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 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 to 40.70 MHz.
- b 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 is used in calculating the recommended separation distance for transmitters in these frequency ranges.
- 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 AED is used exceeds the applicable RF compliance level above, the AED should be observed to verify normal operation. If abnormal performance is observed, additional measures may be necessary, such as re-orienting or relocating the AED.
- d Over the frequency range 150 kHz to 80 MHz, field strengths should be less than 1 V/m.

Recommended separation distances between portable and mobile RF communications equipment and the AED

The AED is intended for use in an electromagnetic environment in which radiated RF disturbances are controlled. The customer or the user of the AED can help prevent electromagnetic interference by maintaining a minimum distance between portable and mobile RF communications equipment (transmitters) and the AED 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	150 kHz to 80 MHz in ISM bands	80 MHz to 800 MHz	800 MHz to 2.5 GHz
	$d = 1.2 \sqrt{P}$	$d = 1.2 \sqrt{P}$	$d = 1.2 \sqrt{P}$	$d = 2.3 \sqrt{P}$
0.01	0.12	0.12	0.12	0.23
0.1	0.38	0.38	0.38	0.73
1	1.2	1.2	1.2	2.3
10	3.8	3.8	3.8	7.3
100	12	12	12	23

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 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.

2 Introduction

Contents

◆ AED description	2-1
◆ Indications for use	2-2
◆ RHYTHMx AED ECG analysis algorithm	2-4
◆ Rescue protocol	2-6
◆ STAR® biphasic waveform	2-6
◆ STAR biphasic energy protocols for Powerheart G3 AEDs	2-6
◆ Operator training requirements	2-8

This section presents information about the AED, its use, and the training requirements for operation.

AED description

The AED is a self-testing, battery-operated automated external defibrillator (AED). After applying the AED's defibrillation pads to the patient's bare chest, the AED automatically analyzes the patient's electrocardiogram (ECG) and advises the operator to press the button and deliver a shock if needed. The AED guides the operator through the rescue using a combination of voice prompts, audible alerts, and visible indicators. At the discretion of Advanced Life Support (ALS) personnel, the AED can be converted to manual override mode, and deliver a shock by pressing the SHOCK button to deliver therapy. The AED can also provide non-diagnostic ECG monitoring.

Indications for use

Powerheart AED G3 Pro

The Powerheart® AED G3 Pro is intended to be used by personnel who have been trained in its operation. The operator should be qualified by training in basic life support, CPR/AED or other physician-authorized emergency medical response. The device is indicated for emergency treatment of victims exhibiting symptoms of sudden cardiac arrest who are unresponsive and not breathing. If the victim is breathing post-resuscitation, the AED should be left attached to allow for acquisition and detection of the ECG rhythm. If a shockable ventricular tachyarrhythmia recurs, the device will charge automatically and advise the operator to deliver therapy; or when in manual override mode, ALS personnel will monitor the ECG display and deliver a shock by pushing the shock button to deliver therapy.

When the patient is a child under 8 years of age or weighs less than 55 lbs (25kg), the AED should be used with the Model 9730 Pediatric Attenuated Defibrillation Electrodes. Therapy should not be delayed to determine the patient's exact age or weight.

9131 Defibrillation Electrodes

Cardiac Science 9131 Defibrillation Electrodes are single use and intended to be used in conjunction with Cardiac Science automatic external defibrillators (AED) to monitor and deliver defibrillation energy to the patient.

The electrodes are intended for short term use (<8 hours) and must be used before the expiration date listed on the packaging.

The AED electrodes are used for emergency treatment of cardiac arrest patients over 8 years of age or greater than 55 pounds. The user assesses the patient's condition and confirms that the patient is unconscious, pulseless and is not breathing prior to applying the electrodes to the skin.

9660 Defibrillation Electrodes

Cardiac Science 9660 Defibrillation Electrodes are single use and intended to be used in conjunction with Cardiac Science G3 Pro automated external defibrillators (AED) to monitor and deliver defibrillation energy to the patient.

The electrodes are intended for short term use (<8 hours) and must be used before the expiration date listed on the packaging.

The AED electrodes are used for emergency treatment of cardiac arrest patients over 8 years of age or greater than 55 pounds. The user assesses the patient's condition and confirms that the patient is unconscious, pulseless and is not breathing prior to applying the electrodes to the skin.

RHYTHMx AED ECG analysis algorithm

The RHYTHMx™ AED ECG analysis algorithm provides ECG detection capabilities. The features available with the AED include the following:

- ◆ Detection Rate
- ◆ Asystole Threshold
- ◆ Noise Detection
- ◆ Non-Committed Shock
- ◆ Synchronized Shock
- ◆ Pacemaker Pulse Rejection
- ◆ SVT Discriminators
- ◆ Supraventricular Tachycardia (SVT) Rate

Detection rate

All ventricular fibrillation (VF) and ventricular tachycardia (VT) rhythms at or above this rate will be classified as shockable. All rhythms below this rate will be classified as non-shockable. This rate is programmable between 120 bpm (beats per minute) and 240 bpm via MDLink Software by the Medical Director. The default Detection Rate is 160 bpm.

Asystole threshold

The asystole baseline-to-peak threshold is set at 0.08 mV. ECG rhythms at or below 0.08 mV will be classified as asystole and will not be shockable.

Noise detection

The AED will detect noise artifacts in the ECG. Noise could be introduced by excessive moving of the patient or electronic noise from external sources like cellular and radiotelephones. When noise is detected, the AED will issue the prompt “ANALYSIS INTERRUPTED. STOP PATIENT MOTION” to warn the operator. The AED will then proceed to reanalyze the rhythm and continue with the rescue.

Non-committed shock

After the AED advises a shock, it continues to monitor the patient ECG rhythm. If the patient's rhythm changes to a non-shockable rhythm before the actual shock is delivered, the AED will advise that the rhythm has changed and issue the prompt "RHYTHM CHANGED. SHOCK CANCELLED." The AED will override the charge.

