POLICY/PROCEDURE NUMBER: 02-S.O.-003   Page 1 of 4 with two Appendices

SUBJECT: Automated External Defibrillator (AED)

EFFECTIVE DATE: January 7, 2015   REVIEW DATE: January 7, 2016

AMENDS/SUPERSEDES: September 12, 2005 Revision; December 12, 2002 Revision; Automated
                    External Defibrillator Procedure, Policy Number 200-31, April 12, 2002;
                    November 19, 2007 version; March 18, 2008 version; January 27, 2010
                    version; February 16, 2011 version; January 8, 2014 version.

IACLEA STANDARD: N/A

CSU POLICE DEPARTMENTS SYSTEMWIDE OPERATIONAL GUIDELINE – NO

APPROVED: Anne P. Glavin, Chief of Police

I.   PURPOSE

       The campus-wide utilization of automated external defibrillators is coordinated through the
       California State University, Northridge Student Health Center. The policies and procedures for
       the use of this equipment also include input from the AED Task Force, the Department of Police
       Services with final approval of the Medical Director of the AED Program and Director of the
       Student Health Center.

       The purpose of this policy is to establish procedures regarding the use, storage, and care of AED
       devices within the Department of Police Services. This policy is to be used in conjunction with
       the attached Automated External Defibrillator policy issued by the Student Health Center (SHC).

II.   POLICY

       All sworn police officers and police supervisory staff of the California State University,
       Northridge University Police Department are authorized and trained to use AED devices within
       the course and scope of their duties whether on or off campus. All University Police officers are
       expected to perform CPR (with protective equipment provided by the Department) when the need
       arises. This means that officers are to carry with them at all times Department issued equipment:
       CPR Microshield-plus as a barrier for mouth-to-mouth resuscitation (it is expected that an ambu
       bag will be utilized if available).

When assigned to Department vehicles equipped with AED devices, officers responding to incidents that are dispatched as cardiac arrest situations, unconscious persons or a critical or unknown illness or injury shall take with them from their patrol vehicle the AED devices to treat victims who experience sudden cardiac arrest. Since it is difficult to ascertain all situations where the AED device might be utilized, it is strongly recommended that the AED device be carried to the scene of all medical calls in the event that a situation changes from the time it is dispatched to the time an officer arrives on scene. Supervisory staff are responsible for ensuring compliance with this policy is consistently adhered to by all personnel under their supervision. The AED equipment shall be carried to the scene in the above situations whether or not the Los Angeles Fire Department rescue units have been dispatched.

III.   DEFINITIONS

    A.   <u>AED Device</u>: An automated external defibrillator (AED) is a device used to treat victims who experience sudden cardiac arrest.

    <u>Sworn Police Officers</u>: For the purposes of this procedure a "sworn police Officer" is any police officer of this department, regardless of rank or assignment, who is on duty and who has received the mandated AED training set forth in the California State University, Northridge Student Health Center Policies and Procedures for Automated External Defibrillator.

    B.   <u>Marked Police Vehicle</u>: For the purpose of <u>this</u> procedure a "marked police vehicle" shall be defined as any motorized police vehicle of this department which is designated for patrol operations use and is clearly marked with the CSUN Police logo (excludes the special operations van). This includes patrol cars, T3 electric patrol vehicles, and motorcycles.

IV.   PROCEDURES

    A.   Storage of AED Device

        1.   All California State University, Northridge marked police cars, motorcycle(s), T3(s), and the detective vehicle shall be equipped with an AED device.

        2.   When a vehicle is taken out of service for repair or other services the shift supervisor on duty shall ensure that the AED device is removed and stored in the police equipment room until the vehicle is returned to service.

    B.   Responsibilities

        1.   All sworn police officers at the start of their assignment and prior to checking out any marked police vehicle shall confirm the presence of an AED device in the vehicle.

            a.   The officer shall also check to ensure the AED device is fully charged with all its components present and suitable for use.

            b.   Any deficiency to an AED device will be immediately reported to the shift supervisor for replacement. If at all possible, no vehicle should be placed into service without an AED device.

2.   Shift Supervisors will ensure that officers are following the above procedures by making random, documented checks.

3.   AED devices found to be in bad working order shall be reported to the shift supervisor for repair/replacement. The shift supervisor shall notify the Department AED Coordinator (See Section VIII B. Equipment Maintenance of the attached SHC policy). The shift supervisor shall also alert the Watch Commander regarding this maintenance situation.

4.   The Department's first aid coordinator is designated as the Department AED Coordinator and is responsible for ensuring that all AED devices are in proper working order (See p. 4, Section III 2.of attached SHC policy for monthly systems checks).

   The Department AED Coordinator shall update the AED units twice yearly (Fall/Spring) to reflect the correct Pacific Standard Time upon changes in the daily standard time. This update shall be completed on the next day of work for the Department's AED Coordinator. Should the AED Coordinator be unavailable to complete this task, then the Department IT Coordinator will update the AED units accordingly.

   All documentation of the monthly checks shall be forwarded to the Patrol Operations Captain for review and signature no later than 5 business days upon completion of the monthly inspections. The Patrol Operations Captain will forward all documentation to the Records Unit for storage (seven years). This includes but is not limited to battery shelf life and external component expiration dates.

