

YUBA COLLEGE

2088 North Beale Road
Marysville, CA 95901

Automated External Defibrillator (AED) Policies and Procedures

**YUBA COLLEGE
AED POLICIES AND PROCEDURES
TABLE of CONTENTS**

<u>SECTION TITLE</u>	<u>SECTION NUMBER</u>
Signatures	1.0
Definitions	2.0
Program Coordinator	3.0
Equipment Requirement	4.0
Training Requirements	5.0
AED Protocols	6.0
Quality Assurance (QA)	7.0

APPENDICES

- Appendix A-Phone List
- Appendix B –Equipment Location
- Appendix C- AED Post Incident Report Form
- Appendix D-Equipment Checklist
- Appendix E- Good Samaritan Laws
- Appendix F- Title XXII

YUBA COLLEGE AED POLICIES AND PROCEDURES

SECTION NAME: **Signatures**
DATE: March 4, 2005

SECTION NUMBER: 1.0
PAGE: 1 of 1

Signatures by Dr. Joseph Coulter, Cindy Snelgrove, and Christopher Wilkinson allow these policies and procedures (P&P) to go into effect. These P&P's apply to the utilization of the LIFEPAK CR Plus Automatic External Defibrillator (AED) by Yuba College.

The P&P's will remain binding until a revision is made, upon which all appropriate representatives will sign said revision, or the program is terminated, and the P&P's will be considered null and void. Any deviation from the P&P's may cause the physician to rescind authorization of the program.

The P&P's will be initiated and put into effect starting March 4, 2005 with a revision date of March 4, 2006. An annual review and revision will be conducted if necessary.

Any changes to these P&P's require approval by the Physician Medical Director. Approval requests must be submitted in writing.

Dr. Joseph Coulter, Executive Director Peach Tree Clinic 6000 Lindhurst Ave. 601A Marysville, CA 95901	Date
--	------

Cindy Snelgrove, Health Services Nurse Yuba College 2088 North Beale Road Marysville, CA 95901	Date
--	------

Christopher Wilkinson, Chief of Police Yuba College 2088 North Beale Road Marysville, CA 95901	Date
--	------

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **Definitions**
DATE: March 4, 2005

SECTION NUMBER: 2.0
PAGE: 1 of 1

This section defines terms related to AED P&P's.

Definitions

1. "AED" shall refer to the LIFEPAK CR Plus, an automated external defibrillator capable of cardiac rhythm analysis, which will charge and deliver a shock after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia when applied to an unconscious patient with absent respirations and no signs of circulation. The automated defibrillator requires little user interaction in order to deliver a shock.
2. An "authorized individual" shall refer to an individual, who has successfully completed a defibrillator-training program, has successfully passed the appropriate competency-based written and skills examinations, and maintains competency by participating in periodic reviews. The authorized individual also adheres to P&P's set forth in this document. (Title 22, Article 1, Statute 100032)
3. AED Service Provider means any agency, business, organization or individual who purchases 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 had an AED prescribed by a physician for use on a specifically identified individual. (Title 22, Article 1, Statute 100031)
4. "Prescribing Physician" is a physician licensed in California, who issues a written order for the use of the AED by authorized individuals. (Title 22, Article 1, Statute 100036)
5. "Medical Director" meets the requirement of a prescribing physician and may also be the prescribing physician. The Medical Director ensures that all AED regulatory requirements are implemented. (Title 22, Article 3, Section 100039). Any and all use of the AED, training requirements, P&P reviews, and post event reviews will be under the auspices of the "Medical Director" Joseph Coulter, MD, a licensed physician in California (**license # _____**).

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **Program Coordinator**

SECTION NUMBER: 3.0

DATE: March 4, 2005

PAGE: 1 of 1

At all times, while these P&P's are in effect, Yuba College will maintain a program coordinator. The person is responsible for the overall coordination, implementation, and continued operation of the program.