Synchronized shock

The AED is designed to automatically attempt to synchronize shock delivery on the R-wave if one is present. If delivery cannot be synchronized within one second, a non-synchronized shock will be delivered.

Pacemaker pulse detection

The AED contains pacemaker pulse detection circuitry to detect pulses from an implanted pacemaker.

SVT discriminators

The AED is supplied with the SVT Discriminator enabled and with the default setting "NO THERAPY FOR SVT". With the factory default setting of "NO THERAPY FOR SVT", the AED will not shock an SVT rhythm.

SVT Discriminators are sophisticated filters that analyze the morphology of the ECG waveforms and distinguish VF/VT from SVT and Normal Sinus Rhythms (NSR). The SVT Discriminator will only be applied to rhythms that fall between the Detection Rate and the SVT Rate. The factory default setting for this feature is "NO THERAPY FOR SVT", however the Medical Director can enable this feature using MDLink on the Powerheart AED.

SVT rate

All rhythms with rates between the Detection Rate and SVT Rate will be screened through a number of SVT Discriminators to classify them into VF/VT or SVT. Rhythms classified as SVT between the two set rates are not shockable. All SVT rhythms above the rates will be classified as shockable. The SVT Rate must be greater than the

Detection Rate and is selectable between 160 and 300 bpm or, “NO THERAPY FOR SVT” can be selected via MDLink Software by the Medical Director.

Rescue protocol

The AED rescue protocol is consistent with the guidelines recommended by the AHA/ERC 2010 Guidelines for Resuscitation and Emergency Cardiac Care.

Upon detecting a shockable cardiac rhythm, the AED advises the operator to press the SHOCK button to deliver a defibrillation shock followed by directions to perform 2 minutes of CPR.

STAR[®] biphasic waveform

The STAR[®] Biphasic Waveform is designed to measure the patient's impedance and deliver a customized shock. This allows the delivery of an optimized energy level to each patient. The energy levels for the Powerheart G3 AED are available in three different defibrillation shock levels.

The Ultra-Low Energy (150 VE), Low Energy (200 VE), and High Energy (300 VE) shocks are variable energy. The actual energy is determined by the patient's impedance. See [Table 2-1 on page 2-7](#), [Table 6-2 on page 6-8](#), [Table 6-3 on page 6-8](#), and [Table 6-4 on page 6-9](#) for additional information.

STAR biphasic energy protocols for Powerheart G3 AEDs

The STAR Biphasic defibrillation waveform will deliver variable escalating energy that is customized to each patient's needs based upon a patient's thoracic impedance. This customization adjusts for the unique physical differences between patients. The Powerheart G3 AED comes equipped with five different biphasic energy protocols.

The operator, with guidance, direction, and implementation from the designated AED program Medical Director, may select from one of these five protocols when placing the Powerheart G3 AED into service. The Powerheart G3 AED's factory default energy protocol is 200-300-300 Joule (J) escalating Variable Energy (VE). The first shock is

delivered within the range of 126J-260J. Subsequent shocks are delivered within a range of 170J-351J.

These protocols are selected by using the MDLink software program. The five biphasic energy protocols available are as follows:

Table 2-1: Biphasic Energy Protocols

Energy Protocols	Shock Sequence ¹	Energy Level (VE)	Energy Range ² (J)
Factory Default	1	200	126-260
	2	300	170-351
	3	300	170-351
Protocol #2	1	200	126-260
	2	200	126-260
	3	300	170-351
Protocol #3	1	150	95-196
	2	200	126-260
	3	200	126-260
Protocol #4	1	150	95-196
	2	150	95-196
	3	200	126-260
Protocol #5	1	200	126-260
	2	200	126-260
	3	200	126-260

¹The Ultra-Low Energy (150 VE), Low Energy (200 VE) and High Energy (300 VE) shocks are variable energy. The actual energy is determined by the patient's impedance.

² Allowable energy range.

Operator training requirements

Persons authorized to operate the AED must have all of the following minimum training:

- ◆ Defibrillation training and other training as required by state, province, or country regulations
- ◆ Training on operation and use of the AED
- ◆ Additional training as required by the physician or Medical Director
- ◆ A thorough understanding of the procedures in this manual

Note: Keep valid certificates of training and certification as required by state, province, or country regulations.

3

Getting Started

Contents

◆ AED indicators	3-1
◆ Control buttons	3-6
◆ Setting the AED internal clock	3-7
◆ Voice prompts and text display	3-8

AED indicators

The following indicators are located on the AED.

Rescue Ready status indicator

The status indicator is located on the Powerheart G3 AED handle.



When this indicator is green, the AED is Rescue Ready. This means the AED self-tests have verified the following:

- ◆ Battery has an adequate charge
- ◆ Pads are properly connected to the AED and functioning
- ◆ Integrity of the internal circuitry is good

When the status indicator is red, attention is required.

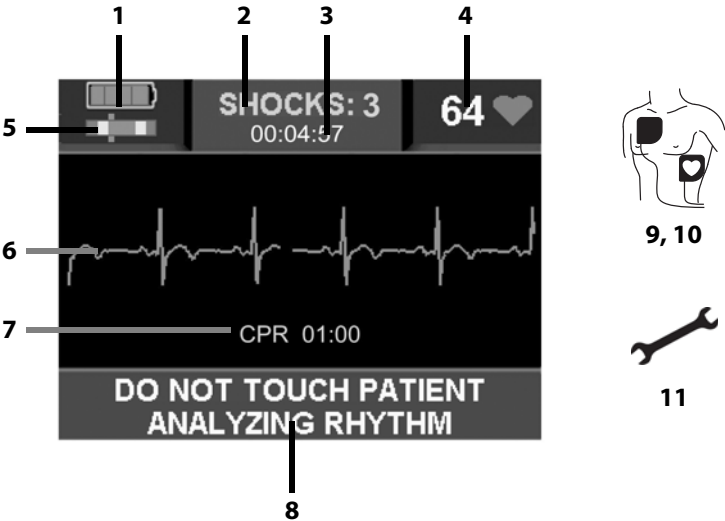


1. Open the lid of the AED to troubleshoot the issue.
2. The AED may become Rescue Ready (the indicator turns green) after it runs further tests.

