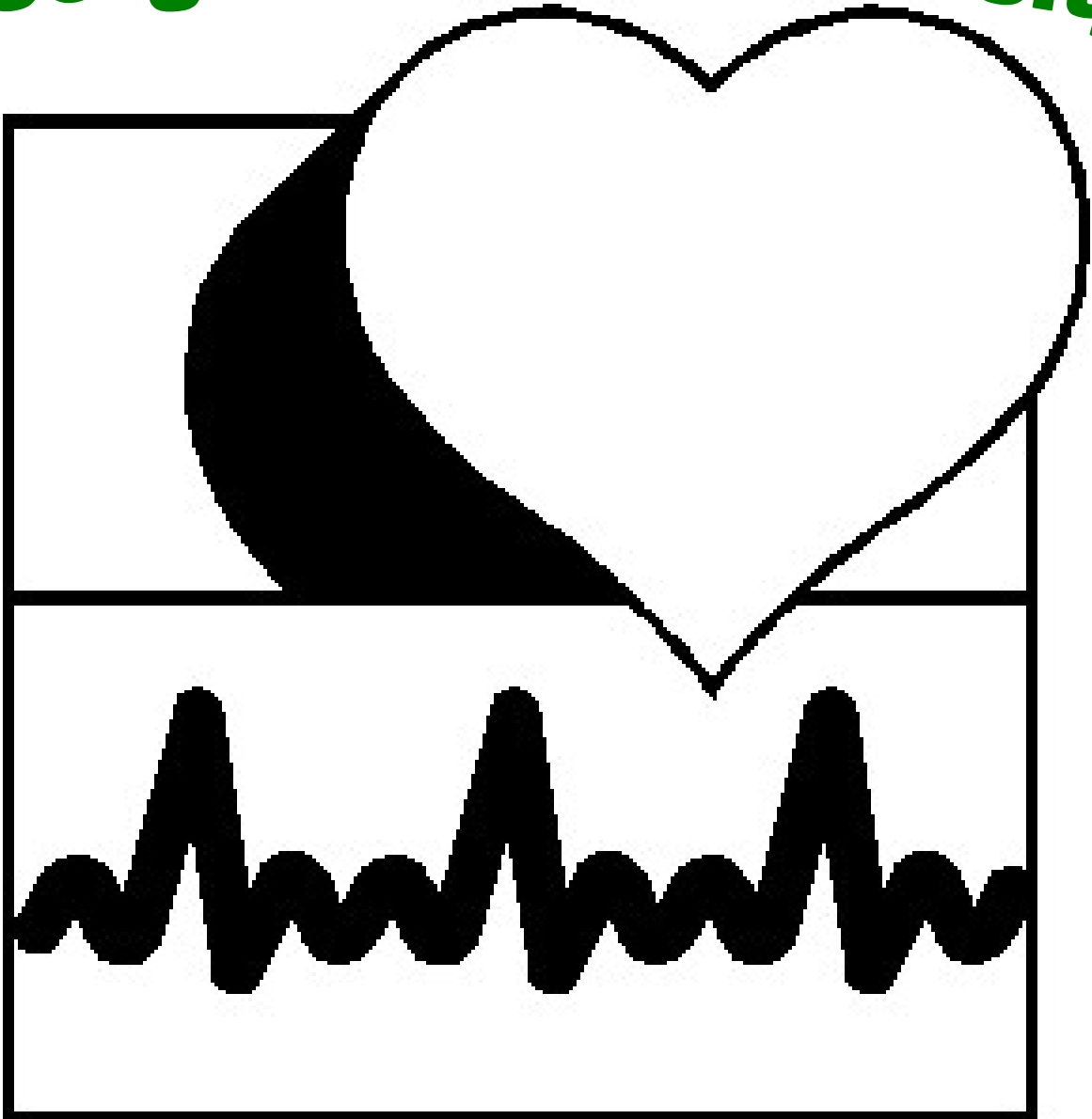


George Mason University



PUBLIC ACCESS DEFIBRILLATION (PAD) PROGRAM

UPDATED: JULY 2007

Table of Contents

Section	Subject	Page
I	General	1
II	Purpose	1
III	Responsible Parties Service Medical Director (SMD) Public Access Defibrillator (PAD) Program Manager Site Coordinator (SC) Public Access Defibrillator (PAD) Program Participants	1
IV	Reporting, Record Keeping & Care of Equipment Reporting and Record Keeping	4

Appendix

- A. Public Access Defibrillator Protocols
- B. Site Coordinator Training Form
- C. PAD Safety Inspection Record
- D. Instructions for Completing PAD Inspection Record
- E. Mason PAD Summary Incident Report

I. GENERAL

Sudden cardiac arrest (SCA) is a major cause of death in the United States with an estimated 220,000 lives lost each year. Abnormal heart rhythms cause most sudden cardiac arrests. When the heart rhythm becomes chaotic, often without warning, the heart will stop abruptly. Death usually follows unless a normal heart rhythm is restored within 5-7 minutes. The American Heart Association states that survival from SCA depends directly on the speed in administering a defibrillation shock in an attempt to restore normal heart functioning. Every minute in delay reduces the chance of recovery by 7 – 10%.