1. The program coordinator will be available in person or by phone within a reasonable amount of time to answer any questions or concerns of the authorized individuals.
2. The program coordinator shall ensure that all issues related to training, such as scheduling of basic and periodic reviews, maintenance of training standards and authorized individual status, and record keeping is managed on a continuing basis.
3. The program coordinator will assure that all equipment stock levels are maintained and/or ordered as stipulated in "Equipment Requirement" and readiness checks and record maintenance are done in accordance with Title XXII requirements and manufacturer's recommendations.
4. If the program coordinator needs to have a quality assurance issue addressed, she may contact the Medical Director or Chief of Police.
5. The program coordinator will have a list of the appropriate telephone numbers in compliance with above paragraphs, number 1 and 4. (Appendix A). If any contact information changes, the program coordinator will be notified verbally and in writing within 72 hours.
6. The program coordinator shall notify the local EMS agency of the existence, location and type of AED(s) at the Yuba College campuses.
7. The program coordinator at the inception of these P&P's is Cindy Snelgrove.

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **Equipment Requirement**

SECTION NUMBER: 4.0

DATE: March 4, 2005

PAGE: 1 of 1

The type and amount of AED equipment will be maintained as outlined below as equipment is used or exceeds the expiration date. The program coordinator will assure replacements are ordered as soon as possible. Equipment is located as shown in Appendix B.

The following stock levels and expiration dates will be checked every month and maintained as follows:

Item Description		Quantity
	AED	1
	Carrying Case with Quick Reference Card	1 per AED
	Defibrillator Pads	2 sets/AED
	Battery Pack	1 per AED plus 1 replacement
	Data Card	1 per AED plus 1 replacement

Equipment readiness will be checked at least monthly and after every use. Records will be maintained using the Automatic External Defibrillator Operator's Check List in Appendix D.

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **Training Requirements**

SECTION NUMBER: 5.0

DATE: March 4, 2005

PAGE: 1 of 2

Training requirements will consist of not less than four hours and will comply with the American Heart Association (AHA) or American Red Cross (ARC) standards. The required hours for an AED training program can be reduced by no more than two hours for students who can show they have been certified in a basic CPR course in the past year and demonstrate that they are proficient in the current techniques of CPR. (Title 22, Article 3, Statute 100038)

1. The full four-hour course will include the following topics and skills:
 - a. Basic CPR skills
 - b. Proper use, maintenance, and periodic inspection of the AED
 - c. The importance of CPR, defibrillation, advanced life support, adequate airway care, and internal emergency response system
 - d. How to recognize the warning signs of heart attack and stroke
 - e. Overview of the local EMS system, including 9-1-1 access, and interaction with EMS
 - f. Assessment of an unconscious patient to include evaluation of airway, breathing, and circulation, to determine if cardiac arrest has occurred and the appropriateness of applying and activation of AED.
 - g. Information relating to defibrillator safety precautions to enable the individual to administer shocks without jeopardizing the safety of the patient or the authorized individual or other nearby persons to include, but not limited to:
 - 1) Age and weight restrictions for the use of the AED
 - 2) Presence of water or liquid on or around the victim
 - 3) Presence of transdermal medications, implanted pacemakers or automatic implanted cardioverter-defibrillators
 - h. Recognition that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged
 - i. Rapid, accurate assessment of the patient's post-shock status to determine if further activation of the AED is necessary
 - j. Authorized individuals responsibility for continuation of care, such as the repeated shocks if necessary, and/or accompaniment to the hospital, if indicated, or until the arrival of professional medical personnel
2. All successful participants will receive an AED course completion card.

YUBA COLLEGE AED POLICIES AND PROCEDURES

SECTION NAME: **Training Requirements (Cont.)**

SECTION NUMBER: 5.0

DATE: March 4, 2005

PAGE: 2 of 2

3. The required text will meet the standards of the AHA or ARC, although it does not have to be the AHA or ARC text.
4. Basic and review sessions will be conducted according to the following schedule:
 - a) CPR/AED renewal will be conducted at least every other year.
 - b) Periodic reviews will be at the discretion of the Medical Director, with a one-year minimum. The program coordinator may schedule reviews more often if deemed necessary.
5. Training records will be maintained by the Yuba College Health Center and will include documentation of defibrillation skills proficiency.

