

AUTOMATIC EXTERNAL DEFIBRILLATOR PROGRAM

PURPOSE

This program provides a guide for the purchase, training, placement and usage of Automated External Defibrillators (AED's) in any University facility or vehicle.

GENERAL

Each year, many lives are saved with the use of Automated External Defibrillators in cases where cardiac arrest occurs. This program will govern what equipment will be approved for use on campus, where it will be placed, the type and frequency of training that is required and how the equipment will be maintained.

REFERENCE

Those who use Automatic External Defibrillation Devices in an attempt to help a person who is believed to be in cardiac arrest are protected under Pennsylvania Statute. 42 Pa.C.S. subsection 8331.2 specifies Good Samaritan civil immunity for the use of Automated External Defibrillators and 42 Pa.C.S. subsection 8332 specifies nonmedical Good Samaritan civil immunity.

DEFINITIONS

AED - An AED is a device that is designed to analyze a heart rhythm and advise trained or "lay" personnel when to push a button on the unit to deliver a potentially lifesaving shock (defibrillation) to the victim of a sudden cardiac arrest.

AED Review Committee – The AED Review Committee consists of the existing members of the University Safety Committee and any other University Officials or Community Members as deemed necessary by the University Safety Committee.

Medical Oversight – Medical oversight is provided by a licensed physician selected by the AED Review Committee.

RESPONSIBILITIES

1. DEPARTMENT OR ADMINISTRATIVE UNIT

- A. Prepare and submit a "Plan to use an AED" to the AED Review Committee.
- B. Post readily visible signs at appropriate building locations that specify the location of the AED.
- C. Ensure compliance with all components of the plan.
- D. Submit an updated plan to the AED Review Committee whenever any substantial changes are made to the original plan after initial implementation. Changes that

would require an update would include but are not limited to;

1. Removing an AED from service
2. Substantial change to the location of the AED
3. Placement of additional AED's

2. AED REVIEW COMMITTEE

- A. Provide assistance with the preparation of a "Plan for Use of an AED", review "Plan" submissions and provide written approval of "Plans" to the requestor.
- B. Provide assistance during the planning and implementation process and assess the effectiveness of the overall AED program and reporting requirements.
- C. Ensure that physicians are designated to provide medical oversight of the plan.
- D. Provide copies of documentation required under the "Reporting Procedures" to physicians designated to provide medical oversight.
- E. Provide copies of submitted plans to Environmental Health and Safety for program recordkeeping purposes.

PROCEDURE

1. APPROVED EQUIPMENT

The University has established the required standard for AED equipment that will be purchased for use on the campus. All AED purchases will follow this standard;

AED	Philips HeartStart Onsite AED	M5066A
Adult Pads	Philips HeartStart Onsite Adult Pads	M5071A
Infant/Child Pads	Philips HeartStart Onsite Infant/Child Pads	M5072A
Batteries	Philips HeartStart Onsite FRx battery	M5070A
Cabinet	Wall Mount	PFE7024D
Cabinet	Recessed	PFE7023D
Case	Standard Carrying Case	OPTC01
Signage	AED Wall Sign	M3858A

2. CONTENTS OF THE “PLAN TO USE AN AED”

- A. Prior to the purchase and/or placement of an AED, the Department and/or Administrative Unit must submit a Plan for approval by the AED Review Committee that addressed the following issues;
 - 1. Placement of the AED within the facility
 - 2. The name of the person who will be responsible for oversight of the “Plan” for that department or Administrative Unit.
 - 3. The maintenance plan for the AED. Pads and batteries have a shelf life and will need to be replaced every few years based on manufacturer’s recommendations.
 - 4. The plan to provide internal training for staff in the use of AED devices.