II. PURPOSE

The Public Access Defibrillator (PAD) Program is an integral part of George Mason University's commitment to the safety and health of employees, students and visitors. The purpose of this program is to provide public access to defibrillators for use in the event of a cardiac emergency. This document establishes protocols for training, use and maintenance of Automated External Defibrillators (AED) located on campuses of George Mason University.

III. RESPONSIBLE PARTIES

A. Service Medical Director (SMD)

Qualifications:

The SMD must be licensed in the Commonwealth of Virginia to practice medicine without restrictions and possess current knowledge of first-responder training in the use of automatic external defibrillators (AED). The SMD must also be familiar with operations of the Northern Virginia Emergency Medical System.

Responsibilities:

The SMD provides medical direction for the operation of AEDs at George Mason University, and promotes the following requirements of the PAD program:

- All PAD Managers and Site Coordinators must meet the training requirements of the American Heart Association (AHA) or other nationally recognized organization. Mason employees are encouraged to receive training on how to use cardiopulmonary resuscitation (CPR) and automated external defibrillators (AED), with the goal of acquiring the skills and confidence to respond to emergencies on the Mason campuses.
- Oversee the PAD quality assurance program
- Review the incident report and electronic rescue data of each incident where an AED was used on an arrest victim
- Immediately notify the PAD Manager of any changes in the status of the SMD

B. PAD Manager: The Risk Management Office manages the Mason PAD Program.

Qualifications:

The PAD Manager must be certified as an EMS provider, healthcare provider or have successfully completed a CPR/AED training course provided by an approved training program.

Responsibilities:

The PAD Manager is responsible for implementing and administering the Mason PAD Program. The duties for this position include:

- Providing orientation on the operation, maintenance and location of authorized AED's on Mason campuses, which must be provided as part of the University sponsored CPR/AED training program
- Implement a quality assurance and maintenance program for on site AED's
- Provide written operational policies and procedures regarding the operation and maintenance of AEDs, as well as, provide annual review of all policies and procedures
- Ensure that the electronic rescue data is downloaded within 24 hours of an incident where an AED was used on an arrest victim, and that all required reports and maintenance performed on equipment is completed within 48 hours of the incident
- Ensure that all AED operators adhere to the standards of training and usage established in this document
- Initiate required servicing of equipment by the manufacturer as needed and/or required by the Federal Drug Administration and return AEDs and/or components to assigned sites upon completion of servicing
- Act as the University's lead official(s) when dealing with external organizations
- Perform semi-annually inspection of all AED's in the Mason PAD Program and maintain inspection records.

C. Site Coordinators (SC): The Arlington and Prince William campuses each have one designated SC. The Fairfax campus has SC's designated by buildings in which they occupy.

Qualifications:

A SC must be certified as an EMS provider, healthcare provider or successfully complete an AED/CPR training course provided by an approved training program. A SC must also, maintain an active certification in the use of CPR/AED through either the AHA or other nationally recognized organization.

Responsibilities:

- Designate a properly trained individual to act in their absence
- Ensure that a properly trained individual performs weekly inspections of the department or facility AED in accordance with manufacturer's procedures
- Keep all storage areas, equipment and related supplies clean and sanitary
- Ensure that emergency response supplies are available for each defibrillator in service
- Ensure a completed *PAD Safety Inspection Record* is forwarded to the PAD Manager quarterly
- Ensure that the following occur when an AED is used on a victim: the AED and all required paperwork is returned to the PAD Manager for equipment servicing/replenishment and paperwork review/submission within 24 hours
- Ensure that the department or facility AED, and all related equipment is properly maintained

D. PAD Participants

Qualifications:

- Must be 18 years or older
- Must receive training on CPR and AED use, to acquire the skills and confidence to respond to emergencies on the Mason campuses. CPR/AED training should conform to the standards of the AHA or other nationally recognized training organization

Responsibilities:

Participants who utilize an AED on campus must notify the PAD Manager as soon as possible after using an AED. A completed *AED Incident Report* (see Appendix D) must be submitted to the PAD Manager within 24 hours of the incident. An *AED Incident Report* is located in the "Emergency Kit" provided in the AED case.

