

Santa Barbara County
PUBLIC Health
DEPARTMENT

EMERGENCY MEDICAL SERVICES AGENCY

**300 North San Antonio Road
Santa Barbara, CA 93110-1316
805/681-5274 FAX 805/681-5142**

PUBLIC ACCESS DEFIBRILLATION

IMPLEMENTATION PACKET

Developed by:
Marc Burdick, EMT-P, CCEMTP
PAD Coordinator

January 2003

PUBLIC ACCESS DEFIBRILLATION (PAD) EMS AGENCY NOTIFICATION

Thank you for your interest in implementing a public access defibrillation project in Santa Barbara County. Early defibrillation has been proven to save lives and improve the lives of people that suffer a sudden cardiac arrest.

What you need to do to implement a PAD program

- **Read the California State PAD Regulations (provided):**
- **Submit the following to the EMS Agency, ATTN: PAD Coordinator:**
 - **A completed PAD notification form. Be sure to list each AED unit being deployed separately.**
 - **An Agreements Form, signed by the Medical Director of your PAD program.**
- **We have also included with this packet:**
 - **A sample Internal Response Plan**
 - **A sample incident report**
 - **A sample daily inspection form**

Attached is a list of Santa Barbara area AED training providers. If you are an AED training agency and wish to be placed on this list, please contact the PAD Coordinator at 805-681-5274. The EMS Agency does not endorse any one specific trainer, but rather provides a list of trainers for use by the public.

Thank you for your interest in saving lives!

Sincerely,



Marc Burdick, B.S. EMT-P, CCEMTP
PAD Coordinator

California Code of Regulations
Title 22. Social Security
Division 9. Prehospital Emergency Medical Services
Chapter 1.8. Training Standards and Utilization for Use of the Automated External Defibrillator by Non-
Licensed or Non-Certified Personnel
(Effective 2/12/2003)

Article 1. Definitions

§ 100031. AED Service Provider.

“AED Service Provider” means any agency, business, organization or individual who purchases an AED for use in a medical emergency involving an unconscious, person who has no signs of circulation. This definition does not apply to individuals who have been prescribed an AED by a physician for use on a specifically identified individual.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§ 100032. Authorized Individual.

“**Authorized individual**” means any person, not otherwise licensed or certified to use the automated external defibrillator, who has met the training standards of this chapter, and who has been issued a prescription for use of an automated external defibrillator on a patient not specifically identified at the time the physician’s prescription is given.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code, Section 1714.21, Civil Code.

§ 100033. Automated External Defibrillator.

“**Automated external defibrillator**” or “**AED**” means an external defibrillator that after user activation is capable of cardiac rhythm analysis and will charge and deliver a shock, either automatically or by user interaction, after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia. **Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code.**

Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§ 100034. Cardiopulmonary Resuscitation.

“**Cardiopulmonary resuscitation**” or “**CPR**” means a basic emergency procedure for life support, consisting of artificial respiration, manual external cardiac massage, and maneuvers for relief of foreign body airway obstruction.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§ 100035. Internal Emergency Response System.

“**Internal Emergency Response System**” means a plan of action which utilizes responders within a facility to activate the “9-1-1” emergency system, and which provides for the access, coordination, and management of immediate medical care to seriously ill or injured individuals.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§ 100036. Prescribing Physician.

“**Prescribing physician**” means a physician and surgeon, licensed in California, who issues a written order for the use of the automated external defibrillator to authorized individual(s).

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

Article 2. General Training Provisions

§ 100037. Application and Scope.

- (a) Any physician and surgeon licensed in California may authorize an individual to apply and operate an AED on an unconscious person who has no signs of circulation only if that authorized individual has been successfully trained according to the standards prescribed by this chapter.**
- (b) The training standards prescribed by this chapter shall not apply to licensed, certified or other prehospital emergency medical care personnel as defined by Section 1797.189 of the Health and Safety Code.**

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.189, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

Article 3. AED Training Program Requirements

§ 100038. Required Hours and Topics.