5.   The department AED coordinator is responsible for maintaining a log of all AED device battery and component expiration dates issued to the Department of Police Services (See p. 4, Section III 2. of the attached SHC policy).

6.   The Department training coordinator is responsible for ensuring that all mandated training, certifications and recertifications for sworn police officers are accomplished on an annual basis as appropriate. The training coordinator will maintain all training files related to the AED devices.

7.   On an annual basis the Patrol Operations Captain shall audit all AED system documentation for compliance with this policy. The specialized AED audit inspection form will be utilized for this purpose. Results of this audit will be forwarded to the Patrol Operations Captain and Chief of Police in a written report.

C.   Usage

1.   All AED devices will be used in accordance with this policy and procedure and will not be used for any other purposes.

2.   Any time an AED device is utilized, an injury/illness (RIMS) report will be written ensuring that the "AED utilized" category is selected under the special

circumstances box located on page one of the RIMS report. Additionally, the "AED Incident Report" shall be completed (see appendix I of this policy) and copies sent to:

    a. The Student Health Center Medical Director
    b. Chief of Police
    c. Risk Management
    d. Department AED Coordinator
    e. DPS Records Unit

3. When an AED device is used, the shift supervisor shall as soon as practical, notify the Patrol Operations Commander, the Chief of Police and the Student Health Center Medical Director. Notifications shall be documented in dispatch radio logs.

V. APPENDICES

A. University (SHC) AED Policy and Appendices – 21 Pages – (**Note: Original signed copy on file at SHC.**)

B. California State University, Northridge AED Audit Inspection Form

Appendix "A"

CALIFORNIA STATE UNIVERSITY, NORTHRIDGE	DATE: 01/20/02
STUDENT HEALTH CENTER	REVISED: 06/19/12
POLICIES AND PROCEDURES	PAGE: 1 OF 21 .
SECTION: Emergency	

SUBJECT: Automated External Defibrillator (AED)

PURPOSE: To establish Policies and Procedures for campus-wide utilization of the Automated External Defibrillator (AED).

I. INTRODUCTION:

An Automated External Defibrillator (AED) is used to treat victims who experience sudden cardiac arrest. The AED must only be applied to victims who are unconscious, without a pulse, and not breathing. The AED will analyze the heart rhythm and advise the operator if a shockable rhythm is detected. If a shockable rhythm is detected, the AED will charge to the appropriate energy level and advise the operator to deliver a shock.

The California State University, Northridge (CSUN) will use an Automated External Defibrillator in conjunction with Cardio-Pulmonary Resuscitation (CPR) in cases of sudden cardiac arrest*, in accordance with accepted protocols, including those developed by the American Heart Association or the American Red Cross**,** Title 22, California Code of Regulations and the manufacturer. Use of the AED and CPR will continue as appropriate during the course of emergency care, until the patient resumes pulse and respiration, and/or local Emergency Medical Services (EMS) paramedics arrive at the scene, and assume responsibility for emergency care of the patient. **The AED should not be used on victims weighing less than 55 pounds or less than 8 years of age**.

CSUN will utilize the Agilent Heartstream AED for standard campus applications. Features include ECG screen display, non-polarized electrodes, voice and text prompts throughout the rescue, and a single-button shock delivery.

*University Police are authorized to use AED devices within the course and scope of their duties.

II. DIRECTION AND LOCATION:

A. The use of AED devices are under the guidance of the Medical Director.

B. Per the manufacturer's recommendations, the AED devices are placed in areas that are easily accessible. Periodic inspection of the AED will be facilitated, as defined under Responsibilities.

III. RESPONSIBILITIES:

A. Medical Director

The Medical Director of the AED Program is designated by the SHC Director. At
this time and until further notice, the Medical Director for the Program is Eric
Sletten, MD, Klotz Student Health Center (SHC) and CSUN Team Physician. The
Medical Director is a full or part-time SHC physician designated by the SHC
Director. The Medical Director is responsible for:

1. Providing medical direction for the use of the AED device;
2. Writing a prescription for use of the AED device;
3. Reviewing and approving guidelines for emergency procedures related to the use of AED's
   and CPR; and,
4. Evaluating post-event review forms and electronic files downloaded from the AED.

B. University AED Training Coordinator:

The University AED Training Coordinator is responsible for:

2. Organizing the AED training for potential campus AED users;
3. Works with Medical Director to monitor the effectiveness of the AED training and
   utilization.

C. Campus Program Coordinator is responsible for:

1. Reviewing and revising the AED Policies and Procedures annually as needed in conjunction
   with the Medical Director, the Director of the SHC and the Campus Emergency Response
   Committee;
2. Works with Medical Director to monitor the effectiveness of the AED training and
   utilization; and,
3. Works as a liaison between campus and AED manufacturer;
4. Organizes meetings and works with the Medical Director to maintain records, AED
   guidelines and protocols.
5. Communicating with the Medical Director on issues related to this medical emergency
   response plan including post-event reviews.

D. Department AED Coordinator:

1. Responsible for daily and monthly equipment maintenance per manufacturer's
   recommendations.
2. Keeps all maintenance records for annual review.
3. Orders necessary equipment supplies and accessories.