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **AED Protocols**

SECTION NUMBER: 6.0

DATE: March 4, 2005

PAGE: 1 of 3

In order to be eligible to use an AED on an appropriate patient, the individual will:

1. Meet the training requirements set forth in these policy and procedures.
2. Pass competency-based written and skills recognition examinations.
3. Comply with the requirements set forth in these policies and procedures. Failure to comply with these requirements will result in the suspension of the individual's authorization.
5. The authorization period for a trained responder will stay in effect as long as he/she adheres to the program guidelines.
6. Authorization will be rescinded in the event of termination of the individual's association with Yuba College.

While Bill AB2041 allows AED to be applied to patients by individuals who have not been trained in CPR and AED, the law also requires organizations with AED's to have authorized individuals.

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **AED Protocols (Cont.)**

SECTION NUMBER: 6.0

DATE: March 4, 2005

PAGE: 2 of 3

Internal Emergency Response System

First person on the scene:

1. Will initiate the Chain of Survival, by calling 911 from a land-line. If the Police Department is open, call x-6771 and then if the Health Center is open, call x-6818 for a joint response. The AED Program Coordinator's scope of practice as a Registered Nurse supercedes other authorized responders in addition to EMS students until EMS arrives.

Initial protocol for the unconscious victim is as follows:

1. Upon arrival, assess the scene safety; use universal precautions
2. Assess patient for unresponsiveness
3. Assess breathing
4. Assess signs of circulation
5. Perform CPR until AED arrives

Begin AED treatment:

1. Turn on AED and follow the prompts.
2. Dry shave chest with disposable razor if indicated. Discard razor in a safe manner. Wipe chest dry if it is wet.
3. Apply defibrillation pads. Make sure the AED pads are placed in the proper location and that they make good skin contact with the chest. Do not place AED pads over the nipple, medication patches or implanted devices.
4. Deliver a shock to the patient when advised by the AED after first clearing the patient area. Administer additional shocks as prompted by the AED until the AED advises no shock be administered or a series of three consecutive shocks have been delivered.
5. When advised by the AED, check the patient's airway, breathing and signs of circulation, and initiate CPR if signs are absent.
6. Continue to follow AED prompts and perform CPR until EMS takes over.

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **AED Protocols (Cont.)**

SECTION NUMBER: 6.0

DATE: March 4, 2005

PAGE: 3 of 3

When EMS Arrives:

1. Authorized individual working on the patient should document and communicate important information to the EMS provider such as:
 - a. Patient's name
 - b. Time patient was found
 - c. Initial and current condition of the victim

2. Assist as requested by EMS personnel

Post-use Procedure:

1. Complete documentation of the sudden cardiac arrest event no more than 24 hours following the event.
2. Give copies of all documentation to the program coordinator.
3. Coordinator will insure that documentation is sent to the Medical Director within one week of the event.

Equipment Maintenance:

1. Inspect the exterior and connector for dirt or contamination.
2. Check supplies, accessories and spares for expiration dates and damage.
3. Check operation of the AED by removing and reinstalling the battery and running a battery insertion test.

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **Quality Assurance**

SECTION NUMBER: 7.0

DATE: March 4, 2005

PAGE: 1 of 2

After AED use, the following quality assurance procedures will be utilized.