3. If the indicator remains red, contact Cardiac Science Technical Support (see [Contact information](#) on page 1-2) or outside the U.S., your local Cardiac Science representative.

Note: When the status indicator shows not Rescue Ready (the indicator is red) you might hear an intermittent beep. See [Audible maintenance indicator](#) for troubleshooting information.

Diagnostic panel



Indicator	Description
1 Smartgauge™ battery	<p>Displays the battery capacity. At maximum charge, the battery is GREEN. With use, the GREEN level will gradually go out from right to left as the battery capacity decreases. Once the battery level is depleted, the battery indicator will turn to RED, and the battery should be replaced.</p> <p>Note: When the battery indicator is initially RED—upon lid opening or at any time during a rescue—a BATTERY LOW prompt will be issued at once. However, the AED is capable of delivering at least nine more defibrillation shocks after the first time a BATTERY LOW prompt appears.</p>
2 Number of shocks delivered	<p>Counts and displays the number of shocks delivered.</p>
3 Elapsed rescue time	<p>Times and displays the elapsed rescue time.</p>
4 Heart rate	<p>Displays the patient's heart rate.</p>
5 Z-Bar	<p>provides a relative visual graphical indicator of the total transthoracic impedance between the two defibrillation pads. The Z-Bar is used in the assessment of:</p> <ul style="list-style-type: none"> • Adequate pad placement • Pad quality and integrity • Pad adhesion to the patient's skin • Proper pad connection to the AED • Provides for quick assessment between pads off and pads shorted <p>For more information, see Z-Bar Indicator on page 3-4</p>
6 ECG display	<p>Displays 4.5 seconds of the patient's ECG.</p>
7 CPR counter	<p>During CPR, displays a count-down timer.</p>

Indicator		Description
8	Text display	With 2 lines of text, it provides the operator with information regarding system initialization, text version of the voice prompts and data during a rescue, and diagnostics.
9	Pad placement	Visually assists the rescuer with pad placement with the directions for use. Appropriate text prompts are also displayed.
10	Pad	When flashing with voice and text prompt indicating “Check Pads”, indicates to check pads when pads are: <ul style="list-style-type: none">• not properly connected to the AED• not within operational specifications (cold, dried, damaged)• disconnected from the patient during a rescue
11	Service	Indicates that service is required that can only be performed by qualified service personnel.

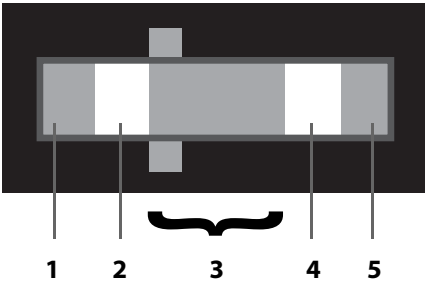
Z-Bar Indicator

The Z-Bar provides a relative visual graphical indicator of the total transthoracic impedance between the two defibrillation pads. The Z-Bar is used in the assessment of:

- ◆ Adequate Pad placement
- ◆ Pad quality and integrity
- ◆ Pad adhesion to the patient’s skin
- ◆ Proper Pad connection to the AED
- ◆ Provides for quick assessment between PADS OFF and PADS SHORTED

Note: The Z-Bar is displayed on all therapy screens with the exception of the ECG MONITORING screen. On the ECG MONITORING screen the Z-Bar will be displayed only if the detection lead is set to Pads.

The Z-Bar is divided into 5 sections. The ideal operating range is section 3 (impedance range from 30 to <150).



Section	Measured impedance range (ohms)	Description	Color fill
1	<20	Lower Limit Alarm—Non-operational range.	Red
2	20- 30	Lower marginal operating range. Indicates potential issue with pad position.	Yellow
3	30 - 150	Normal operating range.	Green
4	150 -180	Upper marginal operating range. Indicates potential Pad degradation in Pad quality or position.	Yellow
5	>180	Upper Limit Alarm—Non-operational range.	Red

Audible maintenance indicator

When the daily, weekly, or monthly self-test determines attention is required, a beep sounds every 30 seconds until the lid is opened or the battery power is depleted. Opening and closing the lid may deactivate the beep. If the error is not corrected by the next automatic self-test, the beep will be reactivated.

Because the beep is a general indicator that the AED is not Rescue Ready, always open the lid first and allow the AED to perform its self test. If the AED provides a voice prompt but does not change the Rescue Ready indicator to green, note the prompt and contact Cardiac Science Technical Support (see [Contact information](#) on page 1-2) or outside the U.S., your local Cardiac Science representative.

Control buttons

The AED has two buttons.

Shock button



The SHOCK button is located at the far right of the control panel.

Pressing this button delivers a defibrillation shock. The word SHOCK and the shock button indicator LED illuminate RED when the AED is ready to deliver a defibrillation shock to the patient. Note modification to behavior below when in manual mode.

Manual override button



The Manual Override button is located at the far left of the control panel and converts the device from automated mode to manual. This feature should only be used by ALS personnel. The factory default setting for Manual Override functionality is enabled, however the Medical Director can disable/enable this feature via MDLink.

- ◆ Lift the cover to access the button.
- ◆ Pressing this button converts to manual standby mode when pushed once, a voice prompt “Entering manual mode. Press button again to confirm”, will be heard. Converts to manual mode when MANUAL button is pressed again.
- ◆ If the rescuer does not confirm within 30 seconds of the capacitors charging, the AED will revert back to AED Mode.
- ◆ If the Medical Director has disabled this feature in MDLink, an icon indicating No MANUAL MODE will appear in the bottom left of the display.

Setting the AED internal clock

For US models, the internal clock is preset to Central Standard Time. You can reset it to your local date and time. To set the clock, you need a Windows XP or newer computer with RescueLink software installed.

