SOUTH WALTON FIRE DISTRICT

911 North County Highway 393, Santa Rosa Beach, Florida 32459

"Prompt, Competent, Caring Response in Time of Need"

Ryan H. Crawford
Fire Chief / Administrator

Notice of Intent to Award a Single Source Procurement

Subject: Stryker Lucas 3 Chest Compression System

Date: January 11, 2021

Written Response Due: January 19th, 2021
Time: 4:00 pm CST
E-mail Address: rlund@swfd.org

Fax Number: 850-267-3294

This is not a Request for Proposals and there is no solicitation available. The proposed purchase is for product or services for which the South Walton Fire District intends to award with only one source under the authority of the South Walton Fire District and State of Florida Statute 287.057(5)(3)(c). Any responses received as a result of this Notice of Intent shall be considered solely for the purpose of determining whether to conduct a competitive procurement. Responses will not be considered as proposals, bids, or quotes.

South Walton Fire District intends to negotiate a single-source procurement award for the purchase of six (6) Stryker Lucas 3 Chest Compression Systems.

Interested firms or individuals may identify their interest and capability to respond to the requirement by submitting in writing their name, address, point of contact, telephone number, email, and a statement regarding capability to provide the specified services. Interested firms will be considered only if they respond with clear and convincing documentation that they are capable of meeting or exceeding the requirements stated herein. All responses received within seven (7) calendar days after the date of publication of this synopsis will be reviewed by the District. A determination by the Fire Chief / Administrator not to compete this proposed action based on the responses to this notice is solely within the discretion of the Fire Chief / Administrator.

All responses must be in writing and returned to ATTN: Robbie Lund, Administrative Assistant South Walton Fire District; 911 North County Highway 393, Santa Rosa beach, FL 32459 by: Facsimile number 850-267-3294, e-mail rlund@swfd.org

Fire Chief / Administrator Signature: Ryan H Crawford Date: January 11th, 2021

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Sole/ Single Source Request Justification

(For Noncompetitive Purchases over $5000)

WARNING: Per Florida Statutes 838,22(2)- It is unlawful for a public servant or a public contractor who has contracted with a governmental entity to assist in a competitive procurement to knowingly and intentionally obtain a benefit for any person or to cause unlawful harm to another by circumventing a competitive solicitation process required by law or rule through the use of a sole source contract for commodities or services.

To: Budget & Finance/ Purchasing Division

Your approval is requested to initiate a sole/single source procurement action:

Requestor Name: Tim Orenic

& Title: Division Chief of EMS

Requestor Dept./Division: EMS

Phone #: 8502671298 Requisition #:

Recommended Sole/Single Source procurement action with:

Company Name: Stryker Medical

Contact Name: Jeff Wages

Address: 3800 E. Centre Ave.

City, State, Zip: Portage, MI 49002

E-mail: Jeff.wages@stryker.com

Telephone: 901-491-1349

Is the recommended company the manufacturer? ☑ Yes ☐ No

Does the manufacturer sell the item(s) through distributors? ☐ Yes ☑ No

If yes, please have manufacturer provide a list of all authorized distributors.

Describe the full scope of work contemplated including installation if required; items should include brand, model and part number if applicable.

Identify the date you need item delivered or work performed.

Type of Sole/Single Source (Check One) ☑ Sole Source ☐ Single Source

☑	One-Time: applies to a single requisition and purchase order for the current fiscal year
☐	On-Going: Applies to multiple purchases to be made for one year from date Sole/Single Source approved. Estimated Annual Expenditures for one year: $_____

Is there a contract related to these services? ☐ Yes ☑ No If, yes has legal reviewed it? ☐ Yes ☐ No

SOLE/SINGLE SOURCE RATIONALE

Explain why the recommended company is the only company who can perform the requirement. Address the following: Are there any other companies who can do this job? What condition (e.g. technological superiority, or performance risks, etc.) exists so that the recommended company has a significant advantage over any other company who can do this job?

It is important to sufficiently address the major reason for conducting a noncompetitive procurement, avoiding peripheral issues which detract from the main reason and reduce the credibility of the justification. The rational must be clear and convincing, avoiding generalities and unsupported conclusions. Use one or more of the following as applicable.

Use additional sheets if necessary.

A specific contractor is the only source of the required item because (check all that apply):

The required items are **proprietary to the Contractor.**
A specific item is needed:

- ☐ to be compatible or interchangeable with existing hardware,
- ☐ as spare or replacement hardware,
- ☐ for the repair or modification of existing hardware, or
- ☐ for technical evaluation or test.
- ■ Vendor is the original equipment manufacturer; there are no regional distributors. Verification from manufacturer is attached
- ■ This is the only equipment that meets the specialized needs of the department and performs the intended function. Detailed justification is attached.
- ■ Vendor is the sole distributor that is restricted by the manufacturer to our territory. Verification from manufacturer is attached.