IV. REPORTING, RECORD KEEPING & CARE OF EQUIPMENT

A. Reporting and Record Keeping

The PAD Managers will maintain all documentation for equipment maintenance, repairs, inspections, usage, incident forms, and qualified users for a minimum of five years.

Documentation includes:

- Maintenance and safety inspection records for each AED deployed

- Original copy of each Summary Incident Reports form completed after an AED is used on a victim
- All information of AED usage, including medical records and/or emergency response treatment. This documentation will be stored in accordance with local, regional and federal standards for storing confidential medical information
- Training records of those employees certified as a CPR/AED provider (to include documentation of training, qualifications and evidence of certification)

In cases where batteries are low and need to be replaced, please contact the PAD Manager, 3-2599. Batteries that are no longer in use should be sent back, via interoffice, to the PAD Manager for proper disposal.

B. Care of Equipment

AEDs located at Mason are assigned to University departments as equipment under that department's inventory. Departments are responsible for safeguarding and maintaining the AED(s) and all associated equipment in accordance with this policy, as well as other University and Commonwealth of Virginia regulations pertaining to property.

The department is responsible for completing all required documents on use, maintenance, and loss or damage to the AED. In addition, in the event of the loss of or damage to an AED and/or its associated equipment, the department must notify the PAD Manager at (703)993-2599. The PAD Manager will provide guidance to the department on filing for reimbursement under the state's insurance program if appropriate. However, if the damage or loss was caused by neglect or misuse by an agent of the department, the department may be held responsible for the \$1000 deductible associated with the claims process. If the AED was lost or damaged due to no fault of the department, the deductible will be paid from central funds. In the event that a department fails to properly maintain the AED(s) under their care or notify a PAD Manager in accordance with this policy, the AED may be removed from their care.

C. Equipment Sanitation and Biohazard Waste Disposal Responsibilities

The PAD Manager:

- Ensures that an adequate number of biohazard bags are available in the AED "Emergency Kits"
- Decontaminates all equipment that may have been exposed to potentially infectious materials. The Center for Disease Control recommends using a 10% solution of bleach (1 part fresh bleach to 9 parts water) or other disinfectant solution to clean all exterior surfaces and reusable items

PUBLIC ACCESS DEFIBRILLATOR PROTOCOLS

1. Check Scene: Is the scene free of hazards? The rescuer makes sure there are no hazards such as:
 - Electrical dangers (downed power lines, electrical cords, etc.)
 - Chemical hazards such as gases, liquids, solids or fumes
 - Harmful people (anyone that could potentially harm a person)
 - Traffic (make sure no one at the scene is in the path of traffic)
 - Fire or flammable gases (medical oxygen, cooking gas, etc.)
2. Rescuer(s) determine that the victim is:
 - Unresponsive
 - Not breathing
 - Without a pulse
3. If the victim is non-responsive, immediately activate EMS (Call 9-1-1) and call for the AED:
 - Immediately begin CPR until AED arrives.
4. Retrieve AED
 - Turn AED on (by pulling handle labeled "PULL" or pressing the green power button)
 - Stop CPR
 - **Follow voice prompts**
 - **Remain Clear of Victim while AED analyzes heart rhythm.** Remember that the AED will not advise to defibrillate all pulse-less patients. (Some cardiac rhythms do not respond to defibrillation)
 - If advised by AED prompt, the rescuer continues CPR for two minutes/5 cycles until AED voice prompt says:

"Do not touch patient. Analyzing rhythm." If the cardiac rhythm is shockable, the AED will guide the rescuer through a defibrillation sequence, followed by two minutes/5 cycles of CPR.

This sequence continues until:
No shockable rhythm is detected or,
EMS personnel arrive on the scene.

Notes:

1. AED should only be used on an adults or children eight (8) years of age or older and greater than 90 lbs.
2. Remove any medicine patches and any residual adhesive before applying the pads.
3. Implantable pacemakers (pacemakers may interfere with rhythm analysis; do not place electrodes directly over pacemaker, they should be place one hand width away).
4. If at some point during the rescue the patient converts to a heart rhythm that does not require defibrillation, follow instructions from voice prompt.
5. If a pulse is found on the patient and the patient is not breathing, continue rescue breathing, leave electrodes in place and follow voice prompts.

6. If the patient regains consciousness, make them as comfortable as possible until EMS personnel arrive on the scene.
7. Advise Mason Police to contact the PAD Manager of AED use so that appropriate action and paperwork is initiated.
8. Return AED and completed documentation to the PAD Manager within 24 hours for data download and equipment repair/replenishment.
9. DO NOT REMOVE PADS UNLESS DIRECTED BY EMS PERSONNEL.