To set the clock:

1. Ensure that the computer is set at the correct local time and date.
2. Run the RescueLink software on the computer.
3. Connect the communications cable to the computer.
4. Align the infra-red (IR) port on the AED with the IR port on the communications cable.
5. Open the lid of the AED.
6. In RescueLink:
 - a. From the **Communications** menu, select **AED Date and Time**.
 - b. Click **Get** to review the current time in the AED.
The AED prompts, "Communications Mode."
 - c. If the time and date is incorrect, click **Set** to set a new time and date.

The AED date and time updates to the computer's time and date.

7. Close the lid of the AED.

Note: Use only the IR communications cable available separately from Cardiac Science. Other IR products may interfere with the transmission and are not for use with the AED.

Voice prompts and text display

The voice prompts activate when the AED lid is opened and help guide the operator through the rescue. The AED text display provides a visual display of most of the audible voice prompts.

The following tables list the voice and text prompts and a description of when the prompts are issued.

Table 3-1: Standard prompts

Voice prompt	Text display	Situation
Note: The AED is shipped from the factory with Traditional CPR defaulted ON. The Medical Director may modify the CPR options in MDLink. Traditional CPR prompts are listed in this table. Except where noted, prompts apply both to compressions-only CPR and traditional CPR (compressions and breaths).		
Tear open package and remove pads.	TEAR OPEN PACKAGE REMOVE PADS	When the lid is opened, this phrase is repeated twice to initiate the rescue sequence.
Peel one pad from plastic liner.	PEEL ONE PAD FROM PLASTIC LINER	Repeats until one pad is peeled off of the liner.
Place one pad on bare upper chest.	PLACE ONE PAD ON BARE UPPER CHEST	Repeats twice while one pad is placed.
Peel second pad and place on bare lower chest as shown.	PEEL SECOND PAD PLACE ON LOWER CHEST	Repeats until both pads are placed on the patient.

Table 3-1: Standard prompts (continued)

Voice prompt	Text display	Situation
Press pads firmly to patient's bare skin.	PRESS PADS TO PATIENT'S BARE SKIN	When better connectivity is required because impedance is too high.
Do not touch patient! Analyzing rhythm.	DO NOT TOUCH PATIENT ANALYZING RHYTHM	When the AED is analyzing the cardiac rhythm of the patient.
Shock advised.	SHOCK ADVISED	When the AED is preparing to deliver a defibrillation shock.
Charging.	CHARGING	Repeats while AED is charging.
Stand clear! Push flashing button to deliver shock.	STAND CLEAR PUSH BUTTON TO SHOCK	After the AED is fully charged and ready to deliver the defibrillation shock. The RED SHOCK indicator flashes and the phrase repeats for 30 seconds or until the SHOCK button is pushed.
Plug in pads connector.	PLUG IN PADS CONNECTOR	When the pad socket does not have defibrillation pads or ECG electrodes connected.
Shock Delivered.	SHOCK DELIVERED	After the AED delivers a defibrillation shock.
If needed start CPR.	IF NEEDED START CPR	This prompt plays in situations where the AED did not determine that a shock was appropriate.
Start CPR.	START CPR	This prompt plays at the start of a CPR interval after the AED determines that the patient has a shockable heart rhythm.

Table 3-1: Standard prompts (continued)

Voice prompt	Text display	Situation
Give 30 compressions. Then Give two breaths.	30 COMPRESSIONS 2 BREATHS	Perform CPR for 2 minutes. Note: Prompt for traditional CPR only.
Battery Low.	BATTERY LOW	Occurs once when the battery voltage becomes low, although a rescue can continue for approximately 9 more shocks. When the battery is too low to perform a rescue, the device halts operation and displays “Battery Low” on the Display, the NVI will turn to RED and the Sonalert will beep. No voice prompt is issued. If completely depleted, all AED activity will terminate.
Analysis interrupted. Stop patient motion.	ANALYSIS INTERRUPTED STOP PATIENT MOTION	When the AED detects ECG noise artifact, stop moving or touching the patient.
Open lid to continue rescue.	OPEN LID TO CONTINUE RESCUE	When the lid is inadvertently closed during a rescue, this prompt will repeat for 15 seconds.
Rhythm changed. Shock cancelled.	RHYTHM CHANGED SHOCK CANCELLED	When the device is prepared to shock then detects a change in rhythm and therefore cancels the shock.
ECG monitoring mode	ECG MONITORING MODE	When ECG Patient Cable is inserted into the pad socket. When the Manual Mode button is pressed when in ECG Monitoring Mode.
Communications mode	COMMUNICATIONS MODE	When the lid is open and IR is transmitting the AED.

Table 3-1: Standard prompts (continued)

Voice prompt	Text display	Situation
(Beep) (or) Metronome (30 times at 100/ minute) Note: Option is selected in MDLink software.	Not applicable	One “Beep” occurs in 30-second intervals during CPR when enabled by the MDLink software program, “Beep” also occurs when the AED requires maintenance.
Continue CPR	CONTINUE CPR	During CPR mode when enabled, or when a rescue is resumed in CPR mode after being interrupted by the lid closing.
Service required	SERVICE REQUIRED	Occurs after a self-test determines that the AED is not functioning properly. The prompt “SERVICE REQUIRED” will be heard when the lid is opened.

Table 3-2: Advanced prompts

Voice Prompt	Text Display	Situation
Entering manual mode. Press button again to confirm	MANUAL MODE PRESS BUTTON TO CONFIRM	After ALS presses the MANUAL button once to initiate the manual mode.
Manual mode. charging	CHARGING	After ALS presses the MANUAL button again to confirm.