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It is not possible to obtain competition (i.e., only one source is capable of supplying the items or meeting the requirements). *In a brief explanation, provide supporting evidence for the conclusion; other sources considered should be identified and why they are not able to meet the requirements.*

There are currently two major automated CPR systems on the market. One system, The Zoll AutoPulse is a band driven system and the second, the Stryker LUCAS chest compression system which is a piston driven system. The Zoll AutoPulse device does not provide the correct chest compression rate as recommended by the American Heart Association (AHA). Following the AHA guidelines of providing a chest compression rate of 100, the Stryker LUCAS chest compression system is the only system providing this rate. The Stryker LUCAS chest compression system does more than just providing consistent, high-quality CPR, it works by creating a positive

There is a **substantial technical risk** in contracting with any other contractor, thereby making that an unacceptable course of action (e.g., where only one contractor has been successful to date in implementing a difficult manufacturing process). *In a brief explanation, provide supporting evidence of other contractor's with relevant capabilities and emphasize their inability to overcome the substantial technical risk.*

N/A

For support services effort, there is no reasonable expectation that a meaningful cost or other improvement could be made in the incumbent contractor's performance (e.g., the chances of another firm winning a competition are clearly remote). *Please provide a brief explanation.*

N/A

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ACKNOWLEDGEMENT

This section must be completed:

I am aware of the South Walton Fire District's requirements for competitive bidding for purchases over $5,000.00 and the criteria for justification for Single Source/Sole. I have gathered the required technical information and have made a concerted effort to review comparable/equal equipment (e.g., market research). I have attached the pertinent documentation showing what market research was conducted to preclude other items from consideration.

Requestor Signature: Tim Orenic Digitally signed by Tim Orenic Date: 2021.01.06 15:38:45 -06'00' Date: 01/06/2021

Fire Chief Signature: _____ Date: 1/11/21

☐ The South Walton Fire District has advertised the above request on the District's website in accordance with State of Florida Statute 287.057 and no challenges or protests were received. *

Buyer: _____ Date: _____

Fiscal Officer: _____ Date: _____

If approved by Fire Board: Resolution Number: _____

*All requests for Sole/Single Source will be advertised on the District's website for a minimum of 7 days prior to approval from the Fire Chief.

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stryker

February 7, 2020

Stryker is the sole-source provider in the Hospital (hospitals and hospital-owned facilities), Emergency Response Services and Emergency Response Training (paramedics, professional and volunteer fire) markets in the U.S. and Canada for the following products:

- New LIFEPAK® 15 monitor/defibrillators
- New LIFEPAK 20e defibrillator/monitors
- New LIFEPAK 1000 automated external defibrillators
- New LUCAS® chest compression system
- TrueCPR™ coaching devices
- CODE-STAT™ data review software and service

Stryker is the sole-source provider in all markets for the following products and services:

- RELI℠ (Refurbished Equipment from the Lifesaving Innovators) devices
- LIFENET® system and related software
- Factory-authorized inspection and repair services which include repair parts, upgrades, inspections and repairs
- HealthEMS® Software
- HomeSolutions.NET® Software
- ACLS (non-clinical) LIFEPAK defibrillator/monitors
- Heart Safe Solution℠ Government Campus Solution
- MultiTech 4G and Titan III gateways

Stryker is also the sole-source distributor of the following products for EMS customers in the U.S. and Canadian markets:

- McGRATH™ MAC EMS video laryngoscope
- McGRATH MAC disposable laryngoscope blades
- McGRATH X Blade™

Stryker does not authorize any third-parties to sell these products or services in the markets listed above. We will not fulfill orders placed by non-authorized businesses seeking to resell our products or services. If you have questions, please feel free to contact your local Stryker customer service representative at 800.442.1142.

Sincerely,

Matt Van Der Wende, Senior Director, Americas Sales

GDR 3321967_L

stryker

6 LUCAS 2021

Quote Number: 10307255

Version: 1

Prepared For: SOUTH WALTON FIRE DISTRI

Attn:

Remit to: **Stryker Medical**
P.O. Box 93308
Chicago, IL 60673-3308

Rep: Jeff Wages

Email: jeff.wages@stryker.com

Phone Number: (901) 491-1349

Quote Date: 01/06/2021

Expiration Date: 04/06/2021

Delivery Address		**End User - Shipping - Billing**		**Bill To Account**	
Name:	SOUTH WALTON FIRE DISTRI	Name:	SOUTH WALTON FIRE DISTRI	Name:	SOUTH WALTON FIRE DISTRI
Account #:	1063739	Account #:	1063739	Account #:	1063739
Address:	911 N COUNTY HIGHWAY 393	Address:	911 N COUNTY HIGHWAY 393	Address:	911 N COUNTY HIGHWAY 393
	SANTA ROSA BEACH		SANTA ROSA BEACH		SANTA ROSA BEACH
	Florida 32459-5371		Florida 32459-5371		Florida 32459-5371

Equipment Products:

#	Product	Description	Qty	Sell Price	Total
1.0	99576-000063	LUCAS 3, v3.1 Chest Compression System, Includes Hard Shell Case, Slim Back Plate, (2) Patient Straps, (1) Stabilization Strap, (2) Suction Cups, (1) Rechargeable Battery and Instructions for use With Each Device	6	$13,275.80	$79,654.80
2.0	11576-000060	LUCAS Desk-Top Battery Charger	6	$1,012.70	$6,076.20
3.0	11576-000080	LUCAS 3 Battery - Dark Grey - Rechargeable LiPo	6	$619.10	$3,714.60
			Equipment Total:		$89,445.60

Price Totals:

Grand Total:	$89,445.60

Prices: In effect for 60 days.

