



SAC STATE RESCUE READY

AED Program

SEPTEMBER 2018
CALIFORNIA STATE UNIVERSITY, SACRAMENTO

Introduction

An Automated External Defibrillator (AED) is a device capable of cardiac rhythm analysis, which will charge and deliver a shock after electronically detecting and assessing ventricular or rapid ventricular tachycardia when applied to an unconscious victim who has experienced sudden cardiac arrest. AEDs are proven life-saving technology when utilized quickly and correctly during sudden cardiac arrest. In an effort to improve campus safety, the Risk Management Services (RMS) department has implemented a comprehensive, campus-wide AED program.

Risk Management Service's goal is to provide an AED in every building on campus. Providing an AED within three to five minutes has been proven to help significantly increase the number of sudden cardiac arrest survivors. As AEDs are not without need of maintenance, help from the campus community will be required in order to provide the best rescue service to our employees, students, and visiting public.

Regulatory Authority ([Appendix A](#))

- California Health and Safety Code, Division 13, Part 3, Chapter 3 19300-19300
- California Health and Safety Code, Division 2.5, Section 1797.190
- California Health and Safety Code, Division 2.5 Section 1797.196
- California Health and Safety Code, Division 103, Section 104113
- California Civil Code, Division 3, Section 1714.2
- California Civil Code, Division 3, Section 1714.21

Scope

An AED can be used in conjunction with Cardiopulmonary Resuscitation (CPR) in case of sudden cardiac arrest in accordance with accepted protocols including those developed by the American Red Cross, and its recognized organizations (American Heart Association, Emergency Care and Safety Institute, National Safety Council, Canadian Red Cross, and Medic First Aid). Use of the AED and CPR should continue as appropriate during the course of emergency care until the patient resumes pulse and respiration, and/or local Emergency Medical Services (EMS) arrives at the scene and assumes responsibility for emergency care of the patient.

Definitions

Automatic External Defibrillator (AED): An AED is used to treat victims experiencing symptoms of sudden cardiac arrest

Cardio-Pulmonary Resuscitation (CPR): The technique used to administer external chest compressions and periodic breathes in order to maintain basic life support in the event of sudden cardiac arrest.

Emergency Medical System (EMS): Professional community responder agency for emergency events, who provide medical assistance and/or ambulance transport.

Rescue breathing: Artificial ventilation of a victim in respiratory and/or sudden cardiac arrest.

Sudden cardiac arrest (SCA): A significant life-threatening event when a person's heart stops or fails to produce a pulse.

Responsibilities

All named persons with responsibilities are provided in Appendix B which shall be updated annually with the annual program review. Defined responsibilities with each roles can be found below.

University AED Program Coordinator

- Coordinates AED Program for the University
- Reviews records for training and maintenance
- Reviews equipment and accessories are maintained
- Reviews and revises AED program annually

Division Leaders/Coordinators

- Stakeholders (President?) and financial backers (VPs/Deans)
- Provides financing for AEDs, training, etc...
- Determines the Building AED Coordinators for each building/department
- Helps determine who the Responder is for each building
- Reviews and revised AED program annually with the University AED Program Coordinator

Building AED Coordinator

- Provides daily, monthly, and biannual maintenance checks of AEDs in their department/building
- Provides software updates to AEDs when needed
- Maintains maintenance records

CPR & AED Training Coordinator

- Provides CPR & AED training
- Maintains training records

University Responders

- Provides first aid response in the event of an emergency
- At least 2 per floor for each building (high hazard areas can have more)

AED Site Determination & Acquisition

Where to put AEDs (site evaluation & determination)

American Heart Association recommends treating a cardiac arrest victim within three to five minutes. Placing AEDs in locations with high traffic or places of physical exertion are ideal for AED placement. We have identified the following locations that shall have AEDs in place based on high traffic and places of physical exertion. See Appendix C for the full list.