1. The program coordinator shall be notified within 24 hours. Quality assurance shall be maintained by way of retrospective evaluation of the medical care rendered by the authorized individuals on the scene and during transfer of the patient to the appropriate transporting agency personnel.
2. If grief counseling is deemed necessary, referrals may be made to professional grief counseling organizations.
3. In addition to information obtained from the AED, documentation of the incident shall be completed as follows:
 - a. Documentation shall be initiated whether or not defibrillatory shocks were delivered.
 - b. The following information shall be provided if known: (AED Post Incident Report, Appendix C)
 - 1) Date
 - 2) Event location
 - 3) Person's name
 - 4) Person's address
 - 5) Person's telephone number
 - 6) Person's sex
 - 7) Estimated time elapsed from person's collapse until initiation of CPR, if witnessed or heard
 - 8) Total minutes of CPR prior to application of defibrillator
 - 9) Other treatment rendered in addition to CPR and defibrillation
 - 10) Person's response to treatment rendered, i.e., regained pulse and breathing
 - 11) Name of transporting agency
 - 12) Name of authorized individual completing the report

YUBA COLLEGE

AED POLICIES AND PROCEDURES

SECTION NAME: **Quality Assurance (Cont.)**

SECTION NUMBER: 7.0

DATE: March 4, 2005

PAGE: 2 of 2

4. The AED Post Incident Report is to be sent to the medical director by the program coordinator.
5. The medical director, program coordinator, and chief of police will review the AED record of the event and the AED Post Incident Report. The program coordinator and chief of police will interview the authorized individuals involved in the emergency to ensure that:
 - a. The authorized individuals quickly and effectively set up the necessary equipment.
 - b. When indicated, the initial defibrillatory shock(s) was delivered within an appropriate amount of time given the particular circumstances.
 - c. Adequate basic life support measures were maintained.
 - d. Following each shock or set of shocks, as appropriate, the person was assessed accurately and treated appropriately.
 - e. The defibrillator was activated safely and correctly.
 - f. The care provided was in compliance with the internal emergency response guidelines set forth in Section 6.0 of this document.
6. The program coordinator will report findings to the medical director. The medical director, program coordinator, and chief of police will determine the occurrence and the range of action to be taken in response to identified problems or deficiencies, if any, as well as actions to be commended.
7. Following the post incident review, a copy of all written documentation concerning the incident will be sent to the program coordinator and maintained on site for a period of not less than seven (7) years from the incident date.

APPENDIX A:

Yuba College

CONTACT PHONE LIST

For information and assistance regarding the AED program, the individuals listed below may be contacted. Every effort should be made to first contact the program coordinator. Only in a case of an emergency event or when the program coordinator cannot be reached, will contact be made with the medical director and/or chief of police. If any contact information changes, the program coordinator will be notified within 72 hours.

PROGRAM COORDINATOR

Cindy Snelgrove, RN
Yuba College
Phone: (530) 741-6818
Cell:
Home:
Fax: (530) 741-6867
Email: csnelgro@yccd.edu

CHIEF OF POLICE

Christopher Wilkinson
Yuba College
Phone: (530) 741-6771
Cell:
Fax:
Email: cwilkins@yccd.edu

MEDICAL DIRECTOR

Joseph Coulter, MD
Peach Tree Clinic
Phone:
Cell:
Fax:

APPENDIX B: EQUIPMENT LOCATION

1. One AED and associated equipment will be located in the Health Center at the Marysville campus at Yuba College.
2. The other AED and associated equipment will be located in the Gymnasium area.

APPENDIX C: AED POST INCIDENT REPORT

Patient's last name	Patient's first name	Patient's address	
Phone number ()	City	State	Zip
SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female	Incident Date:	AED operator:	
Incident date:		Assistant:	
Location:		Assistant:	
Estimated time from patient's collapse until CPR begun:		Estimated total time of CPR until application of AED	
Was cardiac arrest witnessed? Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>	By whom:	Time:	
Was CPR started? Yes <input type="checkbox"/> No <input type="checkbox"/>	By whom:	Time:	
Did the patient ever regain a pulse?	Time:	Did the patient begin breathing?	Time:
Did Patient ever regain consciousness?	Time:	Hospital patient taken to:	Time:
Other treatment:		Transporting agency:	

Communications: _____

Comment/concerns: _____

Report completed
 by: _____ Date: _____

Prescribing physician
 Review/recommendations _____

COORDINATOR REVIEWED:	DATE:	REVIEWED WITH RESPONDERS:	DATE:
PHYSICIAN REVIEWED:	DATE:	COMMENTS:	