Table 3-2: Advanced prompts (continued)

Voice Prompt	Text Display	Situation
Manual mode not confirmed.	MANUAL MODE NOT CONFIRMED	When the MANUAL button is not pressed a second time within five seconds, the device stays in AED mode.
If rhythm is shockable, press SHOCK button to deliver therapy.	IF SHOCKABLE RHYTHM PRESS SHOCK BUTTON	When in manual mode, prompts ALS personnel to press SHOCK button if ECG indicates a shockable rhythm.
Shockable rhythm. Attach defibrillation pads.	SHOCKABLE RHYTHM ATTACH DEFIBRILLATION PADS	When the device is performing ongoing ECG monitoring via the ECG Patient Cable Kit and detects a shockable rhythm.
(none)	DEVICE WILL DISARM IN :30	<p>Should the rescuer go into manual mode and decide that AED mode is more appropriate, the AED will revert back to AED mode 30 seconds after charging is complete. The seconds will count down from 30 on the display.</p> <p>Note: When Remain in manual mode has been enabled (Using MDLink software). The AED will disarm but remain in Manual Mode.</p>

4 Data Management

Contents

- ◆ [Recording rescue data](#) 4-1
 - ◆ [Reviewing rescue data](#) 4-2
-

The AED is designed for ease of data management and review. The data can be downloaded from the AED and displayed on the PC screen using the Rescuelink software.

Recording rescue data

The AED automatically records Rescuelink data and can store up to 60 minutes of ECG monitoring time in its internal memory. Multiple rescues can be stored in the internal memory, allowing the rescuer to administer additional rescues without downloading the data to a PC. Should the internal memory become full, the AED will purge rescues as needed, beginning with the oldest rescue.

When downloading data, Rescuelink will enable the user to select which rescue to download. See the Rescuelink application HELP files for more information.

Reviewing rescue data

You need a Windows XP or newer computer with RescueLink software installed.

To retrieve data from internal memory:

1. Run the RescueLink software on the computer.
2. Connect the communications cable to the computer.
3. Align the infra-red (IR) port on the AED with the IR port on the communications cable.
4. Open the lid of the AED.
5. In RescueLink:
 - a. From the **Communications** menu, select **Get Rescue Data**.
 - b. Select **Internal Memory of AED**, then click **OK**.
The AED prompts, "Communications Mode."
 - c. Select a rescue by clicking on the date and clicking **OK**.
 - d. Wait for the rescue data to appear in RescueLink.
6. Close the lid of the AED.

Note: Use only the IR communications cable available separately from Cardiac Science. Other IR products may interfere with the transmission and are not for use with the AED.

5

Troubleshooting and Maintenance

Contents

◆	Self-tests	5-2
◆	Indicator troubleshooting table	5-3
◆	Scheduled maintenance	5-4
◆	Cleaning and care	5-6
◆	Authorized repair service	5-7
◆	Frequently Asked Questions	5-8

This section presents information about the AED diagnostics self-tests, maintenance, and service indications.

Self-tests

The AED has a comprehensive self-test system that automatically tests the electronics, battery, pads, and high voltage circuitry. Self-tests are also activated every time you open and close the AED lid.

When performing the self-tests, the AED completes the following steps automatically:

1. Turns itself on, and the Status Indicator changes to red.
2. Performs the self-test.
3. If successful, the Status Indicator reverts to green.
4. Turns itself off if the lid is closed.

There are three types of automatic self-tests:

- ◆ The daily self-test checks the battery, pads, and the electronic components.
- ◆ The weekly self-test completes a partial charge of the high voltage electronics in addition to the items tested in the daily self-test.
- ◆ During the monthly self-test, the high voltage electronics are charged to full energy in addition to the items tested in the daily self test.


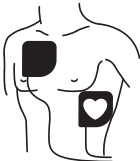


In addition, self-tests will be initiated upon opening the lid and again upon closing the lid.

If the self-test detects an error, the Status Indicator remains red. Upon closing the lid, an audible alert will be issued. The diagnostic panel under the lid indicates the source of the problem according to [Table 5-1 on page 5-3](#).

Indicator troubleshooting table

The following is a troubleshooting table for the AED indicators.

Table 5-1: Indicator Troubleshooting Table

View	Symptom	Solution
	Red Service indicator appears on the screen.	Maintenance by authorized service personnel is required. Contact Cardiac Science Technical Support or, outside the U. S., your local Cardiac Science representative.
	Red Pads indicator (LED) is lit.	Connect the pads or replace with a new pair.
	The last battery indicator (LED) is red and flashing.	The battery is low. Replace with a new battery.
	Rescue Ready Status indicator is red, and no other indicators on the diagnostic panel are lit.	Replace the battery. If the status indicator remains red, contact Cardiac Science Technical Support or, outside the U. S., your local Cardiac Science representative.



Caution: Temperature Extremes.

Exposing the AED to extreme environmental conditions outside of its operating parameters may compromise the ability of the AED to function properly. The Rescue Ready® daily self-test verifies the impact of extreme environmental conditions on the AED. If the daily self-test determines environmental conditions outside of the AED's operating parameters, the Rescue Ready indicator could change to red (not Rescue Ready) and the AED may issue a "SERVICE REQUIRED" alert to prompt the user to move the AED to environmental conditions within the acceptable operating parameters at once. See [Chapter 6, Technical Data](#), for acceptable environmental conditions and [Rescue Ready status indicator](#) on page 3-1 for information about the Rescue Ready indicator.



Caution: Not Rescue Ready.

Issues other than extreme environmental conditions can cause the AED to become not Rescue Ready. For more information, see [Rescue Ready status indicator](#) on page 3-1.

Scheduled maintenance

Note: Powerheart G3 AEDs perform weekly partial energy and monthly full energy charges of the high voltage circuitry as part of their extensive self testing regimens. Consequently, Cardiac Science does not recommend that users perform any additional energy tests.

Perform the following tests per the schedule indicated:

Daily maintenance

Check the Status Indicator to ensure that it is GREEN. When the indicator is GREEN, the AED is ready for a rescue. If the indicator is RED, refer to the troubleshooting table on [page 5-3](#).

Monthly maintenance

Perform the following procedure each month (28 days):

1. Open the AED lid.
2. Wait for the AED to indicate status: Observe the change of the STATUS INDICATOR to RED. After approximately 5 seconds, verify that the STATUS INDICATOR returns to GREEN.

