

## Emergency Medical Services Program Policies – Procedures – Protocols

### ***Public Access/Layperson AED Implementation Guidelines (1009.00)***

#### **I. Purpose:**

This is a guidance document to assist persons and entities implement public access/layperson automated external defibrillator programs within the County. Using automated external defibrillators (AED) for out-of-hospital cardiac arrests is proven to increase survival rates. The Division supports the use of public access AEDs within the County, and these guidelines are intended to facilitate the proliferation of AED programs.

#### **II. Authority:**

California Health and Safety Code Sections 1797.5, and 1797.196.

#### **III. Requirements of a person or entity:**

- A. Become familiar and comply with California Health and Safety Code, referenced above.
- B. Notify the County EMS Division of the existence, location, and type of every AED within the county. This can be accomplished by one of the following:
  - Complete a Notification of Public Access Defibrillator Site form (Attachment A) listing each AED unit deployed in the County. Submit the form to the Kern County EMS Division, 1800 Mt. Vernon Ave., Bakersfield, California 93306.
  - Upload AED information including a picture of the AED using the "Pulsepoint AED" app. [www.pulsepoint.org/download](http://www.pulsepoint.org/download)
- C. Notify the County EMS Division if any of the information becomes outdated (i.e., the AED is moved to a different location, a new AED is purchased, etc.).
- D. Every time an AED is used, complete the Report of Defibrillator Use form (Attachment B), and submit via fax to the Department at (661) 868-1204, within 24 hours of use.

#### **IV. Implementation Checklist**

In order to ensure public safety, a person or entity that acquires an AED shall do all of the following:

- ❑ Comply with all statutes governing placement of an AED.
- ❑ Notify an agent of the local EMS agency of the existence, location, and type of AED acquired. A form for this notification is at Attachment A, or use the PulsePoint AED app on a smartphone.
- ❑ Ensure that the AED is maintained and tested according to the operation and maintenance guidelines set forth by the manufacturer.
- ❑ Ensure that an inspection is made of all AEDs on the premises at least every 90 days for potential issues related to operability of the device, including a blinking light or other obvious defect that may suggest tampering or that another problem has arisen with the functionality of the AED.
- ❑ Ensure that records of the maintenance and testing required pursuant to this paragraph are maintained.
- ❑ When the AED is placed in a building, the building owner/responsible party shall do all of the following:
  - ❑ At least once a year, notify the tenants as to the location of the AED units and provide information to tenants about who they can contact if they want to voluntarily take AED or CPR training.
  - ❑ At least once a year, offer a demonstration to at least one person associated with the building so that the person can be walked through how to use the AED properly in an emergency. The building owner may arrange for the demonstration or partner with a nonprofit organization to do so.
  - ❑ Next to the AED, post instructions, in no less than 14-point type, on how to use the AED.
- ❖ A medical director or other physician and surgeon is not required to be involved in the acquisition or placement of an AED.

## Notification of Public Access Defibrillator Site

<b>On-Site Contact Information</b>	
Name of On-Site Contact:	
Employer:	
Phone Number of On-Site Contact:	
Physical Address of On-Site Contact:	
Mailing Address of On-Site Contact:	

<b>AED Location Information</b>	
Name of Building or Complex:	
Physical Address:	
Nearest Cross Street:	
Floor and location of device placement:	
Closest/Fastest Street Access Point:	
<b>Equipment Information</b>	
Make:	
Model:	
Is AED in an alarmed/locked cabinet?	
Date of placement at this location:	

<b>AED Location Information</b>	
Name of Building or Complex:	
Physical Address:	
Nearest Cross Street:	
Floor and location of device placement:	
Closest/Fastest Street Access Point:	
<b>Equipment Information</b>	
Make:	
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Physical Address:	
Nearest Cross Street:	
Floor and location of device placement:	
Closest/Fastest Street Access Point:	
<b>Equipment Information</b>	
Make:	
Model:	
Is AED in an alarmed/locked cabinet?	
Date of placement at this location:	

**Report of Defibrillator Use**

Name Of AED Service Provider:	
Date of Occurrence:	
Time of Occurrence:	
Place of Occurrence: (Address & specific location)	
Patient's Name:	
Patient's Age:	
Patient's Sex:	
Approximate down time prior to your arrival:	
Did anyone witness the collapse/arrest?	
Alert Time (time you were notified):	
Was CPR used prior to AED at victim?	
Time of first shock (if given):	
Total number of shocks:	
Did victim regain a pulse at scene?	
Responder Name(s):	
Responder Name(s):	
Responder Name(s):	
Responder Name(s):	
Name and phone number of person completing form:	

Additional Comments/ Information:

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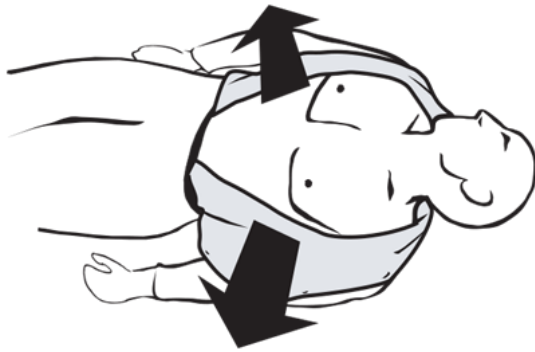
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**FAX this completed report to Kern County EMS Department  
within 24 hours of use of an AED. FAX to: 661-868-1204**

# HOW TO USE AN AED

## 1. Call 911

Check the victim for unresponsiveness. If the person is not responsive, and not breathing or not breathing normally, call 911.

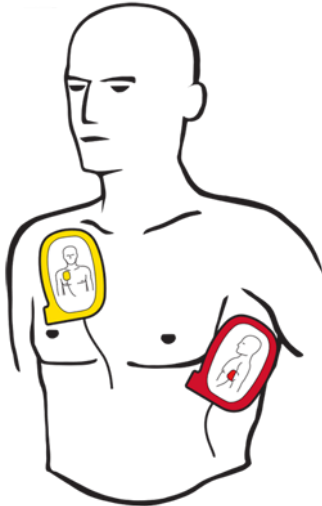


## 2. Get Prepared

Place AED next to victim. Open/turn on AED. Bare the victim's chest.

### 3. Apply Electrode Pads

Apply electrode pads as indicated in the illustration. Be sure to push firmly so that the pads completely adhere to the victim's chest.



### 4. Follow Voice Prompts

Follow AED voice commands until emergency medical personnel arrive.



DOWNLOAD THE  
PULSEPOINT AED APP