E. Environmental Health & Safety
1. Conduct an annual audit with Department AED coordinators as to known AEDs
   a. Verify maintenance records
   b. Verify training records
   c. Verify adequate amount of equipment and supplies available

AUTOMATED EXTERNAL DEFIBRILLATOR (AED) PROCEDURES

I. PROCEDURES:

A. The AED procedures will be followed in accordance to the product specifications and AED Rule, Prescription and Procedures in this document. (Refer to Page 9).

B. Each AED will have one set of defibrillation electrodes connected to the device and one spare set of electrodes with the AED. One resuscitation kit will be stored in each AED. This kit contains two pairs of gloves, one razor, a pair of trauma shears (scissors), a towel, and one facemask barrier device.

Each AED location will designate the Department AED Coordinator or trained user as an AED inspector who will inspect the AED after each use and once every 3 months. If supplies are used or run out, replacements should be ordered and paid for by each department through the AED distributors below.

Heartstream FR2 AEDs: Contact Life Trends Group (Authorized Distributor for Philips Medical Systems), Brian Flynn, District Sales Representative at (949) 661-9509 **E-mail: lifetrends1@cox.net**

HeartSine Samaritan PAD AEDs: Contact Allied 100, LLC (AED Superstore, Inc.)
1800 US Hwy 51 N | Woodruff, WI 54568-9558
Phone: 715-358-2329 | Fax: 888-364-2377 |
Toll Free: 800-544-0048
California State University, Northridge Account

II. DIRECTION AND LOCATION

Per the manufacturer's recommendations, the AED devices are placed in areas that are easily accessible

and periodic inspection of the AED will be facilitated.

The AED's are located at:

1) **AED 1** Serial Number **1001044387** = Patrol Unit 492

2) **AED 2** Serial Number **1001044403** = Police Equipment Room (Spare)

3) **AED 3** Serial Number **1001044338** = Patrol Unit 312

4) **AED 4** Serial Number **0905167607** = K-9 Unit 454

5) **AED 5** Serial Number **1001044361** = Shift Supervisor Unit 491

6) **AED 6** Serial Number **1001044326** = DPS Fitness Center

7) **AED 7** Serial Number **0905167592** = Police Lockup Facility

8) **AED 8** Serial Number **1001044332** = Police Equipment Room (Spare)

9) **AED 9** Serial Number **0905167494** = Police Equipment Room (Spare)

10) ***AED 10** Serial Number **0911890697** = Police Equipment Room (Spare)

11) **AED 11** Serial Number **091189067** = Police Equipment Room (Spare)

12) **AED 12** Serial Number **0108268272** = K-9 Unit 455

13) **AED 13** Serial Number **1001044328** = Student Health Center

14) **AED 14** Serial Number **0703098211**= Student Health Center

15) **AED 15** Serial Number **1001044330** = Athletic Training Room

16) **AED 16** Serial Number **0602067062** = The Applied Physiology Laboratory/EN 2132

17) **AED 17** Serial Number **0303087300** = Kinesiology, Brown Center

18) **AED 18** Serial Number **0508275953 =** Athletic Training Room

19) **ZOLL AED 19** Serial Number **X05B053119** = Environmental Health and Safety

20) **HEARTSINE AED** 20 Serial Number **10C00203156** = T3 Unit 340

21) **HEARTSINE AED** 21 Serial Number **10C00203228** = T3 Unit 341

22) **HEARTSINE AED** 22 Serial Number **10C00203000** = T3 Unit 342

23) **HEARTSINE AED** 23 Serial Number **10C00203010** = Motor Unit 335

24) **HEARTSINE AED** 24 Serial Number **10C00203153** = Motor Unit 409

25) **HEARTSINE AED** 25 Serial Number **10C00203057** = Motor Unit 499

26) **HEARSTREAM FRX** Serial Number B10B-01737 = Physical Plant Management

27) **HEARSTREAM FRX** Serial Number B11G-01454 = Oviatt Library (Circulation Desk, Lobby)

28) **HEARSTREAM FRX** Serial Number B11F01406 = Student Recreation Center, Bryan Green Training Zone

29) **HEARSTREAM FRX** Serial Number B11F01416= Student Recreation Center, Total Training Zone

30) **HEARSTREAM FRX** Serial Number B11F01272= Student Recreation Center, Mat Arena, (2nd Floor)

ES/LL: 07/26/05, 07/06, 01/07, 11/07 Minor Rev.
LRC 3/08 revised; LL minor rev 03/08; 03/09, 10/09, 12/09, LL//ES/SV (Police Services) 12/10; Minor rev 01/19/11; 05/12

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31) **HEARSTREAM FRX** Serial Number B11F01407= Student Recreation Center, Mat Arena Spectator Seating (Mezzanine)

32) **HEARSTREAM FRX** Serial Number B11F01273= Student Recreation Center, Recreation Pool

33) **HEARSTREAM FRX** Serial Number B11F01335= Student Recreation Center, Mobile IM bag (RR Ct. Storage)

34) **HEARSTREAM FRX** Serial Number B11F02012= Student Recreation Center, Racquetball Court

35) **HEARSTREAM FRX** Serial Number B11F01415= Student Recreation Center, Mezzanine near stair 4

36) **HEARSTREAM FRX** Serial Number B11F03345= Student Recreation Center, Plaza Pool

37) **HEARSTREAM FRX** Serial Number B11F01325= Student Recreation Center, Plaza Pool mobile bag

*N.B: AEDs with Serial numbers 0108269259 & 0108268272 were recalled, returned to manufacturer and replaced in March 2011.