3. Check the expiration date on the pads.
4. Listen for the voice prompts.
5. Close the lid and observe the change of the STATUS INDICATOR to RED. After approximately 5 seconds, verify that the STATUS INDICATOR returns to GREEN.

Annual maintenance

Perform the following tests annually to confirm that the diagnostics are functioning properly and to verify the integrity of the case.

Check the integrity of the pads and circuitry:

1. Open the AED lid.
2. Remove the pads.
3. Close the lid.
4. Confirm that the STATUS INDICATOR turns RED.
5. Open the lid and confirm that the pads icon flashes on the screen.
6. Reconnect the pads and close the lid.
7. Make sure the expiration date is visible through the clear window of the lid.
8. Check to make sure that the STATUS INDICATOR is GREEN. If the pads are not installed properly, the pads icon flashes on the screen. Contact Cardiac Science Technical Support (see [Contact information](#) on page 1-2) or outside the U.S., your local Cardiac Science representative.
9. Open the lid and confirm that no diagnostic indicators are lit.
10. Check the expiration date of the pads; if expired, replace them.
11. Check the pads packaging integrity.
12. Close the lid

Check the Integrity of the Service Indicator (LED) and Circuitry:

1. Immediately after opening the AED lid, press and hold the Shock button and confirm that the Service LED is lit.
2. Release the Shock button.
3. Close the lid.
4. Verify that the STATUS INDICATOR remains RED.

5. Open the lid and confirm that no diagnostic panel indicators are lit.
6. Close the lid.
7. Verify that the STATUS INDICATOR turns GREEN.

Check the integrity of the case:

Examine the molded case of the AED for any visible signs of stress. If the case shows signs of stress, contact Cardiac Science Technical Support (see [Contact information](#) on page 1-2) or outside the U.S., your local Cardiac Science representative.

Cleaning and care

Use a cloth dampened with an approved cleaning solution to wipe the case. Dry the case with a clean cloth. Do not spray or pour the cleaning solution on the case or submerge the AED.

Approved cleaners

Use one of these solutions to clean the case of the AED: soapy water, ethanol, or 91% isopropyl.

The AED and its accessories cannot be sterilized.



Caution: Equipment Damage.

When cleaning the device, use one of the following: Isopropyl Alcohol, Ethanol, a mild soapy water solution, or a 3% hydrogen peroxide solution.



Caution: Equipment Damage.

Keep all cleaning solutions and moisture away from the inside of all defibrillation pads and cable connector openings.

Authorized repair service

The AED has no user-serviceable internal components. Try to resolve any maintenance issues with the AED by using the Troubleshooting Table presented in this chapter. If you are unable to resolve the problem, contact Cardiac Science Technical Support (see [Contact information](#) on page 1-2) or outside the U.S., your local Cardiac Science representative.



WARNING! Shock Hazard.

Do not disassemble the AED. Failure to observe this warning can result in personal injury or death. Refer maintenance issues to Cardiac Science authorized service personnel.

Note: The warranty will be void upon unauthorized disassembly or service of the AED.

Frequently Asked Questions

Q: Can I give CPR while the AED is analyzing?

A: No. As with all AEDs, the operator should stop CPR compressions during the analysis phase.

Q: Can I transport the victim while the AED is analyzing?

A: No. Vehicle motion may cause noise artifacts that could interfere with proper cardiac rhythm analysis. Stop the vehicle when cardiac rhythm analysis is necessary.

Q: Is it safe for the AED to provide a shock to a patient lying on a conductive floor, antistatic floor, or a metal surface?

A: Yes, it is safe. Using a Powerheart AED on a patient lying on a conductive floor, antistatic floor, or a metal surface does not create a safety hazard for either the device user or the patient.

Q: Do I need to prepare the chest prior to pad application?

A: Special preparation is not usually necessary. The chest should be as clean, dry, and as oil free as possible. Follow your Medical Director's instruction.

Q: What happens if the battery is low?

A: There are several Battery Low conditions that the AED will detect:

Battery Low detected - AED not in use: If a low battery condition is detected during a self test, the AED will beep once every 30 seconds. Remove the battery and replace with a fresh battery.

Battery Low detected – AED in use: When the red LED initially lights up—upon lid opening or at any time during a rescue—a BATTERY LOW prompt will be issued at once. However, the AED is capable of delivering at least 9 defibrillation shocks after the first BATTERY LOW prompt is issued.

Battery too low to charge AED during rescue: When the AED is not capable of delivering any more shocks, a BATTERY LOW prompt is displayed until the battery is replaced or AED activity ends.

To continue the rescue attempt, leave the lid open and replace the battery. When the battery replacement takes longer than 60 seconds, the first rescue is terminated and the AED begins to record the events from then on as a separate rescue.

Battery is completely depleted—No AED function: All AED activity stops until the battery is replaced with a fresh battery.

Q: How do I set the AED internal clock?

A: Set the clock by using the Rescuelink Software Program and a PC. See [Setting the AED internal clock](#) on page 3-7.

Q: What happens if I close the lid in the middle of a rescue attempt?

A: If you close the lid during a rescue, you must re-open the lid within 15 seconds to continue the rescue. You will hear the prompt, “Open lid to Continue Rescue.” If the lid remains closed for more than 15 seconds, a new rescue will initiate when the lid is reopened.

Note: If the lid is closed during a rescue while the pads are connected to the patient, the STATUS INDICATOR remains GREEN. When the lid is reopened, however, the STATUS INDICATOR will turn RED and then back to GREEN. The rescue may be continued.

Q: My AED is sounding an audible alert. Why? How do I stop it?

A: The audible alert indicates that the self-test detected a need for maintenance or corrective action. Open the device lid and view the indicator on the diagnostic panel. Determine the maintenance required by using the troubleshooting table on [page 5-3](#).

Q: The AED did not sound an audible alert when I removed the pads and closed the lid. Why?

Note: Ensure the battery is installed. The AED will never beep while battery is removed.

A: The lid-closed pad self-test only activates the STATUS INDICATOR. The AED allows time for replacement of the pads—as removing pads is a normal procedure after a rescue—or a battery during the post rescue procedure.

