

Sample AED Policy

This sample AED policy is intended as an example and is not intended as medical or legal advice. Permission is granted to reproduce this sample AED policy for the purpose of using it as a starting point towards the creation of a formal AED policy. Before preparing and implementing any AED policy, ensure that it fully complies with the directions of your medical advisor, applicable laws, regulations, corporate policies and manufacturer's operating procedures.

An automated external defibrillator (AED) is used to treat victims who experience sudden cardiac arrest (SCA). It is only to be applied to victims who are unconscious, not breathing normally and showing no signs of circulation, such as normal breathing, coughing and movement. The AED will analyze the heart rhythm and advise the operator if a shockable rhythm is detected. If a shockable rhythm is detected, the AED will charge to the appropriate energy level and advise the operator to deliver a shock.

System Owner: Environmental Health and Safety Coordinator

Responsibilities:

- Selection of medical emergency response team (MERT) members and distribution of MERT member lists as required
- Coordination of training for emergency responders
- Coordinating equipment and accessory maintenance
- Revision of this policy as required
- Monitoring the effectiveness of this system
- Communication with medical director on issues related to medical emergency response program including post event reviews

Applicable Documents: (examples)

- General safety and health standard
- County AED guideline
- Medical emergency action plan
- Infection control procedure for occupational exposure to bloodborne pathogens
- State immunity from liability exclusion

Medical Control:

The medical advisor of the AED program is _____, M.D.

The medical advisor of the AED program is responsible for:

- Providing medical direction for use of AEDs
- Writing a prescription for AEDs
- Reviewing and approving guidelines for emergency procedures related to use of AEDs and CPR
- Evaluation of post-event review forms and digital files downloaded from the AED

Authorized AED Users:

- All members of the company's MERT who have successfully completed training
- Any trained team member (volunteer responder) who has successfully completed an approved CPR + AED training program within the last two years and has a current successful course completion card

MERT Member Responsibilities:

- Activating the internal emergency response system and providing prompt basic life support including AED and first aid according to training and experience
- Understanding and complying with the requirements of this policy
- Following the more detailed procedures and guidelines for the MERT

Volunteer Responder Responsibilities:

- Anyone can, at their discretion, provide voluntary assistance to victims of medical emergencies. The extent to which these individuals respond shall be appropriate to their training and experience. These responders are encouraged to contribute to emergency response only to the extent that they are comfortable. The emergency medical response of these individuals may include CPR, AED or medical first aid.

Switchboard Operator Responsibilities

- Receiving emergency medical calls from internal locations
- Using the established 911 checklist to assess the emergency and determine the appropriate level of response
- Contacting the external community 911 response team (EMS) if required
- Deploying the internal MERT members to the location of the emergency
- Assigning team members to meet the responding EMS aid vehicle to direct EMS personnel to the site of the medical emergency

Equipment:

The AED and first aid emergency care kit will be brought to all medical emergencies. The AED should be used on any person who is at least 8 years of age and displays ALL the symptoms of cardiac arrest. The AED will be placed only after the following symptoms are confirmed:

- Victim is unconscious
- Victim is not breathing
- Victim has no pulse and/or shows no signs of circulation such as normal breathing, coughing or movement

Location of AEDs:

- _____
- _____
- _____
- _____
- _____
- _____

Each AED will have one set of defibrillation electrodes connected to the device and one spare set of electrodes with the AED. One resuscitation kit will be connected to the handle of the AED. This kit contains two pair latex-free gloves, one razor, one set of trauma shears, and one facemask barrier device.

Initial Training:

MERT Members:

- Must complete training adequate to provide basic first aid, CPR and AED. Training will be provided on site. AED training course must be one approved by the state department of Health. MERT members will also be trained in universal precautions against bloodborne pathogens. The members of MERT shall be offered hepatitis B vaccination free of charge. The Human Resource Department shall maintain training records for the MERT members.