III. SYSTEM VERIFICATION AND REVIEW

A. Annual System Assessment: Once each calendar year, the Medical Director, Training Coordinator and Program Coordinator shall conduct and document a system readiness review. This review shall include assessment of the following elements:

   a) Training Records
   b) Equipment operation and maintenance records

B. Periodic Systems Check: Once each calendar month, the designated Department AED Coordinator shall conduct and document a system check. These records shall be retained for a period of seven (7) years. This check shall include review of the following elements:

   a) Emergency kit supplies
   b) AED battery life
   c) AED operation and status

C. Annual records review: Once each calendar year, Environmental Health & Safety shall conduct a records review of:
   a) Department AED system monthly system check
   b) Training records
   c) Equipment and supplies

IV. AUTHORIZED USERS

The AED devices may only be used by:

A. Trained University Responders: Any CSUN employee or volunteer who has successfully completed an approved CPR and AED training program such as the American Heart Association Heartsaver AED or American Red Cross course and has a record of current successful course completion with the University AED Training Coordinator.

V. RESPONSIBILITIES

A. Medical Director

The Medical Director of the AED Program is designated by the SHC Director. At this time and until further notice, the Medical Director for the Program is Eric Sletten, MD, Klotz SHC and CSUN Team Physician. The Medical Director is a full or part-time (SHC) physician designated by the SHC Director. The Medical Director is responsible for:

1. Providing medical direction for the use of the AED device;
2. Writing a prescription for use of the AED device;
3. Reviewing and approving guidelines for emergency procedures related to the use of AED's and CPR; and,
4. Evaluating post-event review forms and electronic files downloaded from the AED.

B. Campus Program Coordinator

1. Serves as a resource on regulation and training needs and requirements.
4. Reviewing and revising the AED Policies and Procedures annually as needed in conjunction with the Medical Director, the Director of the SHC and the Campus Emergency Response Committee;
3. Works with Medical Director to monitor the effectiveness of the AED training and utilization;
4. Works as a liaison between campus and AED manufacturer;
5. Organizes meetings and works with the Medical Director to maintain records, AED guidelines and protocols.
6. Communicating with the Medical Director on issues related to this medical emergency response plan including post-event reviews.

C. Department AED Coordinator:
1. Coordinating equipment and accessory maintenance.
2. Responsible for daily and monthly equipment maintenance per manufacturer's recommendations
3. Keeps all maintenance records for annual review.
4. Orders necessary equipment supplies and accessories.
5. Organizes training for certified users.

ES/LL: 07/26/05, 07/06, 01/07, 11/07 Minor Rev.
LRC 3/08 revised; LL minor rev 03/08; 03/09, 10/09, 12/09, LL//ES/SV (Police Services) 12/10; Minor rev 01/19/11; 05/12

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D. Trained University Responders: Trained university responders will respond to medical emergencies in accordance with established campus emergency response protocols and completion of CPR training and appropriate AED use.

VI. TRAINING

A. Certification Training: The Campus Program Coordinator will ensure that AED certification training is completed by each department. The department AED Training Coordinator will be responsible for maintaining record of AED training in accordance with accepted protocols including those developed by the American Heart Association or the American Red Cross and in accordance to Title 22 of the California Code of Regulations.

N.B: At the Klotz SHC, all medical personnel are AHA certified. Other personnel not directly involved in patient care may elect to be ARC certified.

1. Emergency Responders: Must complete training adequate to provide CPR and AED. Training on the Agilent Heartstream FR2 AED is required and provided on site if needed. The AED training course provided is the American Heart Association Heartsaver AED or the American Red Cross course. Individual departments are responsible for ensuring that training records are kept up to date with the AED training coordinator.

2. Trained Employee Responder: Responders as dictated by California Law will be trained in accordance to their level of training and experience. The training is the same as outlined for emergency responders.

B. Recertification Training: In accordance with AHA and ARC recertification guidelines, recertification training will be completed annually. Documentation of responder recertification training status will be kept and maintained by the Department AED Coordinator.

VII. MEDICAL RESPONSE DOCUMENTATION

A. **Post-Incident Internal Documentation**: It is important to document each event requiring an emergency response. **(Refer to the AED Incident Report Form, Appendix I, Page 17)**.
   1. If an AED is used by the Police Services or any department the AED Incident report will be filed as per current protocol with the Medical Director as below.
   2. If an AED is used in the SHC, a copy of the event report should be placed in the patient's chart, and one copy should be sent to the Medical Director.

B. If an AED is used, an AED Incident report should be filed with the Medical Director. **PLEASE NOTIFY THE DR. ERIC SLETTEN AT (805) 407-6019 IMMEDIATELY AFTER ANY INCIDENT FOR WHICH THE AED IS USED.** The following form must be sent to the Medical Director at Mailcode 8270 directly or via the AED Training Coordinator of a medical event by the next workday:

   1. AED Incident Report (Appendix 1): Completed by emergency responder for each event using AED. The Medical Director will retrieve the data card from the

ES/LL: 07/26/05, 07/06, 01/07, 11/07 Minor Rev.
LRC 3/08 revised; LL minor rev 03/08; 03/09, 10/09, 12/09, LL//ES/SV (Police Services) 12/10; Minor rev 01/19/11; 05/12

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AED. A printed report from the AED data card shall be generated by the Program Medical Director or the AED Training Coordinator within 72 hours of the emergency.

