#### Division 05

### **Emergency Medical**

### **Chapter 02– Automated External Defibrillation Program**

February 2009

#### **POLICY**

This General Order defines the Prince George's County Fire/Emergency Medical Services (EMS) Department's Automated External Defibrillation (AED) Program. This General Order describes all authorized equipment, operational guidelines, training requirements, and delineation of responsibilities.

The Prince George's County Fire/EMS Department's AED Program functions in accordance with American Heart Association Basic Life Support Standards, the Maryland Medical Protocols for EMS Providers, and the Code of Maryland Regulations (COMAR) 30.02.01-03. All stations shall participate in the AED Program and will comply with program requirements, protocols, and operational guidelines.

#### **DEFINITIONS**

**AED** – Automated External Defibrillator

**CPR** – Cardiopulmonary Resuscitation

#### **PROCEDURES**

#### 1. Training

All operational personnel operators are required to complete the Healthcare Provider CPR/AED Course sanctioned by the Departmental EMS Program Medical Director every two years. Only those with current training credentials are authorized to operate an AED.

Initial and in-service training programs are coordinated through the Fire/EMS Training Academy. AED in-service training programs, specific to the Departmental AED devices, must be completed annually by all AED operators.

Each station shall identify an "AED Coordinator" to monitor and ensure compliance with provisions of the AED Program. Personnel failing to maintain compliance with established program and certification standards shall be referred to the Medical Review Committee.

#### 2. Equipment

The Advanced Emergency Medical Services (AEMS) Commander and the Departmental EMS Program Medical Director, with the assistance of the AED Coordinator, shall approve all AED devices prior to the units being placed in service (Attachment #1-Approved Equipment List).

Each station maintains a current AED Daily Check Sheet (Form #1 – AED Daily Check Sheet) and records concerning equipment maintenance on file for a minimum of three years. Repairs and preventive maintenance shall be coordinated through the AED Coordinator and performed on each AED per manufacturer recommendations.

The Operator's Manual may be consulted for specific user level maintenance guidelines. A copy of the Operator's Manual shall be maintained within the station for training and reference purposes.

All expendable supplies are obtained from Logistics.

For any other operational issues, contact the Departmental AED Coordinator via the AEMS Office or EMS Shift Commander.

#### 3. Operational Guidelines

Time is the most critical factor in treating a cardiac arrest victim. As an enhancement of basic life support care, automated external defibrillation is part of the foundation on which cardiac arrest resuscitation is based.

# It is critical that the AED be carried to the patient's side whenever the potential of cardiac arrest exists.

To maximize a cardiac arrest victim's chance of survival, the AED shall be taken to the patient's side in the following circumstances:

- Cardiac Arrest/DOA's (possible Dead on Arrival).
- Heart Attack/Chest Pain.
- Unconscious Person.
- Trouble Breathing.
- Seizures.
- Electrocutions.
- Any other incident in which dispatch information indicates the AED may be needed.

Strict adherence to all manufacturer and program operational guidelines and the Maryland Medical Protocols for EMS Providers is essential to ensure the safety of providers and bystanders. Failure to comply may result in injury or death.

Once an AED is applied to patient, it must be downloaded <u>immediately</u> following the incident. This must be done regardless of whether a "shock" was advised. All stations must provide 24-hour access to the equipment

necessary for the downloading of AED incident data.

With each AED use, all appropriate patient care reports concerning the cardiac arrest incident shall be completed.

#### 4. Responsibilities

## **Departmental EMS Program Medical Director**

The Departmental EMS Program Medical Director, (or his designee), is the primary medical advisor to the Fire Chief on all AED related issues.

#### **AEMS Major**

The AEMS Commander shall be responsible for the overall administration of the Departmental AED Program.

#### **Departmental AED Coordinator**

The Departmental AED Coordinator, as designated by the Fire Chief, shall be the initial point of contact for the AED program. The AED Coordinator shall assist the AEMS Major and the Departmental EMS Program Medical Director by providing information and data on the performance and maintenance of the AED Program.

The Departmental AED Coordinator shall:

- Maintain appropriate equipment records:
  - ➤ AED serial numbers and locations.
  - Coordinate equipment repairs and preventative maintenance.
  - Maintain database on Layperson Facility Public Access AED locations.



- Monitor AED research and development.
- Act as the initial point of contact between the Fire/EMS Department and all internal and external customers regarding AED issues.

#### **Battalion Officers and Volunteer Chiefs**

Battalion Officers and Volunteer Chiefs shall:

- Ensure that all personnel under his/her command maintain current CPR/AED certification.
- Utilize the AED in accordance with established standards and medical protocols as set forth by MIEMSS and the AED Program.