(a) The AED training component shall comply with the American Heart Association or American Red Cross standards. The course shall consist of not less than four hours, which shall include the following topics and skills:

- (1) basic CPR skills**
- (2) proper use, maintenance and periodic inspection of the AED;**
- (3) the importance of:**
 - (A) CPR,**
 - (B) defibrillation,**
 - (C) advanced life support,**
 - (D) adequate airway care, and**
 - (E) internal emergency response system, if applicable;**
- (4) overview of the local EMS system, including 9-1-1 access, and interaction with EMS personnel;**
- (5) assessment of an unconscious patient, to include evaluation of airway, breathing and circulation, to determine if cardiac arrest has occurred and the appropriateness of applying and activating an AED;**
- (6) information relating to defibrillator safety precautions to enable the individual to administer shock without jeopardizing the safety of the patient or the authorized individual or other nearby persons to include, but not be limited to:**
 - (A) age and weight restrictions for use of the AED,**
 - (B) presence of water or liquid on or around the victim,**
 - (C) presence of transdermal medications, and**
 - (D) implantable pacemakers or automatic implantable cardioverter-defibrillators;**
- (7) recognition that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged;**
- (8) rapid, accurate assessment of the patient's post-shock status to determine if further activation of the AED is necessary; and,**
- (9) authorized individual's responsibility for continuation of care, such as the repeated shocks if necessary, and/or accompaniment to the hospital, if indicated, or until the arrival of more medically qualified personnel.**

(b) The required hours for an AED training program can be reduced by no more than two hours for students who can show they have been certified in a basic CPR course in the past year and demonstrate to a qualified CPR instructor that they are proficient in the current techniques of CPR.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§ 100039. Medical Director Requirements

Any AED training course for non-licensed or non-certified personnel shall have a physician medical director who:

- (a) Meets the qualifications of a prescribing physician.**
- (b) Shall approve a process to ensure instructors are properly qualified to the AED instructor standards established by the American Heart Association or the American Red Cross and ensure that instructors are trained to the course content.**
- (c) Shall ensure that all courses meet the requirements of this chapter.**
- (d) May also serve as the “prescribing physician.”**

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§ 100040. Testing.

In order for an individual to be authorized to use the AED, the individual shall pass a written and skills examination, which tests the ability to assess and manage the specified conditions prescribed in Section 100038.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§ 100041. Written Validation.

The prescribing physician shall issue to the authorized individual a written validation or other documented proof of the authorized individual’s ability to use an AED. The requirements for a “Written Validation” and “Prescription for Use” can both be satisfied by the issuance of a written certification card from an AED training program. The prescribing physician’s signature shall be on file with the AED training program authorizing the issuance of the written certification card upon successful completion of the required training.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code.

Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

Article 4. Operational AED Service Provider/Vendor Requirements

§100042. Operational Requirements.

(a) An AED Service Provider shall ensure their internal AED programs include all of the following:

- (1) Development of an Internal Emergency Response System which complies with the regulations contained in this Chapter.**
- (2) Notification of the local EMS agency of the existence, location and type of AED at the time it is acquired.
- (3) That all applicable local EMS policies and procedures are followed.
- (4) That expected AED users complete a training course in CPR and AED use that complies with requirements of this chapter and the standards of the American Heart Association or the American Red Cross.
- (5) That the defibrillator is maintained and regularly tested according to the operation and maintenance guidelines set forth by the manufacturer, and according to any applicable rules and regulations set forth by the governmental authority under the federal Food and Drug Administration and any other applicable state and federal authority.
- (6) That the defibrillator is checked for readiness after each use and at least once every 30 days if the AED has not been used in the previous 30 days. Records of these periodic checks shall be maintained.
- (7) That a mechanism exists to ensure that any person, either an employee or agent of the AED service provider, or member of the general public who renders emergency care or treatment on a person in cardiac arrest by using the service provider’s AED activates the emergency medical services system as soon as possible, and reports any use of the AED to the local EMS agency.
- (8) That there is involvement of a California licensed physician and surgeon in developing an Internal Emergency Response System and to ensure compliance with these regulations and requirements for training, notification and maintenance.**

(9) That a mechanism exists that will assure the continued competency of the authorized individuals in the AED Service Provider's employ to include periodic training and skills proficiency demonstrations.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code.

Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§100043. AED Vendor Requirements

Any AED vendor who sells an AED to an AED Service Provider shall notify the AED Service Provider, at the time of purchase, both orally and in writing of the AED Service Provider's responsibility to comply with the regulations contained in this Chapter.

Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code.

Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

Notification of New Public Access Defibrillator Site

| | |
|---|------|
| Prescribing Physician's Name | |
| Prescribing Physician's Phone Number | |
| I have placed an Automated External Defibrillator at the following location. I am serving as the prescribing physician for this public access defibrillation program as described in the California Code of Regulations, Section 100031 through 100041. | |
| Signature | Date |

| Location of AED | |
|--------------------------------|--|
| Name of Building or Complex | |
| Floor and Location Information | |
| Nearest Cross Street | |
| Closest/Fastest Street Access | |

| On-Site Contact Information | |
|-------------------------------------|--|
| Name of On-Site Contact | |
| Employer of On-Site Contact | |
| Phone Number of On-Site Contact | |
| Physical Address of On-Site Contact | |
| Mailing Address of On Site Contact | |

Please use additional units form for each AED Location. Please mail this completed form to:
PAD Program, Santa Barbara County EMS Agency, 300 North San Antonio Road, Santa Barbara, California 93110-1316. Fax 805-681-5142

Please call 805-681-5274 with any questions.

| | | | |
|-----------------------|----------|-------|-----|
| For Internal Use Only | Received | Date: | By: |
| PSAP Notified | | Date | By |

Notification of New Public Access Defibrillator Site Additional Units

| Location of AED | |
|--------------------------------|--|
| Name of Building or Complex | |
| Floor and Location Information | |
| Nearest Cross Street | |
| Closest/Fastest Street Access | |

| Location of AED | |
|--------------------------------|--|
| Name of Building or Complex | |
| Floor and Location Information | |
| Nearest Cross Street | |
| Closest/Fastest Street Access | |

| Location of AED | |
|--------------------------------|--|
| Name of Building or Complex | |
| Floor and Location Information | |
| Nearest Cross Street | |
| Closest/Fastest Street Access | |

| Location of AED | |
|--------------------------------|--|
| Name of Building or Complex | |
| Floor and Location Information | |
| Nearest Cross Street | |
| Closest/Fastest Street Access | |

**** Make additional copies as necessary**

| | | | |
|-----------------------|----------|-------|-----|
| For Internal Use Only | Received | Date: | By: |
| PSAP Notified | | Date | By |

PUBLIC ACCESS DEFIBRILLATION (PAD)

AGREEMENTS SUMMARY

Pursuant to California Code of Regulations (CCR, Title 22, Division 9, Chapter 1.5, Sections 100031 through 100041) all AED service providers in PAD programs must meet and agree to the following requirements. I certify that this AED Service Provider agrees:

- 1) The AED training component shall comply with the American Heart Association or American Red Cross standards prescribed in Section 100038.
- 2) That expected AED users complete a training course in CPR and AED use that complies with requirements of this chapter and the standards of the American Heart Association or the American Red Cross and a mechanism exists that will assure the continued competency of the authorized individuals in the AED Service Provider's employ to include periodic training and skills proficiency demonstrations.
- 3) Development of an Internal Emergency Response System which complies with the regulations and that there is involvement of a California licensed physician and surgeon in developing an Internal Emergency Response System and to ensure compliance with these regulations and requirements for training, notification and maintenance.
- 4) Notification of the local EMS agency of the existence, location and type of AED at the time it is acquired. (Please complete "Notice of Public Access Defibrillation Site" form.)
- 5) That all applicable local EMS policies and procedures are followed.
- 6) That the defibrillator is maintained and regularly tested according to the operation and maintenance guidelines set forth by the manufacturer, and according to any applicable rules and regulations set forth by the governmental authority under the federal Food and Drug Administration and any other applicable state and federal authority.
- 7) That the defibrillator is checked for readiness after each use and at least once every 30 days if the AED has not been used in the previous 30 days. Records of these periodic checks shall be maintained.
- 8) That a mechanism exists to ensure that any person, either an employee or agent of the AED service provider, or member of the general public who renders emergency care or treatment on a person in cardiac arrest by using the service provider's AED activates the emergency medical services system as soon as possible, and reports any use of the AED to the local EMS agency. (An activation report is included with this PAD packet)

