
PUBLIC ACCESS EARLY DEFIBRILLATION PROGRAM

1. PURPOSE

To delineate requirements and practices for the provision of Public Access Early Defibrillation in Marin County with the goal of increasing the survival rate from cardiac arrest.

Related Policies: (4100 et.sec., 4104)

California Code of Regulations Title 22, Div. 9, Chapter 1.8 (C.C.R. Title 22,9,1.8)

Portions of this policy are derived from (C.C.R. Title 22,9,1.8) and should be referred to for the complete regulation.

II. DEFINITIONS

- A. Public Access Early Defibrillation - the practice of using non-medical personnel, with specified training, to administer defibrillatory shocks with an automated defibrillator to apneic, pulseless patients prior to the arrival of medical personnel.
- B. Automated Defibrillator - external defibrillator capable of cardiac rhythm analysis that will charge and deliver a shock, either automatically or by user interaction, after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia.
- C. AED Service Provider - an agency, business, organization or individual who obtains 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 for use on a specifically identified individual. Policy governing the use of AED by trained, licensed or certified medical personnel is described elsewhere (Policy #4100).

III. POLICY

- A. This policy outlines the procedures that a responder must use in order to comply with state regulations governing the use of automatic or semi-automatic defibrillators.
- B. Provision of early defibrillation is an optional adjunct to basic cardiopulmonary resuscitation that may be provided by any responder wishing to do so.

- C. Policy/procedure related to training program approval, maintenance of skill proficiency, treatment guidelines, and quality assurance will be monitored by the EMS Office in conjunction with the AED service provider, and the medical director. (C.C.R. Title 22,9,1.8)
- D. Any persons so choosing will function in this capacity only following completion of an approved early defibrillation class, maintenance of the required skills refresher training and compliance with the applicable policies and procedures. (C.C.R. Title 22,9,1.8)
- E. Medical Director Requirements:
Any AED training course for non-licensed or non-certified personnel shall have a physician medical director who:
1. Meets the qualifications of a prescribing physician.
 2. 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.
 3. Shall ensure that all courses meet the requirements of (C.C.R. Title 22,9,1.8).
 4. May also serve as the “prescribing physician.”
- F. Operational Requirements:

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 (C.C.R. Title 22,9,1.8).
2. Notification of the local EMS agency of the existence, location and type of AED at the time it is acquired. This notification shall be submitted on the “County of Marin AED Provider Information” form.
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 (C.C.R. Title 22,9,1.8) 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. Reports shall be submitted to the EMS agency on the "CPR or AED Usage Report" form.
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.

G. Performance Standards

The performance standard set fourth in policy #4104 shall be used as a guide for the Public Access Defibrillation performance standard.