Terms: Net 30 Days

Ask your Stryker Sales Rep about our flexible financing options.

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 days. FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-Stryker.

In the event of any conflict between Stryker Medical's Standard Terms and Conditions and any other terms and conditions, as may be included in any purchase order or purchase contract, Stryker's terms and conditions shall govern.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

stryker

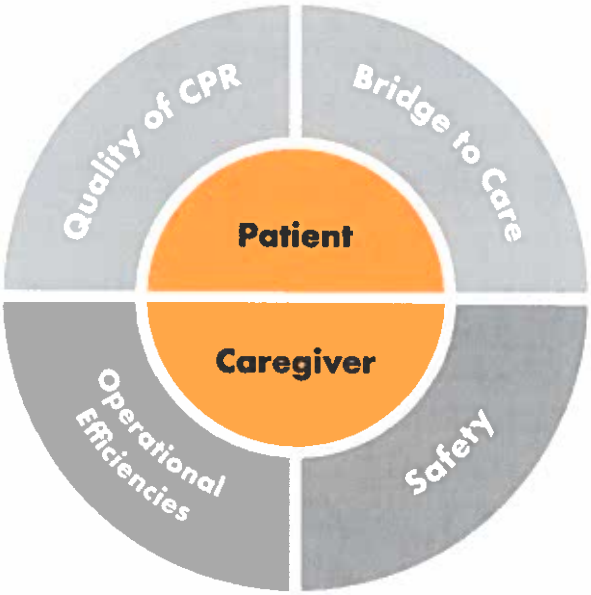
LUCAS® 3, v3.1

Chest Compression System

Your partner in life support

Consistency. It's a powerful thing.

The LUCAS Chest Compression System helps emergency care teams around the world do what they do best — save lives. With high-quality chest compressions and fewer interruptions than manual CPR, LUCAS is your partner that will administer Guidelines-consistent, high-quality compressions until the job is done.



CPR quality

- Delivers Guidelines-consistent, high-quality chest compressions at recommended rate and depth while allowing for chest recoil
- Fewer interruptions, compared to manual CPR, leading to higher compression ratios[1,2] and increased blood flow to the brain[3,4]
- Higher $EtCO_2$ values, compared to manual CPR, indicative of higher chance of ROSC[5]

Bridge to care

- Overcomes caregiver fatigue by providing Guidelines-consistent chest compressions for multiple hours if required*
- Allows for hands-free, high-quality chest compressions during transport[1,6]
- Extends reach of care and allows for treatment of underlying cause during CPR (e.g. ECMO/PCI)[22]

Operational efficiencies

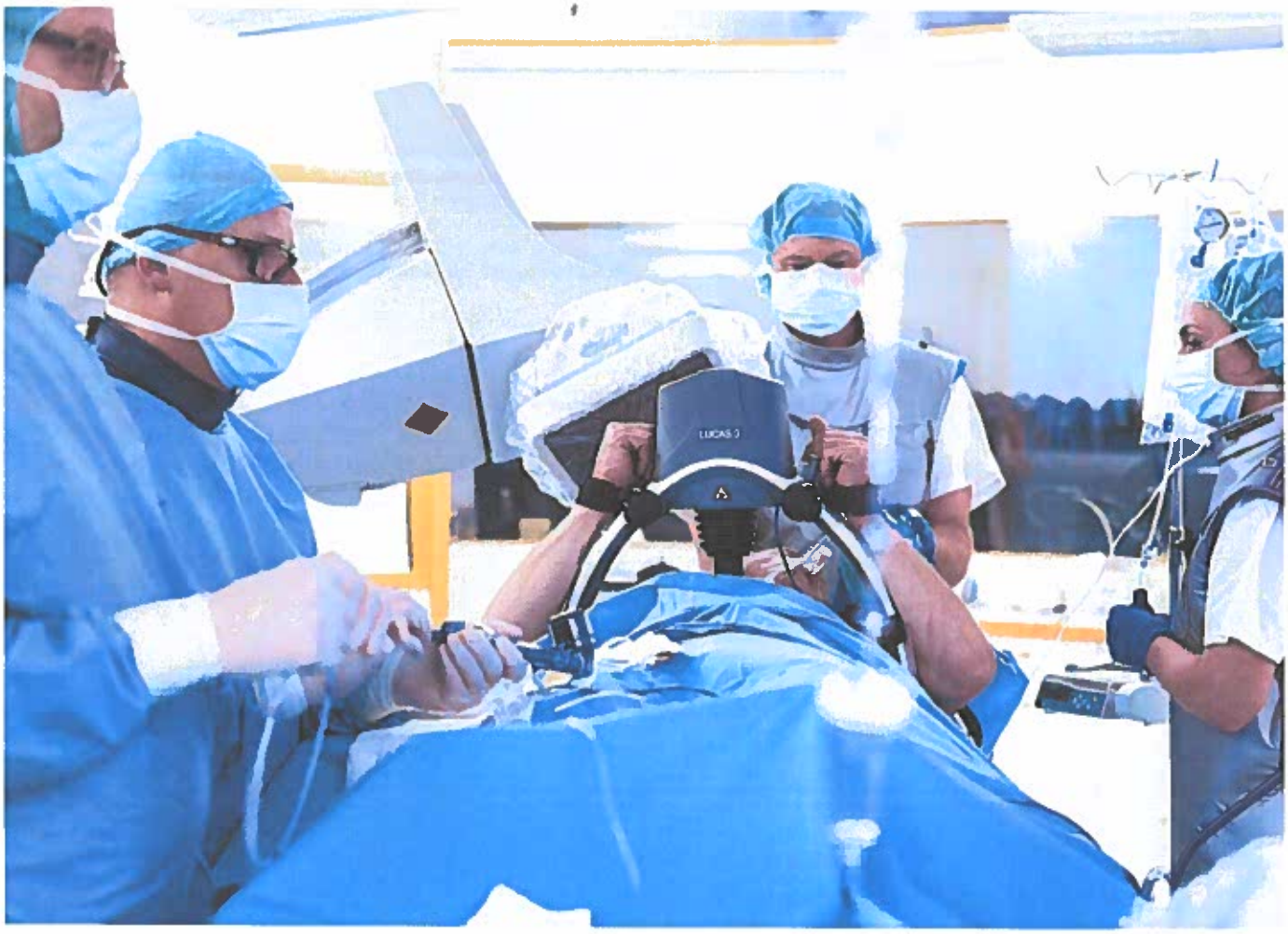
- Calms the event and reduces stress by eliminating the need to manage a compression rotation schedule
- Frees up care givers to focus on other tasks
- Utilizes data integration capabilities to enhance post event analysis and quality improvement efforts

