



1. Purpose

This policy provides guidelines for the placement, use, inspection, and maintenance of Automated External Defibrillators (AED).

2. Scope

This policy applies to all Susquehanna Conference offices, programs, and individual churches.

3. Definitions

Automated External Defibrillator (AED) – a portable device that uses electric shock to restore a stable heart rhythm to an individual in a cardiac situation.

Emergency – a situation where an individual is believed to be in cardiac arrest or is in need of immediate medical attention to prevent death or serious injury

Emergency Response Provider – includes Federal, State, and local emergency public safety, law enforcement, emergency response, emergency medical services personnel, response teams, agencies, and authorities (excluding hospital emergency facilities and related personnel).

Good Faith – a reasonable opinion that the immediacy of the situation is such that the use of an AED should not be postponed until emergency medical personnel arrive or the person is hospitalized.

Local Emergency Response Team – The organization’s or location’s emergency response team, comprised of all staff and/or volunteers currently certified in CPR and AED usage.

4. Program Requirements

A. Identify Program Coordinator

Each individual church, camp/retreat location and conference office should identify an AED Program Coordinator. Following is a list of coordinator responsibilities:

- Coordinate CPR/AED training and maintain documentation of same;
- Maintain active trained CPR/AED user list;
- Coordinate AED maintenance and inspections;
- Perform an annual review of this policy;
- Inform emergency response team of this policy and rehearse post-incident response;
- Perform post-event reviews.

B. Training

Expected AED users shall complete training in the use of CPR and AED provided by the American National Red Cross or the American Heart Association or through an equivalent course of instruction approved by the department of health in consultation with a technical committee of the PA Emergency Health Services Council. AED training will be made available to staff members and volunteers and will be provided by outside trainer(s) or qualified volunteer(s). Retraining will be made available at least once every two years. Training topics shall include:



- Recognizing signs of a cardiac attack;
- Notifying emergency medical services (EMS);
- Performing CPR;
- Determining whether use of AED is appropriate;
- Using the AED device;
- Safety protocols governing use of the AED device.
- Post-incident procedures.

Between training sessions, all AED-trained personnel shall practice trained skills by participating in tabletop drills that include:

- Activating a medical emergency response;
- The steps needed to administer CPR;
- Using an AED device;
- Post-incident procedures.

C. Inspection, Testing, and Maintenance

The AED must be maintained and tested according to the manufacturer's operational guidelines. AED Coordinators should refer to the manufacturer's instruction book for details.

AED units must be inspected on at least a quarterly basis (monthly is preferred) to ensure the following (note, there is a sample form in Appendix A):

- Placement of the AED is visible, unobstructed, and near a phone (to call for EMS);
- Batteries are installed;
- The status/service indicator light works;
- There is no audible service alarm;
- There are no visible cracks on the exterior;
- Two sets of AED pads are present, in sealed packages (for adults and children);
- Pads are not expired;
- Disposable face mask is present;
- Disposable gloves are present;
- Safety razor and pair of scissors are present;
- Absorbent towels or trauma pads are present;
- AED Incident Form and pen are present.

D. Location, Mounting, and Labeling of AED Units

AED units shall be located in one or more of the following:

- Facilities with a high number of visitors (churches, camp/retreat cafeterias, office buildings);
- Facilities in which high-stress activities occur (recreation areas, swimming facilities, etc.);
- Designated health care facilities (nurses' offices at camps, for example).

AED units shall be mounted in the following ways:

- On publicly accessible walls;
- In a manner that is secure to prevent tampering, such as providing an audible alarm should the AED unit surround be opened and/or the AED unit be removed;



- Near a telephone.

AED units shall be identified by easy-to-read signs.

- AED units shall be labeled with a sign advising use by persons with AED and CPR training.

E. Pennsylvania Good Samaritan Protection

It is important to note that Pennsylvania law protects “Good Samaritans”, as follows:

- Any individual who is trained to use an automated external defibrillator and who in *good faith* uses an AED in an emergency shall not be liable for any civil damages as a result of any acts or omissions by such individual in using the AED, except any acts or omissions intentionally designed to harm or any grossly negligent acts or omissions which result in harm to the individual receiving the AED treatment.
- Any individual who lacks the training, but who has access to an AED and in *good faith* uses an AED in an emergency as an ordinary reasonably prudent individual would do under the same or similar circumstances, shall receive immunity from civil damages.

However, this protection is voided if a person obstructs or interferes with care and treatment being provided by emergency medical services personnel or a health professionals. In other words, when EMS arrives, others must step aside and allow the EMS workers to perform their job.

F. Using the AED

See Appendix A for step-by-step instructions on AED use (note, this appendix should be posted at all AED locations).

G. AED Incident Procedures

Ensure your local emergency response team (trained employees and volunteers) understands and rehearses incident procedures including:

- Instructing someone to call EMS;
- Clearing room around the victim;
- Preparing to utilize the AED and performing CPR;
- Post-incident procedures.

Note, it is advised that these rehearsals/drills be documented to include successes and opportunities.

