

MANHEIM CENTRAL SCHOOL DISTRICT

AED Policy and Procedure

The following document prescribes the policies, procedures, and medical protocols governed by the Manheim Central School District for the purposes of the automated external defibrillator (AED) program. It is the goal of this program to assist in improving the quality of life for the employees, students, and guests of the Manheim Central School District. It is the intent of this document to give the AED Response Team Members general guidance in response to an incident of sudden cardiac arrest (SCA). This document is not intended to cover all circumstances involved in such emergencies. The appropriate officers listed on this signature page must approve any deviations from its guidelines. The Manheim Central School District and its Medical Directors have approved all protocols for the early defibrillation program. All protocol guidelines fall within the parameters set forth by the American Heart Association, American Red Cross, American Safety and Health Institute, and EMS Safety Service, Inc. In order to meet national standards, the Medical Directors, AED Coordinators, and Superintendent will conduct annual review and revision of this document for content and guideline modifications.

This early defibrillation program document has been approved for use by the AED Response Team for the purposes described within its guidelines. The policies and procedures described in this document will be in effect from the signed date until one year following the signed date, or until the Manheim Central School District and/or the early defibrillation program administrators make further review and changes.

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Medical Director	Date
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Medical Director	Date
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AED Coordinator	Date
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AED Coordinator	Date
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AED Coordinator	Date
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AED Coordinator for After School Sports Activities	Date
_____	_____
Superintendent	Date

The purpose of this document is to establish a consistent guideline for application, location, maintenance, and various other components described herein involving the Manheim Central School District early defibrillation program. It is the intent of the Manheim Central School District to provide the appropriate AED coverage for this entity in accordance with established guidelines. Chances of survival decrease by 10% for every minute that a SCA victim delays in access to defibrillation. Therefore, our intended goal is to provide the first shock as soon as possible in order to increase survivability in the event of SCA.

Definitions

AED Team Member – An individual who is trained in AED use to respond to SCA medical emergencies.

Automated External Defibrillator (AED) – A semi-automatic computerized medical device programmed to analyze heart rhythm, recognize rhythms that require defibrillation, and provide visual and voice prompts for the device operator. The AED instructs the operator to deliver an electric shock if indicated, after ensuring all personnel are clear.

Bystander first Aid/CPR – Initial first aid/CPR provided by a trained individual who is not part of an organized medical response system such as EMS< EMT< or ERT.

Cardiopulmonary resuscitation (CPR) – Rescue breathing and external cardiac compression applied to a victim in respiratory and/or sudden cardiac arrest.

Emergency Medical System (EMS) – Professional community responder agency for emergency events that provides medical assistance and/or ambulance transport.

Medical Emergency Response Team (MERT) – A group of medical responders who train on a regular basis to respond to medical emergencies.

Rescue Breathing – Artificial ventilation of a victim in respiratory and/or sudden cardiac arrest.

Risk – The chance of injury or illness as determined by the presence of hazard and /or sudden cardiac arrest.

AED Response Team Roles, Responsibilities and Liability Issues

See Appendix A for the roster of Manheim Central School District AED Team Members.

Environmental Health and Safety Manager –

It is the responsibility of the Superintendent and Board of Directors or designee of the Manheim Central School District to:

1. Communicate to site administration the costs and benefits of expanding the existing medical emergency response by including AED use.

2. Ensure adequate resources are allocated to achieve AED program goal. See **Appendix B for AED Budget**.
3. Designate AED coordinators who understand early defibrillation and the use of the AED, and demonstrate the ability to manage employee teams.
4. Review the program annually to evaluate effectiveness.

Medical Director(s) –

It is the responsibility of the school physician(s) to:

1. Provide medical consultation and expertise.
2. Approve protocols for the use of the AED and other medical equipment.

AED Coordinator(s) –

It is the responsibility of the school nurses for each building, or other qualified designated school employee(s) to:

1. Communicate with the physician providing oversight, AED responder's site administration, and EMS regarding the early defibrillation program. See **Appendix C for AED Site Information Form for EMS**.
2. Participate in case reviews, responder training and retraining, data collection, and other quality assurance activities.
3. Maintain the AED(s) and related response equipment.
4. Develop and maintain the emergency medical protocol and Manheim Central School District policy and procedures.
5. Maintain a list of trained AED responders.
6. Assure compliance with the Manheim Central School District AED program policies and procedures.
7. Assure compliance with state and local regulations regarding AED use.

AED Team Members –

It is the responsibility of the AED team members to:

1. Successfully complete all required training and skill evaluations through the American Heart Association or the American Red Cross.
2. Respond to emergency calls according to the site's AED protocols.

3. Follow the guidelines of the AED program and remain current with all certifications required by Manheim Central School District.

Liability Issues –

See **Appendix D for the Amendment to the Good Samaritan Act. Operational Guidelines.** AED Teams are to perform only to the level of their training as detailed in the Manheim Central School District AED protocol. Medical liability coverage is granted to responding team members only under these conditions while on school property and/or during school functions.

AED Equipment

See **Appendix E** for the AED Location and Equipment Maintenance Checklists.