Q: What if I have to perform a rescue in an isolated area and at subzero temperatures?

A: When travel to a rescue involves exposing the AED to extremely cold temperatures for an extended period of time, keep the pads and the battery warm.

Q: What should I do if I initiate MANUAL MODE but then decide AED MODE is more appropriate?

A: Momentarily closing the lid and opening the lid will always take the device out of MANUAL mode and into AED MODE. Once charging is complete, wait 30 seconds for the AED to revert back to AED MODE. The seconds will count down on the display. If “REMAIN IN MANUAL MODE” has been enabled, momentarily close the AED lid and reopen. This will revert the AED to AED mode.

6 Technical Data

Contents

◆	Parameters	6-2
◆	STAR biphasic waveform	6-7

This section lists the AED parameters and describes the STAR biphasic waveform.

Parameters

Table 6-1: Parameters

Parameter	Detail
Operation	Semi-Automatic (shock advisory) Manual
Audible Alerts	Voice Prompt Maintenance Alert
Visible Indicators	Status Indicator Battery Status Indicator Service Indicator Pads Indicator Text Display
Rescue Data Storage	Internal with 60 minutes ECG data with event annotation
Dimensions	Height: 8 cm (3.3 in) Width: 27 cm (10.6 in) Depth: 31 cm (12.4 in)
Weight (Batteries and Pads)	3.20 kg (7.0 lb)
Environmental Operation and Standby Conditions	Temperature: 0°C to 50°C (32°F to 122°F) Humidity: 5% to 95% (non-condensing) Pressure: 57kPa (+15,000ft) to 103kPa (-500ft)
Shipment and Transport environmental Conditions (for up to 1 week)	Temperature: -30°C to 65°C (-22°F to 149°F) Humidity: 5% to 95% (non-condensing) Pressure: 57kPa (+15,000ft) to 103kPa (-500ft)
Pads	Self-adhesive, disposable defibrillation pads Minimum combined surface area: 228cm ² Extended length of lead wire: 1.3m

Table 6-1: Parameters (continued)

Parameter	Detail
9144 Rechargeable Lithium Battery Specifications	<p>Output voltage: 11.1VDC</p> <p>Battery is rechargeable</p> <p>Check local regulations for disposal information</p> <p>Operational life: 2.5 years or 300 battery charge/discharge cycles, whichever comes first</p> <p>Standby: 6 months</p> <p>Capacity: 100 shocks typical (60 shocks minimum) or 3 hours minimum of ECG display (6 hours typical)</p> <p>Charge time: 3 hours for stated capacity; 4.5 hours to fully charge depleted battery</p> <p>Note: The battery operating life depends on the type of battery, device settings, actual usage, and environmental factors.</p>
9145 Lithium Battery Specifications	<p>Output voltage: 12VDC</p> <p>Batteries are non-rechargeable</p> <p>Lithium content: 9.2g</p> <p>Check local regulations for disposal information</p> <p>Estimated Shelf Life (from date of manufacture): 5 Years</p> <p>Typical Shocks: 290 shocks</p> <p>Note: The battery operating life depends on the type of battery, device settings, actual usage, and environmental factors.</p>
Batteries and Capacitor Charge Times	<p>A new battery, after the AED has delivered 15 300VE shocks, typically takes 10 seconds to charge the AED to maximum energy.</p> <p>A battery with reduced capacity will take longer to charge the AED.</p>
Battery charger (for 9144 rechargeable battery)	<p>Power Requirements: 90-132 VAC or 198-264 VAC at 47-63 Hz</p> <p>The charger operates from, and accepts standard IEC mains power cables.</p>

Table 6-1: Parameters (continued)


Parameter	Detail
AED Self test Sequence	Daily: Battery, pads, internal electronics, Shock button, and software. Weekly: Battery, pads, internal electronics, Shock button, software, and partial energy charge cycle. Monthly (every 28 days): Battery under load, pads, internal electronics, full-energy charge cycle, Shock button, and software. Open Lid (when lid is opened): Battery, pads, internal electronics, Shock button, and software. Close Lid (when lid is closed): Battery, pads, internal electronics, Shock button, and software.
Safety and Performance	Model 9300P The AED has been designed and manufactured to conform to the highest standards of safety and performance including electromagnetic compatibility (EMC). The 9300P and pads conform to the applicable requirements of the following:  CSA: Classified by CSA International with respect to electric shock, fire and mechanical hazards only in accordance with CAN/CSA C22.2 No. 60601-1:08, EN60601-1 and EN60601-2-4. Certified to CAN/CSA Standard C22.2 No. 60601-1:08.

Table 6-1: Parameters (continued)

Parameter	Detail
	Electrical, Construction, Safety and Performance: IEC 60601-1 IEC 60601-2-4 Electromagnetic Compatibility (EMC): IEC 60601-1-2 IEC 60601-2-4
Emissions	EM: EN 55011/CISPR 11, Group 1, Class B RTCA DO-160D Section 21, Category M
Immunity	EM IEC 61000-4-3, Level X, (20V/m) IEC 60601-2-4 (20V/m) Magnetic IEC 61000-4-8 IEC 60601-2-4 ESD IEC 61000-4-2 IEC 60601-2-4 6kV contact discharge, 8KV air gap discharge
Environmental Conditions	Free Fall Drop: IEC 60068-2-32, 1 meter Bump: IEC 60068-2-29, 40g and 6000 bumps Vibration (Random): IEC 60068-2-64: 10Hz – 2kHz, 0.005 – 0.0012 g ² /Hz Vibration (Sine): IEC 60068-2-6: 10Hz – 60Hz, 0.15 mm and 60Hz – 150Hz, 2g Enclosure Protection: IEC 60529, IP24 Vibration (random): RTCA DO-160D Section 8, category S, curve B Temperature variation: RTCA DO-160D Section 5, category C Temperature/altitude decompression/overpressure: RTCA DO-160D section 4, category A4, operating 0°C to 50°C, ground survival 0°C to 50°C