How to choose an AED

There are many different makes and models of AEDs from many different manufactures. All AEDs are created to be used by the general public with minimal to no training. No brand is recommended by the American Red Cross as they are all designed to be similar; however, RMS does have a recommended AED (see below). AED Superstore has put out a guide to help you choose the type of AED you would like to purchase. <http://www.aedsuperstore.com/aed-buyers-guide.pdf>

Other purchase considerations:

- Spare set of adult pads
- Pediatric pads
- Ready kit
- AED cabinet that is alarmed
- AED signs

Future purchase considerations to help you figure out the cost to maintain your AED:

- Adult pads
- Pediatric pads
- Ready kit
- Replacement batteries for AED & AED Cabinet alarm

Recommended AED

Risk Management Services has a recommended AED. The [Zoll AED Plus School & Community Value Package](#) by AEDsuperstore.com provides you with the best value. Add on an additional adult pad and your AED will be complete. See Appendix D for more information on the recommended AED.

Installing an AED

Placement of an AED should be considered before buying an AED.

- AEDs should be placed in a location that would be easily accessible to everyone in a building.
- Consider anything that may impede response such as locked areas
- AEDs should be placed in cabinets and brackets according to [ADA regulations](#) [1] [2]
- AEDs should be placed near telephones
- Signs indicating the location of the AED should be placed in conspicuous areas
- Instructions on how to use an AED shall be placed next to an AED with no less than size 14 font. See Appendix E for examples.

Register your AED with local EMS

AED units should be registered to your local EMS. Your AED vendor should be able to help you with this step. You should also register your AED with our Public Safety department for security reasons. Complete form Appendix F and email it to the University AED Program Coordinator.

Current AED Locations

A map of all AED on campus can be found on Appendix G.

Maintenance

All AED equipment and accessories shall be maintained in a state of readiness and per manufacturer guidelines. Department AED Coordinators shall provide the monthly maintenance checks, biannual AED testing, and software updates as required.

AED Self-Maintenance Checks

AED self-maintenance checks are provided internally by the AED. The AED will perform self-tests on a scheduled basis depending on the AED model (daily, weekly or monthly).

Daily Maintenance Checks

Daily maintenance checks can be as simple as checking to see if the “Go” light is green. The “Go” light indicates that the battery is in proper working condition.

Monthly Maintenance Checks

Monthly maintenance checks will be provided by the Department AED Coordinator. Department AED Coordinator shall conduct, document and submit to the AED Program Coordinator a system check including the following elements and form Appendix H:

- AED battery life (in accordance to owner’s manual)
 - Example: Readiness indicators showing pass or fail
 - Batteries that need to be replaced should be done ASAP
 - Call Bob Hitomi for proper disposal of AED batteries
- AED supplies intact
 - 1 pair of adult pads (attached or not, depending on model)
 - 1 spare set of adult pads
 - 1 pair of pediatric pads (optional)
 - Check expiration dates on electrode pads, installed or spares. Replace if expired. Expired pads can be sent to EHS for training purposes.
 - Depending on model, 1 serial communication cable
- Emergency ready kit supplies intact
 - 2 pairs of gloves (large, nitrile)
 - 1 disposable razor
 - 1 pair trauma shears
 - 2 gauze pads
 - 1 antiseptic wipes (not alcohol! It can catch on fire.)
 - 1 pocket mask CPR barrier device

AED Testing

AEDs shall be tested biannually and after each use. Completed the AED Test form (missing appendix, cannot find content) and provide a copy to the AED Program Coordinator.

AED Software Updates

Periodically, manufacturers may release new software updates for your AED. Updates should be performed by the Building AED Coordinator as soon as possible after receiving notification from the manufacturer.

Notification

At least once per year, the Department AED Coordinator shall notify tenants of the building as to the location of the AED unit(s) and provide information to tenants about who they can contact if they want to voluntarily take AED or CPR training. See Appendix I for a sample.

At least once **per** year, the AED Program Coordinator or Training Coordinator shall offer a demonstration to at least the Department AED Coordinator associated with the building so that the person can be walked through how to use their AED properly in an emergency.

Training

Identified University Responders

Although AEDs are made to be simple and ~~be able to be~~ used by a person who is minimally trained, a trained person will understand the “chain of survival” by quickly starting lifesaving procedures.

The AED Program Coordinator will determine the optimal number of employees who will be ‘AED Certified’ and assigned. Division Coordinators will identify those that need to be certified and trained by the Training Coordinator. Those identified will be dubbed ‘University Responders’.