Description –

The equipment that is provided for the early defibrillation program is to be used in the event of a SCA at Manheim Central School District. This equipment shall not be used outside the parameters of the AED program or for personal use by the employee. Each device should be maintained according to Manheim Central School District policy. The AED will be inspected and installed according to the operating instructions from the manufacturer. The AED coordinators will follow the maintenance guidelines that are provided in the operating instructions. This includes keeping records of the expiration dates of the consumables (the battery and electrodes) and replacing them as needed.

Equipment/Accessories –

Each AED unit shall include the items listed below. All AED equipment and accessories must remain with the AED unit in the designated location, and must be inspected on a regular basis as stipulated by the Manheim Central School District policy for readiness of use and integrity of the device.

<u>Item Description</u>	<u>Quantity</u>
AED	1
Carrying Case	1
Defibrillation Pads	2 sets
Data Card	1
Accessories (scissors, wipes, razor, pocket mask, gloves)	1 set

AED Maintenance

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

1. *Report of Damage* – Follow the manufacturer's recommendations for all scheduled AED maintenance checks. Report any performance discrepancies, device defects, or missing, expired, and/or damaged accessories to the manufacturer. The building secretaries shall be informed of changes in availability of emergency response equipment. If equipment must be withdrawn from service, the building principals, secretaries, and EMS will be informed and notified when equipment is returned.
2. *Calibration* – The AED performs regular self-tests to assure that it is ready for use. While the maintenance required for the AED is minimal, it is important that regular checks of the AED be performed to assure readiness.
3. *Suggested Maintenance Schedule* – The AED Coordinators shall be responsible for having regular equipment maintenance performed. Refer to the suggested maintenance schedule in the AED User's Guide, which also provides detailed instructions for responding to each maintenance task.
4. *Cleaning* – When necessary, clean the AED using recommended cleaning agents, per the AED User's Guide. Following the use of the emergency response equipment, all equipment shall be cleaned and /or decontaminated as required per manufacturer's guidelines.
5. *Monthly System Check* – Once each calendar month, the AED Coordinators or their designees shall conduct and document a system check. This check shall include the review of the following elements as per manufacturer instructions:
 - a. Emergency kit supplies.
 - b. AED battery life.
 - c. AED operation and status of AED.

AED Protocol and Procedure

See also **Appendix F** for Manheim Central School District Medical Emergency Protocol for in-school emergency situations.

Initiation of Emergency Response –

The AED may be used only by persons who have successfully completed an approved CPR and AED training program by the American Heart Association or the American Red Cross. The procedure outlined below should be followed:

1. Immediately upon arrival, check the scene for safety; then verify sudden cardiac arrest.
2. Determine unresponsiveness.

3. If no response, activate EMS.
4. Open airway.
5. Check for breathing.
6. If no breathing, deliver two (2) rescue breaths.
7. Check for signs of circulation.
8. If no signs of circulation, apply AED.
 - a. If AED is not immediately available, perform CPR until an AED is available.
 - b. **AED is not to be used on children weighing less than 55 lbs. or under eight (8) years of age.**
 - c. Move the victim if lying on or near metal or water.
 - d. Any excess hair on the victim's chest should be shaved.
 - e. Using gloved hands, remove any medication patches from the victim's chest prior to pad placement and wipe the skin clean with a cloth.
 - f. If the victim has an implanted pacemaker or internal defibrillator, do not place the AED pads over the implanted device. Place the defibrillation pad as close to the recommended pad placement as possible.
 - g. Do not use cell phones within six (6) feet of the victim/AED.
9. Turn on the AED.
10. Follow the AED verbal and visual prompts.
11. Apply the defibrillation pads to the victim's bare , dry chest
12. Allow the AED to analyze.

If “shock” advised

- a. Clear victim verbally and visually prior to shock delivery.
- b. Deliver a shock when prompted by pushing the “shock” button (the device will analyze and shock up to three (3) times).
- c. Check for signs of circulation - if absent, perform CPR for one (1) minute; continue sequence of three (3) shocks and one (1) minute of CPR until a “no shock” prompt appears or EMS arrives.

If "no shock" advised

- a. Check for signs of circulation – if absent, perform CPR until the AED reanalyzes. If circulation is present, continue to support the airway and breathing until EMS arrives.
- b. Leave AED attached to the victim and continue to follow AED prompts until EMS arrives and disconnects AED.

Transfer Of Patient Care –

Once EMS arrives, and the AED Team transfers patient care to the EMS agency for appropriate advanced medical treatment and provides a report that includes:

1. The initial time of the event.
2. The patient's condition upon the AED team's arrival.
3. All treatment rendered to the patient by the AED team.
4. Any available medical information about the patient.

Post-Incident Procedure –

After transferring patient care to EMS responders, the AED team conducts the following post-event procedures:

1. Equipment Check.
2. Remove data card for data collection and replace with a spare.
3. Clean the AED as needed.
4. Replace necessary supplies.
5. Return the AED to its designated location.
6. Complete the Manheim Central Post- Incident Report (**Appendix H**).
7. Notify the appropriate medical director regarding an in-school emergency.

Debriefing Procedures –

As soon as possible, the building administrator will arrange a debriefing session to evaluate the AED Team's response and allow for evaluation of the need for emotional support of the responders involved. Discussion of all aspects of the event is to be limited to team members. To prevent violation of patient confidentiality and liability for Manheim Central School District, AED team members must refrain from open discussion about any aspects of the event.