Authorized Individual or prescribing physician: _____

Signature: _____ Date: _____

SAMPLE INTERNAL RESPONSE & OPERATIONAL PLAN RESPONSE PLAN

- ❖ Upon ANY request for medical assistance, the Automated External Defibrillator and personal protective equipment should accompany the rescuer to the scene or be brought to the scene with minimum delay.
- ❖ 911 should be accessed immediately.
- ❖ While responding to a call for help, mentally review the proper steps to be taken if the patient is in cardiac arrest.
- ❖ There should be as little delay as possible in responding to a medical call for help
- ❖ Upon arriving on the scene, make sure the scene is safe. If not safe, either make it safe or wait for EMS to arrive.
- ❖ Prior to assessing the patient, the AED operators shall protect themselves by putting on medical gloves. 2 pairs of gloves are to be kept with each AED. Eye protection should be worn in the event of blood or other bodily fluids.
- ❖ Assess the patient
- ❖ If the patient meets defibrillation criteria, immediately proceed according to the operational plans.

AED Operational Procedures

Patient care and AED Operator *PATIENT CRITERIA* for AED equipment use:

- Patient assessment, care and treatment are to be used in conjunction with the AED equipment and actions. If obvious death criteria are present, resuscitation should not be started and the AED operator equipment should not be applied.
- If the victim is pulseless and not breathing from an obvious **traumatic** situation, CPR should be initiated and the AED should **NOT** be used.
- If the patient meets all of the following patient criteria, the AED Operator shall apply the AED equipment to the patient for analysis:
 - ❖ Unconscious;
 - ❖ Pulseless
 - ❖ Not breathing or agonal respirations
 - ❖ 60 pounds or greater body weight and any age; or
 - ❖ 8 years of age or over and any body weight.

If the patient does not meet all of the patient criteria, the AED equipment shall not be applied; standard care shall be provided.

AED Operator Treatment Procedures:

1. If the patient is found in cardiopulmonary arrest and all patient criteria are met, or the patient develops cardiopulmonary arrest (witnessed cardiac arrest) and the patient criteria are met, the AED operator shall take the following actions after placing AED next to patient's left ear.
 - a. Establish unresponsiveness, request or update EMS,
 - b. Position the patient properly, ensure the patient is in a position/location for safe defibrillation, open the airway,

- c. Establish breathlessness and give two full ventilations
 - d. Establish carotid pulselessness,
 - e. If available, assign someone to provide CPR. If no one can provide CPR, go directly to AED use
 - f. Open AED equipment, turn on power
 - g. Begin Verbal Report (Your name, patient's approximate age, estimated duration of time in cardiopulmonary arrest, any medical history, etc.)
 - h. Open adhesive defibrillator pads and cable set
 - i. Attach defibrillator pads to the patient in the proper locations, stop all CPR and patient contact; and
 - j. Wait for equipment analysis
2. If the AED equipment indicates defibrillation is necessary, the AED will charge fully with an audible tone when ready for defibrillation. Ensure that the patient is in a position and location for safe defibrillation, move the patient to a better location if potentially unsafe for defibrillation. Proceed as follows and in compliance with AED treatment protocol:
- a. Clear anyone in contact with the patient or in contact with the patient by contact with electrically conductive material by announcing loudly "I'm clear, you're clear, we're all clear". Visually ensure that no one has contact with the patient and press the shock button.
 - b. After the shock is delivered, do not allow any patient contact while the AED equipment is assessing. Follow voice and visual commands of the AED equipment. If the patient still has an EKG rhythm that is shockable, the AED equipment will recharge and will then announce to "press shock button". Follow the voice and display commands.
 - c. Deliver (stack) a total of three successive shocks following the AED patient treatment protocol without interposed CPR or patient contact. If the patient develops an EKG rhythm that is not shockable, the AED equipment will not charge and will advise to check for a pulse. If no pulse, provide CPR for one minute. The AED will then automatically analyze or instruct you to 'press analyze". Follow voice and display commands.
 - d. If the patient is not in an EKG rhythm that is shockable and the patient remains in cardiopulmonary arrest, then continue CPR. After each minute of CPR, stop CPR and press the analyze button and follow voice and display commands.
 - e. If the patient remains in an EKG rhythm that is shockable, follow the AED patient treatment protocol to a maximum of six shocks. If the patient regains pulses and re-arrests, the AED operator may deliver up to a total of nine shocks.
 - f. Once applied to a patient, the AED equipment shall remain applied until EMS personnel with necessary defibrillation equipment assume care.