University Responders ~~must shall~~ completed training in the following:

- Adult First Aid/CPR/AED (2 year certification)
- Bloodborne Pathogens Awareness (1 year certification)

University Responders shall be offered Hepatitis B vaccination free of charge.

Individual departments are responsible for ensuring that training records are kept up to date with the Training Coordinator and AED Program Coordinator.

~~Volunteers~~ Training Cost

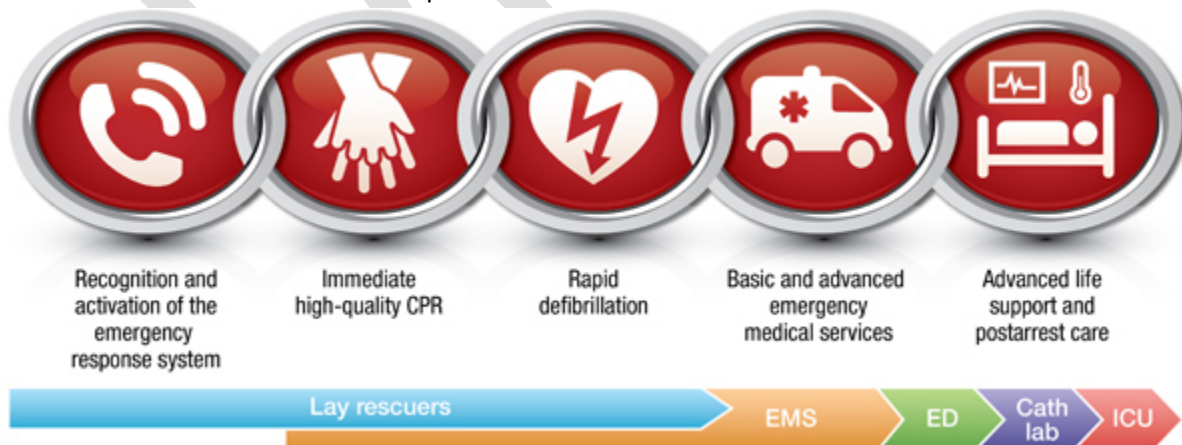
University Responders, staff (including student employees), faculty, and registered volunteers may complete First Aid/CPR/AED training at no cost with the Training Coordinator.

Auxiliary members will be charged a nominal amount to cover the cost of the training materials.

Initial Emergency Response Plan

When responding in an emergency, the responder’s safety comes first.

Start the chain of survival as soon as possible.



Procedures should be posted with the AED in case of an emergency. See Appendix E for examples.

Post Incident Procedures

In the event of an AED activation, the following actions must be taken, even if shock was not administered:

1. AED Incident Report Form (Appendix J) must be completed by the University Responder for each medical event using the AED. The form must be sent to Public Safety and the AED Program Coordinator within 24 hours of the event.
2. An Incidence/Accident Report form (<https://www.csus.edu/aba/ABA-Files-Configs/documents/forms/riskMgmt/2014reportaccidentincidentform.pdf> or Appendix K) must be completed by the University Responder. This form must be sent to Risk Management within 24 hours.
3. If grief counseling is deemed necessary, referrals may be made to professional grief counseling organizations through our Worker's Compensation Manager.
4. Any and all patient information generated during AED use must be collected and placed in a confidential file (Students – Student Health Center, Employees – Workers' Comp/EHS, Others – Risk Management) and stored for at least seven (7) years for students and others, thirty (30) years for incidences caused by work factors.
5. A post incident review shall be conducted.
 - a. Post incident review shall be conducted by the AED Program Coordinator.
 - b. All key participants shall participate in a review that includes:
 - i. Actions that went well
 - ii. Opportunities for improvement
 - iii. Critical incident stress debriefing
 - c. A summary of the post incident review will be sent to Risk Management and EHS for maintenance according to the record retention policy.
6. AEDs contain an internal memory with valuable information regarding the incident. Refer to the owner's manual on how to retrieve the information. The information will be reviewed for quality control and training purposes.

Program Review

Annual review of the AED Program shall be conducted by the AED Program Coordinator and Division Coordinators. Appropriate improvements and updates shall be made at this time.

Resources