Safety

- Rescuers can avoid awkward and potentially dangerous situations when performing CPR during patient transport
- Potential to reduce CPR-related injuries to the CPR provider
- Reduces X-ray exposure of CPR provider during PCI

* When using multiple batteries or an external power source. Battery typically lasts for 45 minutes of operation

Proven. Safe. Effective.



For over 15 years the LUCAS Chest Compression System has been helping lifesaving teams around the world deliver high performance, Guidelines-consistent chest compressions to cardiac arrest patient in the field, on the move and in the hospital.

The LUCAS device has been proven safe and effective in a large randomized controlled trial, the highest level of clinical evidence.[10]

LUCAS by the numbers

25,000+

With over 25,000 devices in the global market, a patient is treated approximately every 2 minutes[7,8]

16,830

In a successful 2 hour 45 minute resuscitation, LUCAS administered 16,830 Guidelines-consistent compressions[9]

>99%

Operational reliability in clinical use[10]

+60%

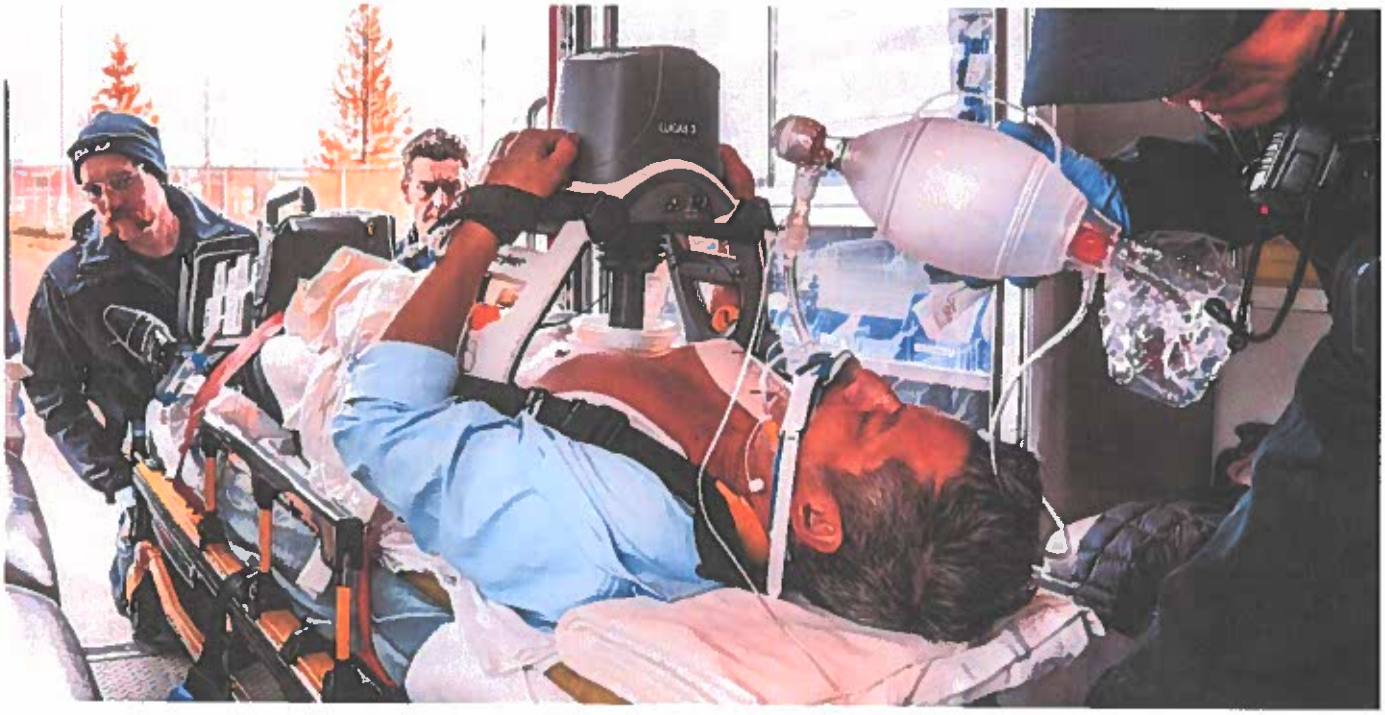
Increased blood flow to the brain vs. manual CPR[3]