2. Any and all patient information generated during AED use must be collected and placed in the patient's confidential medical file in the Student Health Center Health Information Management (HIM) Department and stored for seven (7) years.

VIII. EQUIPMENT MAINTENANCE: (Refer to Appendix II, Page 18).

All AED equipment and accessories shall be maintained in a state of readiness and per manufacturer guidelines. Specific maintenance requirements include:

A.   The Campus Program Coordinator shall be informed of changes in availability of emergency medical response equipment (i.e., is the AED available?). Contact the Campus Program Coordinator at (818) 677-3660.

B.   The Department AED Coordinator is responsible for having regular monthly as indicated in Appendix II) equipment maintenance performed. All maintenance tasks shall be performed according to equipment maintenance procedures as outlined in the operating instruction for detailed maintenance and testing. The AED Campus Coordinator will confirm annual maintenance and inspection procedures with each AED department coordinator via email. A record of the emails will be saved by the AED Campus Coordinator.

C.   Following use of emergency response equipment, all equipment shall be cleaned and/or decontaminated as required. After use, the AED is to be cleaned with a soft cloth dampened with one of the following agents: Ammonia-based cleaners, Isopropyl alcohol (70%), or Hydrogen peroxide. Needed supplies should be reordered once used.

IX. POST EVENT REVIEW

A post-event review will be conducted by the AED Task Force. The AED Task Force will convene on an ad hoc basis to evaluate the program's efficacy.

APPENDIX III

AED Task Force Membership

Eric Sletten, MD, SHC, Chair
Linda Reid Chassiakos, MD, SHC
Lynne Landeta, MN, FNP, SHC
Daniel Castellon, Environmental Health and Safety
Mercedes Gallup, BSN, RN, BC, SHC
Steven Grech, Athletics Department
Anne Glavin, Chief of Police/Director of Police Services
Carol Bennett, Brown Center Coordinator
Janna Beling, PhD, Physical Therapy
James Francis, Student Recreation Center
Lynn Lampert, Oviatt Library
William Watkins, PhD, VP Student Affairs

Automated External Defibrillator
Rule, Prescription, and Procedures

Prescription for Use of the Automated External Defibrillator
(HEARSTREAM FR2)

NOTE: If AED is not immediately available, perform CPR until the AGILENT HEARSTREAM unit or HeartSine Samaritan PAD arrives on the scene.

Use of the AED is authorized for emergency response personnel trained in CPR and use of the AED.

(*Adapted from* *Practice Guidelines - May 1, 2006 -- American Family Physician*

1. Assess the scene for safety.

2. Determine the victim's unresponsiveness.

3. Activate the emergency response system (Dial 911 directly).

4. Open airway ("**A**").

5. Check for breathing ("**B**"). If no breathing, give two breaths that make the chest rise.

6. Check for pulse and/or signs of circulation such as normal breathing, coughing, or movement ("**C**").

7. If no definite pulse and/or signs of circulation, apply AED (**"D"**) immediately.

8. Press the "ON/OFF" button to turn on the AED.

9. Remove clothing from the patient's chest. Wipe moisture from the patient's chest and clip or shave excessive chest hair as necessary. (The supplies are in the Fast Response Kit).

10. Apply defibrillator pads on patient's bare chest per diagram instructions.

11. Connect the pads to the AED. Insert the defibrillation pads connector firmly in the connector socket. Flashing light shows you where the socket is located, at the top left of the AED.

12. Stand clear of victim while the machine analyzes the heart rhythm. The ECG display and patient's heart rate are enabled. Follow the instructions provided by the voice and screen prompts.

13. If voice and screen prompts confirm **"SHOCK ADVISED"**, the AED will charge to prepare for shock delivery. Make sure no one is touching the victim as directed by AED voice prompt.

Push the orange (shock) button to deliver a single shock. Immediately resume CPR for five (5) cycles. If "**NO SHOCK ADVISED**", proceed with steps 15 thru 18.

14. After you press the Shock button, a voice prompt tells the rescuer the shock was delivered. The AED goes back to analyzing the patient's heart rhythm to see if the shock was successful. The AED continues to provide voice and text prompts to guide the rescuer through additional shocks, if appropriate.

15. Voice and screen prompts confirm, **"NO SHOCK ADVISED"**, immediately resume CPR for 5 cycles. Check rhythm every 5 cyles. Continue until Advance Life Support (ALS) providers take over or person starts to move. The AED performs background ECG monitoring while rescuer gives appropriate care to the patient. The AED will prompt to check pulse (or for breathing and movement) and if absent, prompt the rescuer to start CPR.

16. If pulse/signs of circulation such as breathing and movement are present, check for normal breathing. If victim is not breathing normally, give rescue breathing at a rate of 12 per minute (1 breath every 5-6 seconds). Recheck pulse every 2 minutes.