H. Post-AED Use

There are important steps to take after an AED has been utilized. Medical personnel attending to a victim may require access to the information from the AED that was recorded during its use. Also, the AED must be returned to a “ready state” for future incidents.

What to do after your AED has been used:



- Download event information. AEDs store the information that is communicated during an emergency. Consult your instruction manual to determine how to download the data to a computer. This may require special software and a cable to connect the AED to the computer.
- You may need to send copies of the event information to the EMS organization involved in the incident.
 - NOTE: Incident information is considered private medical information and should be treated as such.
 - File a copy of the downloaded event information to include with other AED information.
- Perform post-event maintenance
 - Replace the pads
 - Clean the unit
 - Replenish supplies in the resuscitation kit
 - Return AED to a “ready state” as quickly as possible.
 - Consult your instruction manual to determine what additional steps this may require. New pads and other supplies can be obtained from the AED manufacturer.

I. Complete AED/CPR Incident Form

After administering CPR or using AED device, responders must complete an incident form with the following information (Appendix C):

- Incident location;
- Date and time of the incident;
- Time responder arrived on scene;
- Witness information (name, address, telephone number, email address);
- Whether victim was already down or did witness see victim go down?
- Time that responder notified EMS;
- Gender and estimated age of victim;
- If available, victim information (name, address, telephone number);
- Condition of the victim;
- Time that responder initiated CPR;
- Time that responder initiated use of AED device;
- Time of EMS arrival;
- Incident outcome.

File the incident report with all other AED documentation and send a copy to the Conference Safety Committee via Jason Mackey at the following e-mail address: jmackey@susumc.org.

J. Post-Incident Debriefing

The program coordinator shall conduct a post-event review to evaluate how well policies and procedures were adhered to and if adjustments to same are necessary. Consider the following:

- Review incident report for completeness;



- Review emergency medical response procedures;
- Decide on strategies to improve emergency medical response, if necessary;
- Review any changes in emergency medical response procedures with AED-trained personnel during subsequent training session;
- Program coordinator shall ensure that:
 - The AED device is ready for future use;
 - Any supplies used during emergency medical response are replaced;
 - AED device returned to designated location.



Appendix A: Using the AED

These AED steps should be used when caring for a non-breathing child aged 8 or older who weighs more than 55 pounds, or an adult.

Automated external defibrillators can help save lives during sudden cardiac arrest. Following is a step-by-step guide to be posted at your location. Review these steps often, at your convenience. You just might save a life.

After checking the scene and ensuring that the person needs help, you should ask a bystander to call 911 for help, then:

- 1** Turn on the AED and follow the visual and/or audio prompts.

- 2** Open the person's shirt and wipe his or her bare chest dry. If the person is wearing any medication patches, you should use a gloved (if possible) hand to remove the patches before wiping the person's chest.

- 3** Attach the AED pads, and plug in the connector (if necessary).

- 4** Make sure no one, including you, is touching the person. Tell everyone to "stand clear."

- 5** Push the "analyze" button (if necessary) and allow the AED to analyze the person's heart rhythm.

- 6** If the AED recommends that you deliver a shock to the person, make sure that no one, including you, is touching the person – and tell everyone to "stand clear." Once clear, press the "shock" button.

- 7** Begin **CPR** after delivering the shock. Or, if no shock is advised, begin CPR. Perform 2 minutes (about 5 cycles) of CPR and continue to follow the AED's prompts. If you notice obvious signs of life, discontinue CPR and monitor breathing for any changes in condition.



Appendix B: AED Inspection Checklist

Complete this form for each AED unit located on site and maintain on site for a minimum of 12 months.

Date: _____

Church/Facility: _____

Location	AED Make	Model/Serial No	Inspector
Pad 1 Expiration Date	Pad 2 Expiration Date	Child/Infant Pad Expiration Date	Battery Exp./ Use-By-Date
Criteria		Status	Corrective Action/Comments
AED			
Placement visible, unobstructed and near phone			
Sign posted indicating presence of AED			
Batteries present/installed			
Status/service indicator light on			
No visual/audible service alarm			
No visible cracks in exterior components and sockets			
Supplies			
Two sets of AED pads in sealed packages (two for adults, two for children)			
Disposable face masks			
Disposable gloves			
Safety razors			
Pair of scissors			
Absorbent towels or trauma pads			
AED incident report form and pen			



Appendix C: AED/CPR Incident Report

Describe the incident that required emergency response involving use of CPR and/or AED below, and provided completed report to the AED coordinator at your location, where it should be filed for at least one year following the incident.

Incident location:	
Date of incident:	
Time of incident:	
Time responder arrived on scene:	
Witness information (name, address, telephone, email address):	
Per witness, was patient already down or did witness see patient go down?	
Time that responder notified EMS:	
Gender and estimated age of patient:	
If available, patient information (name, address, telephone number):	
Condition of the patient:	
Time that responder initiated CPR:	
Time that responder initiated use of AED device:	
Time of EMS arrival:	
Incident outcome:	

Name of individual completing report: _____

Date: _____