>99%

of survivors had good neurological outcomes in large randomized LINC trial[10]

95%

of patients fit in the LUCAS device[10,11]



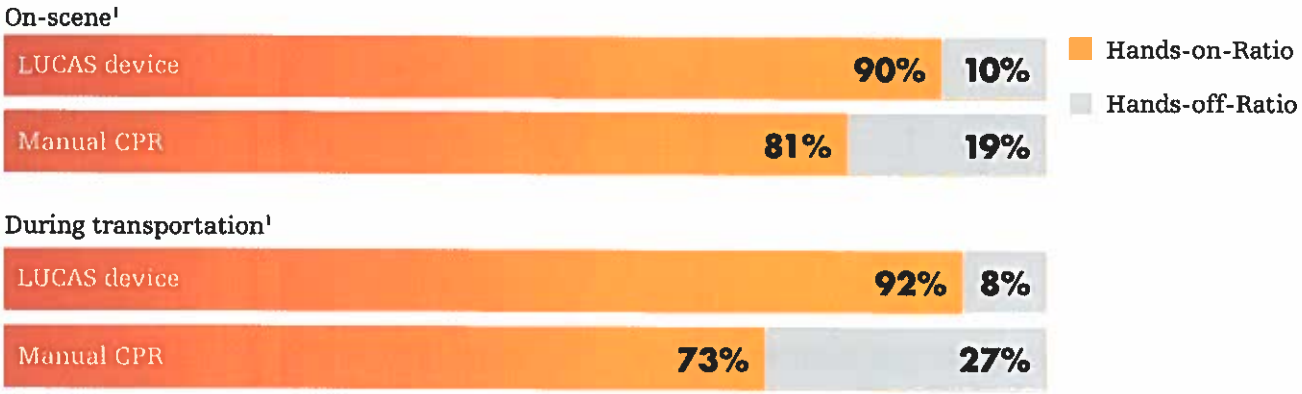
"We know CPR is difficult to do well. People slow down. They don't always do it appropriately — even professional rescuers. A machine doesn't get tired; it is consistent, and consistency is key."

—Charles Lick, MD Medical Director, Allina Medical Transport & Emergency Department Director, Buffalo Hospital[23]

Your power to improve CPR quality

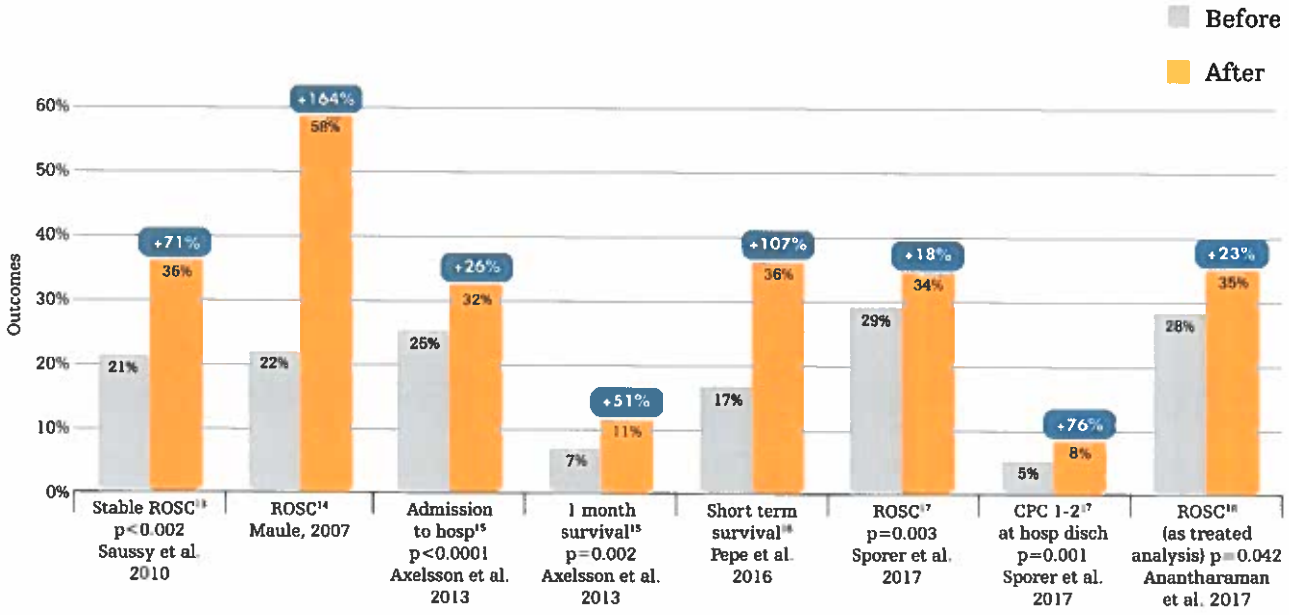
Less interruptions to CPR on the scene and during transport

30-40% of patients who have achieved return of spontaneous circulation (ROSC) on the scene will re-arrest prior to hospital arrival and may require CPR during transportation.[20,21]



LUCAS can contribute to improved outcomes

Systems of care implementing LUCAS together with a comprehensive approach to resuscitation* have shown increased ROSC rates[13-17] as well as improved survival with good neurological outcomes[15,17,19] compared to historical data.