17. Continue cycles of analyses, shocks (if advised) and CPR until professional help arrives. Victim must be transported to hospital. Leave AED attached to victim until EMS arrives and disconnects AED. **The AED user will maintain possession of the unit at all times**.

<div align="center">

Prescription for Use of the Automated External Defibrillator
(HEARTSINE SAMARITAN PAD)

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NOTE: If AED is not immediately available, perform CPR until the **HEARTSINE SAMARITAN PAD** unit arrives on the scene.

Use of the AED is authorized for emergency response personnel trained in CPR and use of the AED.

USING THE AED: (*Adapted from [Practice Guidelines - May 1, 2006 -- American Family Physician](#)***

CPR with defibrillation (CPR-D) Fundamentals

1. Safely remove patient from risk area. Be aware of your own safety!

2. Not responsive? No sign of life? Check breathing, open airway

3. Contact emergency services. Engage other people to help you. Get PAD

4. Perform CPR until a PAD is available 30:2 or 2:30

5. Press ON/OFF Button and open the green tab of the soft carry case.
   - Listen for the audio prompts:

   - Adult patient or Child patient
   - Remove clothing from patient's chest to expose bare skin. If the patient has an excessively hairy chest, shave the area where the electrodes are about to be applied.

6. Peel pads from liner
   - Apply pads to patient's bare chest
   - Press pads firmly to patient's bare skin

- Place the electrodes on the patient's chest as indicated below. Sternum and Apex electrode pads are clearly identified on the respective electrodes.

Press the electrodes firmly to the patient's bare chest to ensure proper contact is made.

7. When the electrode pads are attached correctly to the patient you will hear the audio prompts:

- *Assessing heart rhythm*
- *Do not touch the patient*
- *Stand clear of patient*

8. If the patient requires a therapeutic shock the SAM 300P will start to charge. In such a scenario you will hear the following prompts:

- *Shock advised*
- *Stand clear of patient*
-

9. When the SAM 300P has charged to the required level you will hear the audio prompt:
- *Press Shock button now*
- Above left is the "do not touch the patient" icon. When you are certain that no one is touching the patient press the shock button (above right) to deliver the therapy.
- The SAM 300P will only administer a shock if it is needed. A voice prompt will tell you when to press the shock button to administer defibrillation therapy.

10. When the shock has been delivered or ECG analysis has stopped you will hear the audio prompts:

- *It is safe to touch the patient*
- *Begin CPR*

  Begin CPR immediately. Use the metronome sound from the SAM 300P for compression rate – the unit emits a tone corresponding to 100 beats per minute (to current AHA/ERC guidelines). Note too that the "safe to touch" icon flashes (above) at the same rate for additional guidance.

11. *Stop CPR*
- The SAM 300P will then return to Step 7. Ensure no-one is in contact with the patient and proceed as before.
- Follow the voice prompts until the emergency medical services arrive.

Promptly notify the Medical Director, Eric Sletten, MD, of event at **(805) 407-6019** and complete the AED Incident Report and submit within the next workday.

The Medical Director or Campus Program Coordinator will ensure:
- AED data will be downloaded within 24 hours (weekdays) with copies sent to Medical Director.

  - After use: the AED will be wiped clean according to policy. Defibrillator pads and resuscitation kits will be replaced.

_____   Date: _____
Medical Director's Signature

_____
Print or type name

_____   Date: _____
Klotz SHC Director's Signature

_____
Print or type name

LL: 01/09/02: AED Task Force   **Note: Signed copy on file at DPS
                                             Original signed copy on file at SHC

_____

DATA MANAGEMENT

I.   ***Overview of Data Storage and Retrieval***
     Everytime you use the Agilent Heartstream AED or HeartSine Samaritan AED on a patient, data is automatically stored in the internal memory of the AED and more detailed data can be stored on a data card. This allows for post-incident review for quality control and training purposes.

II. Recording Incident Data
     The HeartSine Samaritan PAD uses only 1 way of recording information about an emergency incident while the Heartstream FR2 has 2 ways, so they can both be reviewed after the incident:

     A.   Internal Memory (both AED units): Summary data for an incident is automatically recorded in internal memory while you are using the AED. The SHC maintains the AED management software and computer connection wiring for each AED type to download, store, and analyze patient information after using said devices.

     B.   Data Card (Heartstream FR2 only): Used to store several hours of detailed data, including events and ECG. The data card must be installed before you turn on the Heartstream FR2.

III. **Installation of Data Card (Heartstream FR2 only)**
     1)   Make sure the data card is clean and dry.

     2)   Load the data card into its plastic tray, with the tray's "tongue" fitting over the matching yellow area on the data card. The label on the card should face

up. The label has an arrow indicating which side to insert into the data card port.

3) Make sure the AED is off (in standby mode), or that the battery has been removed.

4) Hold the loaded tray by its handle and gently inset the tray into the data card port on the right side of the AED. Push the tray all the way into the port. Do not force the tray into the port. If the tray is hard to insert, remove it and make sure that the arrow label is face up and pointing toward the data card port. The data card will automatically record incident data the next time the AED is turned on.

IV. To Replace a Data Card
IMPORTANT: You must turn the AED off (return it to standby mode) **before** you remove the data card, to ensure that no incident data are lost.