APPENDIX D: AUTOMATIC EXTERNAL DEFIBRILLATOR OPERATOR'S CHECK LIST

Unit serial number _____
Location _____

DATE	Recommended Corrective Action																		
SUPPLIES AVAILABLE a. Two sets of defibrillation pads, sealed, within expiration date, and undamaged b. Ancillary supplies: towel, razor, shears, gloves, and barrier pack c. Infant/Child defib pads	Replenish as needed																		
STATUS INDICATOR a. OK indicator b. c. Charge –Pak indicator d. Attention indicator e. Wrench indicator	None Replace Charge-Pak and Quik-Pak electrode packet Refer to operating instructions Contact authorized service personnel																		
LIFEPAK CR Plus UNIT a. Clean, no dirt or contamination b. No damage or cracks present	Clean device if foreign substances present Contact authorized service personnel																		
INSPECTED BY:																			

REMARKS, PROBLEMS, CORRECTIVE ACTION

APPENDIX E:

GOOD SEMARITIN LAWS

Good Samaritan laws were developed to help protect rescuers from being successfully sued in tort (i.e. for wrongdoing) for voluntarily helping a distressed victim. The laws were also designed to encourage people to help a stranger who needs assistance by reducing or eliminating the fear that, if they do so, they will suffer possible legal repercussions in the event that they inadvertently make a mistake in treating the victim.

Existing law provides any person who, in good faith, renders emergency medical care or assistance to an injured person at the scene of an accident or other emergency without the expectation of receiving or intending to receive compensation from such injured person for such service, shall not be liable in civil damages for any act or omission, not constituting gross negligence, in the course of such care or assistance.

The statutes listed below are used for assessing the liability of persons rendering emergency medical care in California:

Cal. Health and Safety Code §1317 (1973)

Cal. Civ. §1714-21 (West 2000)(AED Immunity)

Cal. Health & Safety §1797.190 (West 2000)(Requirements for owners of AED, penalties for violators)

Calif. Bus & Prof. Code § (West 2000)(Gen. Stat.)

These Statues:

- Provide immunity for rescuers
- Provide immunity for acquirers and enablers of AED
- Encourages/requires CPR & AED training to AHA or ARC standards

APPENDIX F:

TITLE XXII

TITLE 22 - SOCIAL SECURITY TRAINING STANDARDS FOR USE OF THE AUTOMATED EXTERNAL DEFIBRILLATOR BY NON-LICENSED OR NON- CERTIFIED PERSONNEL

California Code of Regulations - Chapter 1.8 Division 9. Prehospital Emergency Medical Services

ARTICLE 1 - DEFINITIONS

§100031 - AED Service Provider

"AED Service Provider" means any agency, business, organization or individual who purchases 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 by a physician for use on a specifically identified individual. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§100032 - Authorized Individual

"Authorized individual" means any person, not otherwise licensed or certified to use the automated external defibrillator, who has met the training standards of this chapter, and has been issued a prescription for use of an automated external defibrillator on a patient not specifically identified at the time the physician's prescription is given. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5 and 1797.190, Health and Safety Code, Section 1714.21, Civil Code.

§100033 - Automated External Defibrillator

"Automated external defibrillator" or "AED" means an external defibrillator that after user activation is capable of cardiac rhythm analysis and will charge and deliver a shock, either automatically or by user interaction, after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§100034 - Cardiopulmonary Resuscitation

"Cardiopulmonary resuscitation" or "CPR" means a basic emergency procedure for life support, consisting of artificial respiration, manual external cardiac massage, and maneuvers for relief of foreign body airway obstruction. Note: Authority cited: Sections

1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§100035 - Internal Emergency Response System

"Internal Emergency Response System" means a plan of action which utilizes responders within a facility to activate the "9-1-1" emergency system, and which provides for the access, coordination, and management of immediate medical care to seriously ill or injured individuals. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§100036 - Prescribing Physician