*May include additional therapies or changes of protocols

LUCAS 3, v3.1 at a glance

7 seconds

The two-step application (back plate, then upper part) makes the LUCAS device quick and easy to deploy, as short as a median 7 second interruption time when transitioning from manual CPR.[12]

Battery allows for 45 min continuous run time. Plug in the external power supply for prolonged operation/charging

Top window for quick battery check

Compact, lightweight carrying case included with every device

The carbon fiber LUCAS PCI back plate (optional) is intended specifically for use in the cath lab, with its radiotranslucent material minimizing image shadows

Wi-Fi® connectivity for device Post-Event reports and asset notifications over e-mail

Comprehensive post-event analysis of LUCAS and LIFEPAK® data in CODESTAT™ 11 data review software

Patient straps secure patient arms during transport

Release Rings to remove the upper part from the back plate

Disposable suction cup with optional pressure pad release during ventilations

Compression rate can be set at 102, 111 or 120 to meet unique protocols

Stabilization strap helps keep device in correct position on patient

Standard low profile back plate, easy to place

High-quality CPR

Even if the patient lies upon a soft surface, the LUCAS device delivers Guidelines-consistent depth, overcoming the "mattress effect".

LUCAS 3, v3.1 Chest Compression System

What's new with **v3.1?***

The LUCAS 3, v3.1 was designed with enhanced data capabilities to allow for better post-event reporting and asset management. With Wi-Fi and Bluetooth connectivity, your LUCAS device can be configured to meet your protocols within your LIFENET account. Integration with CODE-STAT 11 now allows for precise and timely post-event reviews that can help with training and quality improvements.

Setup options

Increase compression rate **without** sacrificing depth. Compression rate can be fixed or variable during operation at 102, 111, or 120 compressions per minute while still maintaining desired depth between 1.8 to 2.1 inches/45 to 53mm (depth fixed during operation).

Adjust ventilation alerts, pause length and count

Auto-lowering of piston (AutoFit or QuickFit)

Adjustable depth: 1.8 and 2.1 ± 0.1 inches / 45 to 53 ± 2mm (fixed during operation)

Audible CPR timer:
1-15 minutes
(in 1 min. increments)

Optional pressure pad release (0.4 inches/10 mm) allows for chest rise during ventilation

* Setup options should be changed only under the direction of a physician knowledgeable in cardiopulmonary resuscitation who is familiar with the literature in this area

Connected care

Post-Event reporting

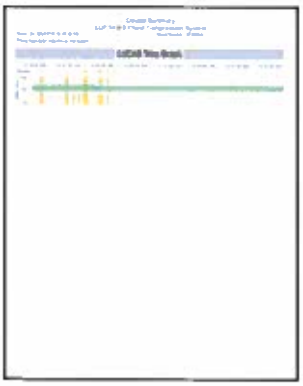
Key metrics and dashboards:

- Compression time, ratio, and rate
- Count, number of pauses > 10 sec.
- Duration of longest compression pauses
- Visual timeline of the event

Post-Event reporting

CODE-STAT 11 allows for LUCAS Post-Event Reports to be merged with reports from LIFEPAK 15 and LIFEPAK 20/20e devices.

Merged reports give a comprehensive view of cardiac arrest cases and can be used in quality improvement and training efforts.



Asset management

LIFENET offers easily accessible asset dashboard for fleet status at latest device check-in.

Gives notifications of expiring and expired LUCAS batteries.

Selected specifications

For further details on specifications, please see the LUCAS 3, v3.1 Data Sheet (GDR 3336665) or LUCAS 3, v3.1 Instructions for Use.

Therapy

- Rate: 102 ± 2 compressions per minute
- Depth: 2.1 ± 0.1 inches / 53 ± 2 mm*
- Compression duty cycle: 50 ± 5%
- ACTIVE 30:2 mode: 30:2 compression to ventilation ratio
- ACTIVE Continuous mode
- Ventilation alerts and pauses

Above specifications are factory default settings and for nominal patients. The LUCAS 3, v3.1 setup options allows you to tailor rate, depth and ventilation alerts and pauses within certain values, as well as setting up an optional audible timer, sending device data reports and connecting to Wi-Fi networks.