1) Press the On/Off button to turn off the AED. Never replace the data card

unless the AED is turned off.

2) Remove the loaded data card tray by grasping its handle and pulling it out of the port.

3) Remove the data card from the tray.

4) Submit the data card to the Medical Director.

5) Because it helps seal the AED against moisture, the data card tray should always be reinserted into the port of the AED. Either load a new data card into the tray and insert it, or insert the empty data card tray into the port.

V. Reviewing Incident Data
A. Reviewing Data from Internal Memory: Summary information from the last incident that is stored in the internal memory of the AED can be displayed on its screen for review. To review this information:

1) Remove the data card if one is installed and unplug the pads connector.

2) Remove and reinstall the battery (Make sure you are using the regular gray battery not the yellow Training & Administration Pack).

3) Select **REVIEW INCIDENT** from the menu. A new screen comes up.

4) Observe and record, if desired, the summary information displayed on the screen:
- How long the incident recorded by the AED lasted, and
- How many shocks were delivered during the incident.

This information stays in the AED's memory and can be displayed for review until the next time the AED is used. At that time, the data from the new incident will be displayed.

B. Reviewing Data from a Data Card: If a data card is installed when the AED is turned on for use during an incident, the AED automatically records detailed information on the data card. To review this information on the AED screen:

1) Make sure the Training & Administration Pack is **not** installed.

2) Make sure the data card is installed. Unplug the pads connector.

3) Remove and reinstall the battery.

4) Select **REVIEW INCIDENT** from the menu. A new screen comes up. This screen displays:
   - **ELAPSED TIME**: How long the incident recorded by the AED lasted,
   - **SHOCKS DELIVERED**: How many shocks were delivered during the incident, and
   - **FIRST SHOCKS AT**: The times at which the first three shocks were delivered.

NOTE: If the data card does not contain an events file, only the summary information from the AED internal memory will be displayed when **REVIEW INCIDENT** is selected.

5) To review the events that occurred during the incident, select **REVIEW EVENTS**. A new screen comes up. This and following screens, accessed by selecting **NEXT EVENTS**, display elapsed time information for critical activities in using the AED. These include:
   - **POWER ON**: When the AED was turned on,
   - **PADS ON**: When the defibrillation pads were connected,
   - **SHOCK ADVISED**: When a shock was advised,
   - **ARMED**: When the AED charged for shock delivery,
   - **SHOCK ABORTED**: When a shock was aborted,
   - **PAUSE FOR CPR**: When a pause occurred
   - **POWER OFF**: When the AED was turned off

Additional information may be displayed if your FR2 is using a revised setup allowing advanced mode operation.

6) To review the first six seconds of the recorded presenting ECG for the incident, select **REVIEW ECG**. A new screen comes up. This screen displays a three-second segment of the presenting ECG from the incident.

7) Select **NEXT SEGMENT** to review the second three-second segment of the presenting ECG.

Data Cards can be reused if desired. Using a personal computer running CODERUNNER software, then erase the card and reuse it in the AED.

APPENDIX I
AED INCIDENT REPORT

Complete this form with every incident necessitating AED use. This report will be submitted to the Medical Director within the next workday. **Send this triplicate form to: Eric Sletten, MD, SHC Mailcode: 8270**

PATIENT'S NAME: _____

STUDENT'S ID NUMBER (If applicable) _____

DOB: _____ **AGE:** _____ **SEX:** F   M   **PHONE:** _____

ALLERGIES: _____

CURRENT MEDICATIONS: _____

PERTINENT MEDICAL HISTORY: _____

DATE & TIME OF AED USE: _____ **AED SERIAL NUMBER:** _____

EXACT LOCATION OF INCIDENT: _____

DESCRIPTION OF INCIDENT: _____

_____

WITNESSES: _____

PHONE NUMBER: _____

NAME OF AED OPERATOR: _____

OTHER ASSISTING RESPONDERS:_____

EMS UNIT RECEIVING PERSON:_____

PATIENT WAS TRANSPORTED TO:_____

TIME OF TRANSPORT: _____

REPORTED BY: _____   **DATE:** _____

TELEPHONE NUMBER: _____

MEDICAL DIRECTOR'S COMMENTS:_____

_____

Copy Distribution: White: Medical Director   Yellow: Risk Management   Pink: Dept. AED Coordinator

APPENDIX II: AED OPERATOR'S CHECKLIST

YEAR: _____ Serial Number: _____

TASK	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Status Indicator: (DAILY) Flashing Black Hourglass												
SUPPLIES: 2 Sets of Defibrillator Pads EXPIRATION DATES:												
"Resuscitation Kit": • Face Mask • Scissors • Razor • Gloves • Towel												
Spare Battery: • Install Before: • Lot Number:												
Data Card												
AED Clock Reset (Spring and Fall annually);_Refer to Users' Manual_												
Inspected By:												
Remarks, Problems, Corrective Action(s)												

Consult the Agilent Heartstream Agilent FR2 or HeartSine Samaritan PAD User's Manual for further assistance with any potential corrective action(s). For technical support, contact Life Trends Group at (949) 661-9509. Contact Person: Brian Flynn, authorized Sales Representative. E-mail: lifetrends1@cox.net. For HeartSine: Phone: (715) 358-2329 | Fax: (888) 364-2377 | Toll Free: (800) 544-0048

_Date of Staff Recertification: _____

Please attach staff recertification roster and send to AED Campus Program Coordinator, Lynne Landeta, MN, FNP @ mailcode 8270.