Arrival of Emergency Medical Services

- ❖ When either the Fire Department or ambulance personnel arrives, immediately hand care over by;
- ❖ Announcing arrival of agency on scene and give a verbal report of initial condition of patient, actions taken, amount of shocks delivered (displayed on screen), changes in patient's condition, etc.
- ❖ If the Fire Department Personnel arrive prior to the Ambulance Company, **do not turn equipment OFF**. Give verbal report. Leave the equipment on and attached to the patient. The Fire Dept personnel will then either take over operation of the AED or instruct you to continue with care under their supervision.
- ❖ When the ambulance company arrives, the paramedic or EMT will either detach the plug-in connector and attach to their equipment or remove defibrillator pads and attach their own equipment.
- ❖ **Follow instructions of any arriving EMS personnel.**

REPORT OF PAD/AED USE

| | |
|--|--|
| Name Of AED Service Provider | |
| Responder Name | |
| Place of Occurrence {address & specific location} | |
| Date of Occurrence | |
| Time of Occurrence | |
| | |
| Patient's name (if known) | |
| Patient's Age | |
| Patient's Sex | |
| Approximate Down Time Prior your Arrival | |
| Witnessed collapse/arrest? | |
| • Alert Time (time aware of person down) | |
| • Bystander CPR prior to AED at victim? | |
| • Time AED at victim's side: | |
| • Time of first shock (if given): | |
| • Total number of shocks: | |
| • Did victim regain a pulse? | |
| • Patient discharged from hospital? | |

1. Please attach any additional information that you think would be helpful.
2. Please return this completed report to the EMS Agency within 24 hours.

Fax # 805-681-5142

Attn: PAD Program Coordinator

Thank you very much for your participation!!

SANTA BARBARA COUNTY

AUTOMATED EXTERNAL DEFIBRILLATOR (AED) VENDORS

****THE EMS AGENCY DOES NOT EXCLUSIVELY ENDORSE ANY ONE SPECIFIC VENDOR. THIS LIST REPRESENTS VENDORS THAT HAVE WORKED WITH THE AGENCY AND HAVE PROVIDED THEIR INFORMATION. IF YOU ARE A VENDOR AND WISH TO BE PLACED ON THIS LIST, PLEASE CONTACT THE EMS AGENCY.**

VENDOR NAME CONTACT EMAIL NUMBER

| | | | |
|--------------------------|------------------|--|-----------------------|
| Laerdal | Keith Wellen | | 949-829-8545 |
| Emergency Responders | Jim Emerson | | 866-70-DEFIB |
| Survivalink | | | 800-991-5465 |
| Zoll Medical Corp. | Bryan Pank | | 800-242-9150 |
| Medical Research Lab | | | 800-462-0777 |
| First Response | Jeff Cooper | | 805-648-6860 |
| Life Saver | Tony Castiglione | lifesaver911@bak.rr.com | 661-588-7933 (Office) |
| PMX Medical | Brian Hartley | | 925-275-2635 |
| Medtronic Physio-Control | Cindy Bowers | Cynthia.bowers@medtronic.com | 800-442-1142 x2176 |
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