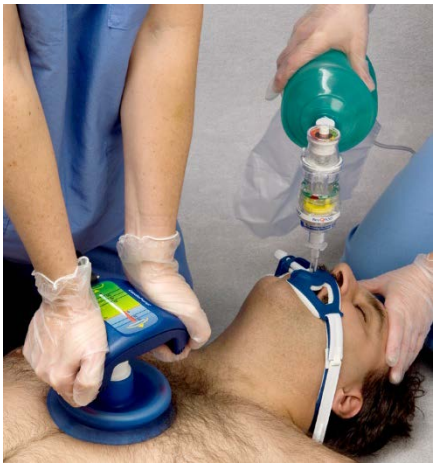
Letter to Coroner Template, ResQCPR System

[Date]

Dear Dr. [Coroner or Medical Examiner],

The purpose of this letter is to let you know that on [date], [name of organization] will begin utilizing the ResQCPR™ System in patients experiencing cardiac arrest. The ResQCPR System has received PMA approval from the FDA as a "*CPR adjunct to improve the likelihood of survival in adult patients with non-traumatic cardiac arrest*." For our protocol, we will be using the devices during resuscitative efforts in patients known or presumed to be age [age] years and above.

The ResQCPR System is comprised of the ResQPOD Impedance Threshold Device (ITD) and the ResQPUMP ACD-CPR Device. The ResQPOD maintains negative intrathoracic pressure to enhance blood flow during CPR. The ResQPUMP allows the rescuer to perform active compression-decompression CPR (ACD-CPR), which actively re-expands the chest during recoil and enhances the intrathoracic vacuum.



The ResQPUMP consists of a suction cup that adheres to the chest in the same location that providers place their hands for CPR. The rescuer uses the ResQPUMP to compress the chest a minimum of 2 inches (just as with manual CPR); they then pull up, or actively decompress the chest with approximately 10 kgs of lifting force.

We wanted to make you aware of this new form of CPR, as well as the fact that some patients develop redness or bruising on the chest as an expected side effect to the therapeutic suction action of the device.

If you have further questions about our organization's use of the ResQCPR System, please contact me. If you have further questions about the product itself, please contact the device manufacturer (ZOLL Medical) at www.zoll.com (website), info@zoll.com (email) or 1-800-348-9011 (Customer Service).

Sincerely,

[Organization medical or service director name]
[Contact information]