#### **Station Officers**

Station Officers shall:

- Ensure that all personnel under his/her supervision maintain current CPR/AED certification.
- Utilize and ensure the AED is used in accordance with established standards and medical protocols as set forth by MIEMSS and the AED Program.
- Review all AED uses to ensure patient care reports are complete and accurate, reflecting the EMS care provided.
- Ensure that each AED use is downloaded promptly.
- Immediately notify the appropriate EMS Quality Assurance Officer of any significant incidents, protocol violations, or relevant trends.
- Ensure that the AED is checked daily and the AED Daily Check Sheet is completed. (Form #1)

#### **All EMS Providers**

#### All EMS Providers shall:

- Utilize the AED in accordance with established standards and medical protocols as set forth by MIEMSS and the AED Program.
- Complete an electronic patient care report (ePCR) documenting all assessments, treatments, and the response to the care provided during the cardiac arrest and use of the AED.
- Download the AED immediately following a cardiac arrest incident, regardless of whether an AED "shock" was advised.
- Ensure the AED is operational at all times and all necessary supplies are contained within the unit. (Form #1)

#### REFERENCES

N/A

#### FORMS/ATTACHMENTS

Form #1 – AED Daily Check Sheet

Attachment #1 – Approved AED Equipment





#### PRINCE GEORGE'S COUNTY MARYLAND FIRE / EMS DEPARTMENT



#### AED DAILY CHECK SHEET

MONTH:	MFF	R./MC	<u>DDE</u>	L:_							SEF	RIAL#	<b>#</b> :									AED	car	ried o	on Ul	NIT #	!:				
	1	2	3	3 4	1 5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Examine the AED case and connectors																															
a. Foreign substance -(disinfect device)																															
b. Damage or cracks -(Contact AED Coordinator)																															
Check expiration date on both sets of therapy electrodes																															
* *Replace if expired **																															
Examine the accessory cables for cracked, damaged, broken or bent connectors or wires																															
**(If found contact the AED Coordinator)																															<u> </u>
Press the ON/OFF to turn on the AED and LOOK for:																															
a. Self-test Message-( if absent contact the AED Coordinator)																															
b. Momentary illumination of each LED and all LCD segments -(if absent contact AED Coordinator)																															
c. BATTERY LOW or REPLACE BATTERY Self-test xx.xx Message -(Contact AED Coordinator)																															
d. Service indicator or Call Service Message - (Contact AED Coordinator)																															
Check MODEM for damage, cracks, broken or bent connectors or wires -																															
**(If present Contact AED Coordinator)																															
Check necessary supplies are present with AED																															
Electrodes, Disp. Razor, Gloves																															
Initials of personnel																															
checking AED																															

AED Loaner #: \_\_\_\_\_ Date Received : \_\_\_\_\_ Date Unit Returned: \_\_\_\_\_

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# Prince George's County Fire/EMS Department Approved AED Equipment List

- 1. Medtronic/Physio-Control Lifepak 500 Biphasic AED.
- 2. Medtronic/Physio-Control Lifepak AED Trainer with a set of Physio-Control training electrodes.
- 3. The following are modems approved for use with the Medtronic/Physio-Control Lifepak 500 Biphasic AED. However, do not change the modem that is assigned to the Station as the AED is internally set to use that particular modem.
  - a) Hayes ACCURA 288 External Fax Modem
  - b) Hayes ACCURA 336 External Fax Modem
  - c) USRobotics Sportster 28.8 Modem
  - d) USRobotics Sportster 33.6 Modem
  - e) Motorola Lifestyle 28.8 Data/Fax Modem
  - f) SupraExpress 33.6 Fax Modem
  - g) Hayes ACCURA 144 External Fax Modem
  - h) Hayes ACCURA 56K External Fax Modem
  - i) Hayes ACCURA 336 External Fax Modem with voice
  - j) Hayes ACCURA 336 External Fax Modem with voice and data
  - k) Hayes ACCURA 56K Speakerphone Modem
- 4. Medtronic Quick Combo Monitor/Defibrillator pads
  - a) Prince George's County Stores
    - i. 6515 0125435
- 5. Gloves
  - a) Prince George's County Stores
    - i. 6515 0124328, Ex-Large, Non-Latex
    - ii. 6515 0124293, Large, Non-Latex
    - iii. 6515 0124301, Medium, Non-Latex
- 6. Gauze
  - a) Prince George's County Stores
    - i. 6510 0002003, 4X4 gauze pads, individual
- 7. Disposable Razor
  - a) not available through stores