3. PURCHASING AN AED

- A. Any Department or Administrative Unit of this University may purchase an AED for the purpose of having the capability to provide rapid defibrillation to persons who may be experiencing a sudden cardiac arrest in their facility. All costs associated with the purchase of an AED or any AED accessories will be paid for by the Department or Administrative Unit making the request. In order to purchase, use or maintain an AED, the Department or Unit must meet the requirements specified;
 - 1. Prior to the purchase and/or placement of an AED, the requestor must submit a “Plan to use an AED” to the AED review committee. The plan must address use, training, location and maintenance of units.
 - 2. The requestor must ensure compliance with the AED Program’s training requirements.
 - 3. The requestor must comply with the AED Program’s recordkeeping and reporting requirements.

4. PLACEMENT REQUIREMENTS

- A. AED's should be visible to everyone. No one is going to use it or even ask for it if they don't know it exists.
- B. AED cabinets help deter theft and allow AED's to be visible.
- C. AED's should not be locked up in a drawer or office. Out of site out of mind! Regular inspection checks probably will not get done. Regular inspections are critical to assure AED readiness.

- D. AED's should be placed near a phone for calling 911.
- E. AED's should be centrally located within the highest risk and most concentrated population area and near trained rescuers.
- F. AED's should be placed near high risk areas.
- G. AED's should be placed well within 3 minutes of anywhere within the facility. (That means 1.5 minutes to the device and 1.5 minutes back).

5. TRAINING REQUIREMENTS

Those who will be expected to use the AED should complete training in Adult CPR and the use of Automatic External Defibrillation devices. This training is provided by the American Safety and Health Institute, the American Red Cross, the American Heart Association or an equivalent course of instruction approved by the Pennsylvania Department of Health. Retraining should be performed in accordance with the recommendations of the training provider. The AED Review Committee can provide referrals to training providers.

6. REPORTING PROCEDURES

In order to evaluate the effectiveness of the West Chester University AED Program, it is important that any department or Administrative Unit that has used an AED on a person in an emergency situation submit a written report to the AED Review Committee. The user should provide the following information;

- A. The name of the department or Administrative Unit.
- B. The AED unit information / Serial Number, Model Number
- C. The location of the incident where the AED was used.
- D. The date and time the AED was used.
- E. The person who operated the AED
- F. The identity of the person that the AED was used on.
- G. A brief description of the circumstances under which the AED was used.
- H. Information for the EMS unit that received the patient.
- I. The hospital that the patient was transported to.

Once an AED unit has been used in an emergency situation, it must be taken out of service and properly inspected and serviced prior to re-use. The AED Review Committee will assist the Department or Administrative Unit in coordinating this service with a reliable vendor.

7. EXCEPTIONS

This program is not intended to cover situations in which the University employs or contracts medical personnel with specific education, certification and or licensure to deliver emergency care. Personnel such as EMT's, Paramedics, Registered Nurses and other health care professionals may have an AED that they have been authorized to use by virtue of their specific training or medical protocols and may have other reporting requirements mandated by regulations or statutes.

Revised: **March, 2012**

Jon R. Brill Jr.
Assistant Director
Fire Safety and Compliance
Department of Environmental Health and Safety



Department of Environmental Health and Safety

AUTOMATIC EXTERNAL DEFIBRILLATOR (AED)

USER PLAN / APPLICATION

Department applying: _____

Date of application: _____

Person responsible for plan oversight: _____

Campus Phone: _____

Proposed Location of AED: _____

Proposed Location of Signage: _____

Cost Center for Purchase: _____

Training Plan: (List training provider, individuals to be trained, frequency of refresher training)

Communications Plan: (Describe how occupants will be notified of the AED and how Public Safety will be notified in an emergency.)

Maintenance Plan: (Describe plan for providing on-going maintenance for the AED. Include provisions for the cost of replacing batteries and pads as needed.)

Schedule for Implementation: (Describe the time frame for having the AED in place and ready for use.)

Date AED Installed: _____

Approvals:	
Facility Administrator: _____	Date: _____
Review Committee: _____	Date: _____