*For smaller patients with sternum height less than 7.3 inches / 185 mm: 1.5 to 2.1 ± 0.1 inches / 40 to 53 ± 2 mm

Device

Dimension

- Assembled (HxWxD): 22.0 x 20.5 x 9.4 inches / 56 x 52 x 24 cm
- In carrying case (HxWxD): 22.8 x 13.0 x 10.2 inches / 58 x 33 x 26 cm

Weight

- Device with Battery (no straps): 17.7 lbs / 8.0 kg
- Battery: 1.3 lbs / 0.6 kg

Environment

- Operating temperature: +32°F to +104°F / +0°C to +40°C -4°F / -20°C for 1 hour after storage at room temperature
- Storage temperature: -4°F to +158°F / -20°C to +70°C
- Device IP classification (IEC 60529): IP43

Eligible patients

- No patient weight limitation
- Chest height: 6.7 to 11.9 inches / 17.0 to 30.3 cm
- Maximum chest width: 17.7 inches / 44.9 cm

Power specifications

Power source: Proprietary battery alone or with external power supply or car power cable

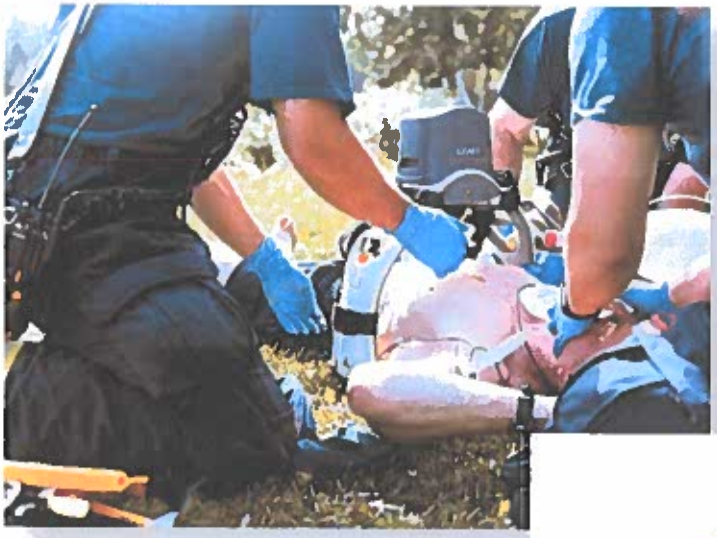
Battery

- Type: Rechargeable Lithium-ion Polymer (LiPo)
- Capacity: 3300 mAh (typical), 86 Wh
- Voltage (nominal): 25.9 V
- Run time (nominal patient): 45 minutes (typical). Extended run time connecting to external power supply
- Service life: Recommendation to replace battery every 3 to 4 years or after 200 uses

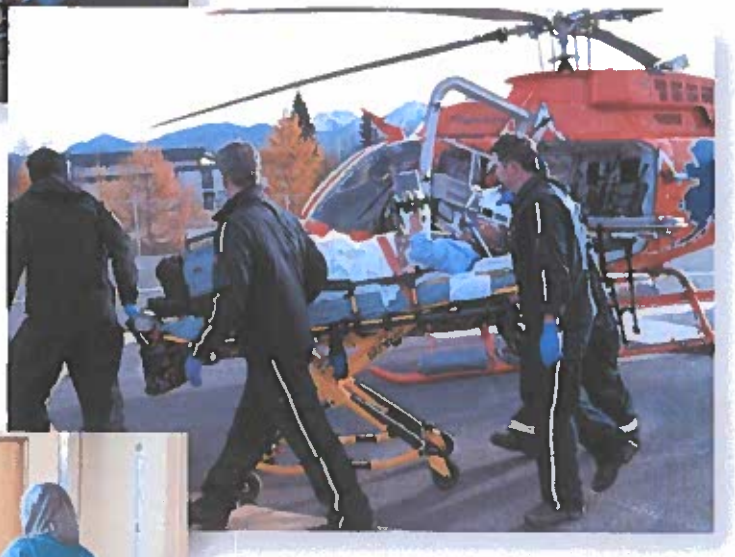
Power supply

- Input: 100-240VAC, 50/60Hz, 2.3A, Class II
- Output: 24VDC, 4.2A
- Car power cable: 12-28VDC/0-10A
- Charging (at room temperature, +72°F / +22°C)
  Using external power supply:
  - Less than two hours
- Using external battery charger:
  - Less than four hours

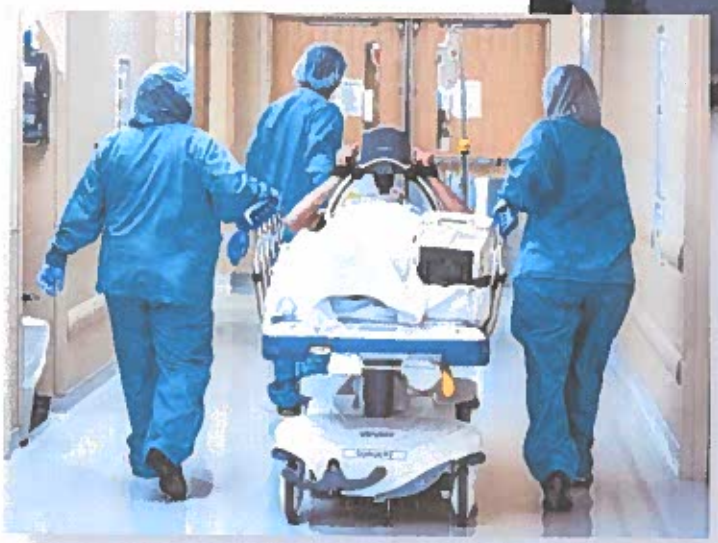
Your partner in life support



—in the **field**



—on the **move**



—in the **hospital**

Reference:

