

AED FACT SHEET



EARLY DEFIBRILLATION

- More than 15% of Out of Hospital Cardiac Arrests (OHCAs) occur in a public location; therefore, public access AEDs and community training have a large role to play in early defibrillation. However, the number of patients who have an AED applied by a bystander remains low, occurring after only 10.2% of public arrests.
- In 2021, 28.7% (n=42,198) of Cardiac Arrest Registry to Enhance Survival (CARES) patients were defibrillated in the field. The proportion of patients first defibrillated by a bystander was 4.6%, whereas 19.1% and 76.3% were first defibrillated by a first responder or EMS personnel, respectively.





FUNCTIONALITY

- Inside the AED box are pads and a diagram that shows where to place them on the bare skin. Once the device is turned on, a voice tells the person using it exactly what to do. Some devices offer this instruction in Spanish, but most are English-speaking.
- The first thing the AED will do is determine whether an electric shock is needed by analyzing the person's heart rhythm. CPR should be stopped only while the machine is doing this analysis. If no shock is advised, it will tell you to resume CPR. If there is a shockable rhythm, it will deliver the shock and afterwards will tell you to resume CPR.

MORE STATS

- 9 in 10 cardiac arrest victims who receive a shock from an AED in the first minute live.
- Bystanders administer CPR about 40% of the time and AEDs even less so.
- Your chance of survival while waiting for emergency medical services during a cardiac emergency decreases by 10% every minute without CPR.





AEDS AT WORK

- Are you one of the 50% who can locate an automated defibrillator (AED) at work? With 10,000 cardiac arrests annually in the workplace, you have the potential to save thousands of lives. Immediate CPR and use of an AED can double, or even triple, survival rates.
- The American Heart Association does not recommend one device over another. The AED you choose should be simple and easy to use.

CHILDREN AND AEDS

• Children over age 8 can be treated with a standard AED. For children ages 1–8, the AHA recommends the pediatric attenuated pads that are purchased separately. In infants <1 year of age a manual defibrillator is preferred. If a manual defibrillator is not available, an AED with a dose attenuator may be used.



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