"Prescribing physician" means a physician and surgeon, licensed in California, who issues a written order for the use of the automated external defibrillator to authorized individual(s). Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

ARTICLE 2 - GENERAL - TRAINING PROVISIONS

§100037 - Application and Scope

- a. Any physician and surgeon licensed in California may authorize an individual to apply and operate an AED on an unconscious person who has no signs of circulation only if that authorized individual has been successfully trained according to the standards prescribed by this chapter.
- b. The training standards prescribed by this chapter shall not apply to licensed, certified or other prehospital emergency medical care personnel as defined by Section 1797.189 of the Health and Safety Code. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.189, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

ARTICLE 3 - TRAINING STANDARDS

§100038 - Required Hours and Topics

- a. The AED training component shall comply with the American Heart Association or American Red Cross standards. The course shall consist of not less than four hours, which shall include the following topics and skills:
 1. basic CPR skills
 2. proper use, maintenance and periodic inspection of the AED;
 3. the importance of: (A) CPR, (B) defibrillation, (C) advanced life support, (D) adequate airway care, and (E) internal emergency response system, if applicable;
 4. overview of the local EMS system, including 9-1-1 access, and interaction with EMS personnel;

5. assessment of an unconscious patient, to include evaluation of airway, breathing and circulation, to determine if cardiac arrest has occurred and the appropriateness of applying and activating an AED;
6. information relating to defibrillator safety precautions to enable the individual to administer shock without jeopardizing the safety of the patient or the authorized individual or other nearby persons to include, but not be limited to; (A) age and weight restrictions for use of the AED, (B) presence of water or liquid on or around the victim, (C) presence of transdermal medications, and (D) implantable pacemakers or automatic implantable cardioverter-defibrillators;
7. recognition that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged;
8. rapid, accurate assessment of the patient's post-shock status to determine if further activation of the AED is necessary; and,
9. authorized individual's responsibility for continuation of care, such as the repeated shocks if necessary, and/or accompaniment to the hospital, if indicated, or until the arrival of more medically qualified personnel. (b) The required hours for an AED training program can be reduced by no more than two hours for students who can show they have been certified in a basic CPR course in the past year and demonstrate to a qualified CPR instructor that they are proficient in the current techniques of CPR. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§100039 - Medical Director Requirements

Any AED training course for non-licensed or non-certified personnel shall have a physician medical director who: (a) Meets the qualifications of a prescribing physician. (b) 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. (c) Shall ensure that all courses meet the requirements of this chapter. (d) May also serve as the "prescribing physician." Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§100040 - Testing

In order for an individual to be authorized to use the AED, the individual shall pass a written and skills examination, which tests the ability to assess and manage the specified conditions prescribed in Section 100038. February 12, 2003 Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. 1 Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. 2 Section 1714.21, Civil Code.

§100041 - Written Validation

The prescribing physician shall issue to the authorized individual a written validation or other documented proof of the authorized individual's ability to use an AED. The

requirements for a "Written Validation" and "Prescription for Use" can both be satisfied by the issuance of a written certification card from an AED training program. The prescribing physician's signature shall be on file with the AED training program authorizing the issuance of the written certification card upon successful completion of the required training. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

ARTICLE 4 - OPERATIONAL AED SERVICE PROVIDER/VENDOR
REQUIREMENTS

§100042 - Operational Requirements

- a. 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 this Chapter.
 2. Notification of the local EMS agency of the existence, location and type of AED at the time it is acquired.
 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 this chapter 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.
 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. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.

§100043 - AED Vendor Requirements

Any AED vendor who sells an AED to an AED Service Provider shall notify the AED Service Provider, at the time of purchase, both orally and in writing of the AED Service Provider's responsibility to comply with the regulations contained in this Chapter. Note: Authority cited: Sections 1797.107 and 1797.190, Health and Safety Code. Reference: Sections 1797.5, 1797.190, and 1797.196, Health and Safety Code. Section 1714.21, Civil Code.