1. Olasveengen TM, Wik L, Steen PA. Quality of cardiopulmonary resuscitation before and during transport in out-of-hospital cardiac arrest. *Resuscitation*. 2008; 76(2):185-90.
2. Maule Y. The aid of mechanical CPR: better compressions, but more importantly – more compressions...(translated from French language; Assistance Cardiaque Externe; Masser mieux, mais surtout masser plus...). *Urgence Pratique*. 2011;106:47-48.
3. Carmona Jimenez F, Padro PP, Garcia AS, et al., Cerebral flow improvement during CPR with LUCAS, measured by Doppler. *Resuscitation*. 2011; 82S1:30,AP090. [This study is also published in a longer version, in Spanish language with English abstract, in Emergencias. 2012;24:47-49]
4. Rubertsson S, Karlsten R. Increased cortical cerebral blood flow with LUCAS; a new device for mechanical chest compressions compared to standard external compressions during experimental cardiopulmonary resuscitation. *Resuscitation*. 2005;65(3):357-63.
5. Axelsson C, Karlsson T, Axelsson AB, et al. Mechanical active compression-decompression cardiopulmonary resuscitation (ACDCPR) versus manual CPR according to pressure of end tidal carbon dioxide (PETCO2) during CPOR in out-of-hospital cardiac arrest 9OHCA). *Resuscitation*. 2009;80(10):1099-103.
6. Putzer G, Braun P, Zimmerman A, et al., LUCAS compared to manual cardiopulmonary resuscitation is more effective during helicopter rescue – a prospective, randomized, cross-over manikin study. *Am J Emerg Med*. 2013 Feb;31(2):384-9.
7. Based on internal and external marketing and financial data (as of August, 2018).
8. If each device is conservatively used 1/month.
9. Case study Regions Hospital St. Paul, GDR 3318844_A.
10. Rubertsson S, Lindgren E, Smekal, D et al. Mechanical chest compressions and simultaneous defibrillation vs conventional cardiopulmonary resuscitation in out-of-hospital cardiac arrest. The LINC randomized trial. *JAMA*. 2013;311(1):53-61.
11. GDR 3305537 User feedback on LUCAS in prehospital use. Data from four different EMS systems in the US completed 2009. Internal data file.
12. Levy M, Yost D, Walker R, et al. A quality improvement initiative to optimize use of a mechanical chest compression device within a high performance CPR approach to out-of-hospital cardiac arrest. *Resuscitation*. 2015;92:32-37.
13. Saussy J, Elder J, Flores C, et al. Optimization of cardiopulmonary resuscitation with an impedance threshold device, automated compression cardiopulmonary resuscitation and post-resuscitation in-the-field hypothermia improved short-term outcomes following cardiac arrest. *Circulation*. 2010;122:A256.
14. Maule Y. Mechanical external chest compression: A new adjuvant technology in cardiopulmonary resuscitation. (Translated from French Language: L'assistance cardiaque externe: nouvelle approche dans la RCP.) *Urgences & Accueil*. 2007;29:4-7.
15. Axelsson C, Herrera M, Fredriksson M, et al. Implementation of mechanical chest compression in out-of-hospital cardiac arrest in an emergency medical service system. *Am J Emerg Med*. 2013;31(8):1196-1200.
16. Pepe PE, Scheppke KA, Antevy PM et al., Abstract 15255: How would use of flow-focused adjuncts, passive ventilation and head-up CPR affect all-rhythm cardiac arrest resuscitation rates in a large, complex EMS system? *Circulation*. 2016;134:A15255.
17. Sporer K, Jacobs M, Derevin L, et al. Continuous quality improvement efforts increase survival with favorable neurologic outcome after out-of-hospital cardiac arrest. *Prehosp Emerg Care*. 2017;21(1):1-6.
18. Anantharaman V, Ng B, Ang S, et al. Prompt use of mechanical cardiopulmonary resuscitation in out-of-hospital cardiac arrest: The MECCA study report. *Singapore Med J*. 2017;58(7):424-431.
19. Wagner H, Madsen Hardig B, Rundgren M et al., Mechanical chest compressions in the coronary catheterization laboratory to facilitate coronary intervention and survival in patients requiring prolonged resuscitation efforts. *Scand J Trauma Resusc Emerg Med*. 2016; 24:4.
20. Salcido DD, Stephenson AM, Condle JP et al., Incidence of rearrest of spontaneous circulation in out-of-hospital cardiac arrest. *Prehosp Emerg Care*. 2010;14(4):413-8.
21. Lerner EB, O'Connell M, Pirrallo RG. Rearrest after prehospital resuscitation. *Prehosp Emerg Care*. 2011;15(1):50-4.
22. William P, Rao P, Kanakadandi U, et al. Mechanical cardiopulmonary resuscitation in and on the way to the cardiac catheterization laboratory. *Circ J*. 2016;26;80(6):1292-1299.
23. LUCAS brochure GDR 3303294_B.

The LUCAS 3 device is for use as an adjunct to manual CPR when effective manual CPR is not possible (e.g., transport, extended CPR, fatigue, insufficient personnel).

Physio-Control is now part of Stryker.

For further information, please contact your Stryker or Physio-Control representative or visit our website at www.strykeremergencycare.com

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