Volunteer Responders:

- These responders will possess various amounts of training in emergency medical response and their training may be supplied by sources outside of the company. Volunteer responders can assist in emergencies, but must only participate to the extent allowed by their training and experience. Volunteer responders may have training adequate to administer first aid, CPR and use the AEDs deployed throughout the campus. Any volunteer wishing to potentially use one of the AEDs deployed on the campus should have successfully completed a state approved AED course including CPR within the last two years. The company will not maintain training records for the volunteer responders.

Refresher Training:

- MERT members will renew first aid and AED training every two years.
- Each member of the MERT will refresh AED skills using computer-based training. Each MERT member will have access to AED Challenge™ interactive training software on the computer. Every six months each will perform a three-scenario test and submit this test to the Human Resource Department.
- Volunteer responders should obtain documented renewal training at least once every two years. Volunteer responders are encouraged to periodically refresh their AED skills. This can be accomplished through the use of AED Challenge interactive training software. A copy of AED Challenge software has been placed on the computer in the Library (Information Center). All trained volunteer responders are encouraged to practice anytime.

Medical Response Documentation:

Internal Post Event Documentation: It is important to document each use of the medical emergency response system. The following forms shall be sent to the EHS coordinator within 24 hours of a medical event:

- An accident report form shall be completed by a responding MERT member for each accident requiring first aid of any type.
- A member of MERT or volunteer responder shall complete a medical event form (911 Form) whenever medical supply kits or an AED is used.

External Post Event Documentation: Medical emergencies involving the use of an AED require special documentation.

- Any and all patient information generated during AED use must be collected into the patient's confidential medical file.
- A copy of AED use information shall be presented to the medical director of the AED program and the EMS county AED program coordinator within 72 hours of the emergency. At a minimum, event information supplied shall include any recorded data, and all electronic files captured by the AED.

Equipment Maintenance:

All equipment and accessories necessary for support of medical emergency response shall be maintained in a state of readiness. Specific maintenance requirements include:

- The facility phone operator shall be informed of changes in availability of emergency medical response equipment. If equipment is withdrawn from service, the operator shall be informed and then notified when equipment is returned to service.
- The phone operator shall be responsible for informing response teams of changes to availability of emergency medical equipment.
- The environmental health and safety coordinator shall be responsible for having regular equipment maintenance performed. All maintenance tasks shall be performed according to equipment maintenance procedures as outlined in the operating instructions.
- Following use of emergency response equipment, all equipment shall be cleaned and/or decontaminated as required. If contamination includes body fluids, the equipment shall be disinfected according to procedure.

System Verification and Review:

The medical emergency response system is ultimately successful if necessary medical assistance is provided to victims in a timely and safe manner. Since actual use of this system procedure is expected to be very infrequent, other measures of effectiveness are required.

Annual System Assessment:

Once each calendar year, the System Owner or their designee shall conduct and document a system readiness review. This review shall include review of the following elements:

- Training records
- Equipment operation and maintenance records

Monthly System Check:

Once each calendar month, the System Owner or their designee shall conduct and document a system check. These records shall be retained according to the schedule established for the environmental health and safety function. This check shall include review of the following elements:

- Phone operator checklist availability
- Emergency kit supplies
- AED battery life
- AED operation and status

Post Event Review:

Following each deployment of the MERT, or if a volunteer responder uses an AED, a review shall be conducted to learn from the experience. The medical emergency System Owner shall conduct and document the post event review. All key participants in the event shall participate in the review. Included in the review shall be the identification of actions that went well and the collection of opportunities for improvement as well as critical incident stress debriefing. A summary of the post event review shall be sent to the environmental health and safety committee. The environmental health and safety coordinator, according to the record retention policy, shall maintain a copy of the post event review summary.

Approvals

Function	Printed Name	Signature	Date
Medical Director	_____	_____	_____
System Owner	_____	_____	_____



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