AED RESOURCE DIRECTORY

1. AED Distributor: Life Trends Group (HeartStream FR2 Devices)
   - Contact Person: Brian Flynn
   - 34145 Pacific Coast Highway # 101
     Dana Point Ca, 92629
   - Phone: (949) 661-9509
   - E-mail: lifetrends1@cox.net

2. AED Distributor: AED Superstore, Inc. (Allied 100 Company – sells equipment and supplies
   - Contact Person: Any telephone sales representative (Note that call is for the California State University, Northridge Account – HeartSine samaritan PAD devices.)
   - 1800 US Hwy 51 N
     Woodruff, WI 54568-9558
     Phone: (715) 358-2329 | Fax: (888) 364-2377 | Toll Free: (800) 544-0048

3. SHC Director:
   - Linda Reid Chassiakos, M.D. : (818) 677-3689
   - E-mail: linda.reid.chassiakos@csun.edu

3. AED Medical Director:
   - Eric Sletten, M.D. : (805) 407-6019
   - E-mail: eric.sletten@csun.edu
   - Mailcode: SHC 8270

4. Campus AED Trainer:
   - Daniel Castellon
   - Department of Environmental Health and Safety
   - (818) 677-2401
   - Email: daniel.castellon@csun.edu

5. Campus Program Coordinator:
   - Lynne Landeta, MN, FNP:
   - Phone: (818) 677-3660
   - E-mail: lynne.landeta@csun.edu

6. Department AED Coordinators:
   - **SHC:** Mercedes Gallup, BSN, RN, BC
   - Phone (818) 677-3679
   - E-mail: mercedes.gallup@csun.edu

   - **University Police:** Sgt. Douglas Flores
   - Phone: (818) 677-2111
   - E-mail: douglas.flores@csun.edu

   - **Athletic Training**: Steven Grech
   - Phone: (818) 677-3237
   - E-mail: steven.grech@csun.edu

- **Physical Plant Management:** John Haran
- Phone: (818) 677-2222
- E-mail: john.haran@csun.edu

- **Physical Therapy:** Janna Beling, PhD, PT
- Phone: (818) 677-7445
- E-mail: janna.beling@csun.edu

- **Kinesiology:** Carol Bennett
- Phone: (818) 677-5707
- E-mail: carol.bennett@csun.edu

- **Oviatt Library:** Lynn Lampert
- Phone: (818) 677-2272/7104
- E-mail: lynn.lampert@csun.edu

- **Student Recreation Center**: Jimmy Francis
- Phone (818) 677-2629
- Email: jimmy.francis@csun.edu

California State University, Northridge	Type of Inspection / Audit
Automated External Defibrillator (AED)	☐ ANNOUNCED
AUDIT INSPECTION FORM	☐ UNANNOUNCED
	☐ ANNUAL

Name of Person(s) Performing Inspection	Date of Inspection	Time of Inspection

Names of Personnel Interviewed

A _____   C _____

B _____   D _____

Administration and Operations - Audit Factors

	Yes	No	
1	☐	☐	Public Safety AEDs are found properly stored in a state of readiness with all required / properly maintained supplies (2 sets defibrillator pads, resuscitation kit, spare battery, & data card).
2	☐	☐	All CSUN marked police vehicles (cars & motorcycles) and detective vehicle found equipped with an AED device.
3	☐	☐	Monthly AED system checks are being conducted by the AED Coordinator with irregularities being properly reported as stated within department and university policy.
4	☐	☐	Training programs for all operators and/or unit employees have been completed (or scheduled for completion) and are in compliance with department and university requirements. (i.e. initial and renewal certifications)
5	☐	☐	Training records and equipment operation and maintenance records are in compliance with department and university requirements. This shall include proper record retention and storage within the respective training or records unit.
6	☐	☐	If an AED was utilized for an injury and/or illness, were proper protocols adhered to in the completion of a RIMS report, AED Incident report, and forwarding of said reports and data card to those specified within the policy?
7	☐	☐	If an AED was utilized, was the equipment cleaned, decontaminated, and repackaged in a state of readiness as specified by department/university policy?
8	☐	☐	Have officers exhibited a state of readiness in their knowledge and skills to effectively operate an AED device as described in the department/university "Prescription for Use of the AED" policy section? (Use random interviews of authorized users during the course of their work.)
9	☐	☐	Shift supervisors are ensuring their officers are completing AED operational readiness checks (battery & supplies) prior to their checking out a vehicle. These are to be random checks and documented in the supervisor shift log per policy.
10	☐	☐	Officers are carrying AEDs to all serious or critical medical calls, as specified within department policy.
11	☐	☐	
12	☐	☐	
13	☐	☐	

Comments: [Any audit factor not meeting requirements shall be explained. Include discrepancies that were reviewed and actions taken.]

Audit Meets Requirements:	Signature of Person(s) Performing Audit Inspection	Date	Number of Additional Pages Attached
Yes ☐ No ☐			