AED/PAD Site Coordinator Training Form

Complete and maintain form for all PAD Site Coordinators

Operator Name _____

Title _____

AED Training Program _____

Date Completed _____

Dates of Refresher Training _____

CPR Training Program _____

Date Completed _____

Refresher Training _____

Site _____

Signature of Operator _____

Signature of Instructor _____

Signature of PAD Manager _____

Attach copy of certification

PAD Safety Inspection Record

To be submitted quarterly to PAD Manager by fax (3-2339) or interoffice mail (MSN 5E2).

AED Serial Number _____ AED Location _____

Pad Expires _____ Battery Expires _____ Cabinet Key _____

Week of	Inspectors Initials	Case Intact Y or N	Battery Charged Y or N	Pads Expired Y or N	Emergency Kit Complete Y or N

Week of	Inspectors Initials	Case Intact Y or N	Battery Charged Y or N	Pads Expired Y or N	Emergency Kit Complete Y or N

Week of	Inspectors Initials	Case Intact Y or N	Battery Charged Y or N	Pads Expired Y or N	Emergency Kit Complete Y or N

Inspection Quarterly Schedule:
January – March
April – June
July – September
October - December

Instructions for completing PAD Weekly Inspection Record

The unit should be inspected weekly.

Enter the date the unit was inspected.

Inspectors' initials: Enter the inspector's legible initials. Only trained individuals may perform the daily inspection.

Storage case intact: Yes or No entry. Check to see if the storage case (either soft flexible or wall-mounted) is present, serviceable and undamaged. If all ok, enter "yes", if "no"; immediately contact the PAD Manager (3-2599) to report deficiency; and explain problem on back of form.

Battery charged; Yes or No entry. Check to see if the status indicator, above the green power button, is "green" If the indicator is "red"; the unit is NOT ready for a rescue and should be immediately pulled from service. Notify the PAD Manager (3-2599) immediately for repair.

Pads Expired: Yes or No entry. Check to see if the expiration date of the pads (electrodes) has been exceeded. Pads are to be replaced within 30 days. Contact the PAD Manager (3-2599) for replacement pads.

All equipment in carrying case: Yes or No entry. Are all required items serviceable and in case? If everything present, enter "yes", if "no", immediately contact the PAD Manager (3-2599) to report deficiency and explain problem on back of form.

Contents of Emergency Kit:

- 2 Defibrillator chest pads
- 2 disposable facemasks
- 4 pair of disposable gloves, LG and XLG
- 2 Safety razors
- 1 Absorbent towel or trauma pad
- 1 pair of scissors
- 2 zip lock bags
- 1 marking pen
- Pad & pencil
- Waterless antibacterial cleansing gel
- 1 small biohazard bag
- AED Summary Incident Report

All kits should be labeled with the following:

NOTICE: IN CASE OF AED MALFUNCTION AND/OR AFTER USE NOTIFY THE FOLLOWING:

PAD Manager: 3-2599

**GEORGE MASON UNIVERSITY
PAD SUMMARY INCIDENT REPORT
CONFIDENTIAL**

Agency: George Mason University Campus: _____

Incident Location: _____

Date of Incident: _____ Estimated Time of Incident: _____

Time 911 call was placed: _____

Name of Patient: _____

Gender: Male Female Estimated age of patient: _____

Did patient collapse and become unresponsive? Yes No

What events preceded the collapse?

Difficulty breathing	<input type="checkbox"/>	Chest pain	<input type="checkbox"/>
No signs or symptoms	<input type="checkbox"/>	Electrical Shock	<input type="checkbox"/>
Injury	<input type="checkbox"/>	Unknown	<input type="checkbox"/>

Was there a witness to the incident? Yes No

If yes: Name: _____ Phone # _____

Patient Assessment before placement of AED pads:

Breathing	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Signs of Circulation (pulse, movement, coughing)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Was CPR administered before facility AED and/or EMS arrival? Yes No

If yes: Estimated time CPR started: _____

Was AED brought to scene before EMS arrival? Yes No

If no why: _____

Was facility AED used?

Pads placed on patient	Yes <input type="checkbox"/>	No <input type="checkbox"/>
AED turned on	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Shock advised	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Estimated time of EMS arrival: _____

Name of person operating Facility AED: _____

GMU trained? Yes No

Was there a mechanical difficulty with the AED? Yes No

If yes, complete FDA MEDWATCH FORM 3500A as required by law.

Was patient transported to hospital? Yes No

Time of Transport: _____

What was patient outcome: _____