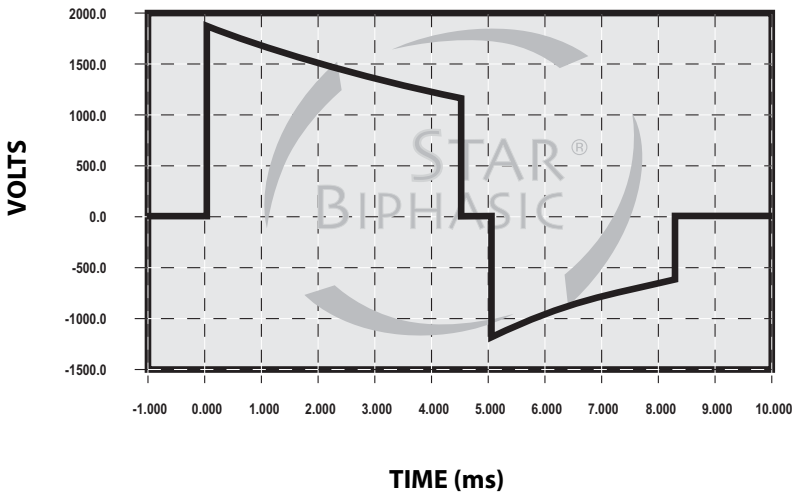
Table 6-1: Parameters (continued)

Parameter	Detail
Shipping and Transportation Conditions	ISTA Procedure 2A
RHYTHMx ECG Analysis Performance	<p>The AED RHYTHMx ECG Analysis system analyzes the patient's ECG and advises you when the AED detects a shockable or non-shockable rhythm.</p> <p>This system makes it possible for a person, with no training in the interpretation of ECG rhythms, to offer defibrillation therapy to victims of sudden cardiac arrest.</p> <p>With a new battery, after the AED has delivered 15 300VE shocks, the maximum time from beginning rhythm analysis until the AED is ready to shock is 17 seconds.</p>
Cardiac Rhythms Used to Test the Rhythm Recognition Detection System for Powerheart G3 AEDs	<p>Shockable Rhythm – VF: Meets IEC 60601-2-4 requirement and AHA recommendation of Sensitivity of >90%</p> <p>Automatic External Defibrillators for Public Access Defibrillation: Recommendations for Specifying and Reporting Arrhythmia Analysis Algorithm Performance, Incorporating New Waveforms and Enhancing Safety, AHA AED Task Force and approved by the AHA Science Advisory and Coordinating Committee. Circulation, 1997(95), pp 1677-1682</p> <p>Shockable Rhythm – VT: Meets IEC 60601-2-4 requirement and AHA recommendation of Sensitivity of >75%</p> <p>Non-shockable Rhythm – NSR: Meets IEC 60601-2-4 requirement (>95%) and AHA recommendation (>99%) of Specificity</p> <p>Non-shockable – Asystole: Meets IEC 60601-2-4 requirement and AHA recommendation of Specificity of >95%</p> <p>Non-shockable: Meets IEC 60601-2-4 requirement and AHA recommendation of Specificity – all other rhythms of >95%</p> <p>For detailed information contact Cardiac Science for white papers:</p> <p>P/N 112-2013-005 (Pediatric Defibrillation Instructions for use)</p> <p>P/N 110-0033-001 (RHYTHMx White Paper)</p> <p>P/N MKT-11081-01 (STAR Biphasic White Paper)</p>

STAR biphasic waveform

The waveform generated by the AED is a Biphasic Truncated Exponential waveform. The following is a graph of the waveform voltage as a function of time when the AED is connected to a 50 Ohm resistive load.

High Energy Waveform with 50 Ohm Resistive Load **——** High Variable Energy/50 ohms



The Biphasic Truncated Exponential (BTE) waveform uses variable energy. The actual energy delivered will vary with the patient's impedance and the device will deliver a shock when impedance is between 25-180 Ohms. Energy will be delivered at three different levels referred to as ultra-low variable energy, low variable energy, and high variable energy as shown in the waveform tables on the following pages.

Table 6-2: Ultra-low Variable Energy (150 VE) Powerheart G3 Waveform

	Phase 1		Phase 2		
Patient's Impedance (Ohms)	Voltage* (Volts)	Duration* (MS)	Voltage* (Volts)	Duration* (MS)	Energy** (Joules)
25	1393	3.3	743	3.2	145-196
50	1420	4.5	909	3.2	128-173
75	1430	5.8	973	3.2	116-156
100	1434	7.0	1007	3.2	108-146
125	1437	8.3	1027	3.2	102-138
150	1439	9.5	1040	3.2	98-132
175	1441	10.8	1049	3.2	95-128

Table 6-3: Low Variable Energy (200 VE) Powerheart G3 Waveform

	Phase 1		Phase 2		
Patient's Impedance (Ohms)	Voltage* (Volts)	Duration* (MS)	Voltage* (Volts)	Duration* (MS)	Energy** (Joules)
25	1609	3.3	858	3.2	193-260
50	1640	4.5	1050	3.2	170-230
75	1651	5.8	1124	3.2	155-209
100	1656	7.0	1163	3.2	144-194
125	1660	8.3	1186	3.2	136-184
150	1662	9.5	1201	3.2	130-176
175	1663	10.8	1212	3.2	126-170

Table 6-4: High Variable Energy Powerheart G3 Waveform (all values are typical)

	Phase 1		Phase 2		
Patient's Impedance (Ohms)	Voltage* (Volts)	Duration* (MS)	Voltage* (Volts)	Duration* (MS)	Energy** (Joules)
25	1869	3.3	997	3.2	260-351
50	1906	4.5	1220	3.2	230-311
75	1918	5.8	1306	3.2	209-283
100	1925	7.0	1351	3.2	195-263
125	1928	8.3	1378	3.2	184-248
150	1931	9.5	1396	3.2	176-238
175	1933	10.8	1408	3.2	170-230

* All values are typical.

**Allowable energy range.

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