



PHILIPS

Cardiac resuscitation



Be prepared for a **surge in cardiac arrests** related to COVID-19

The Philips HeartStart HS1 and HeartStart FRx AEDs.

As quarantine orders are lifted and people start to resume their normal activities, Philips is focused on protecting community members who have leftover heart damage caused by COVID-19. Having a Philips HeartStart HS1 or HeartStart FRx AED on hand gives added peace of mind for people with compromised hearts.



78%

of people diagnosed with COVID-19 showed evidence of heart damage caused by the disease weeks after they have recovered.¹



Cardiac complications

of COVID-19 are equal to those of SARS, MERS, and influenza combined.³



21%

of ICU patients globally, hospitalized with COVID-19 had atrial fibrillation.²



Arrhythmia is a top 3 risk

of viral infections.⁴ People with COVID-19, SARS, MERS and influenza⁵ are at a major risk for arrhythmias (heartbeats that are too fast, slow or irregular).

The Philips HeartStart HS1 and HeartStart FRx AEDs.

With you every step of the way, Philips has been right here from the start in an effort to help healthcare workers on the frontlines treat patients with COVID-19.



Protect your employees, co-workers, customers, clients and community members with a Philips HeartStart HS1 or HeartStart FRx AED.

To see more about HeartStart HS1 and HeartStart FRx AEDs, visit [Philips.com/COVIDAED](https://www.philips.com/COVIDAED)

1. Three-quarters of adults with COVID-19 have heart damage after recovery <https://www.sca-aware.org/sca-news/three-quarters-of-adults-with-covid-19-have-heart-damage-after-recovery>
2. Twenty-one percent of ICU patients globally, hospitalized with COVID-19 had atrial fibrillation. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7268965/>
3. ACC Clinical Guidance for the CV Care Team. <https://www.acc.org/-/media/665AFA1E710B4B3293138D14BE8D1213.pdf>
4. Besides myocardial infarction and heart failure, arrhythmias are generally one of the three major risks associated with viral infections, due to myocarditis, proinflammatory effects, and an increased sympathetic stimulation. In a report from Wuhan, China, 16.7% of hospitalized and 44.4% of intensive care unit (ICU) patients with COVID-19 had arrhythmias. <https://link.springer.com/article/10.1007/s00059-020-04924-0>
5. Cardiac complications of COVID-19 are approximately commensurate with SARS, MERS, and influenza analogs. <https://www.acc.org/-/media/665AFA1E710B4B3293138D14BE8D1213.pdf> ACC Clinical Guidance for the CV Care Team