

## **Automated External Defibrillators (AEDs)--NEW**

The purpose of this procedure is to assist employees who are trained and willing to use an AED in the event such use is necessary. These procedures do not create an obligation to use the AED, nor do they create an expectation that trained staff will be present at every event where use of the AED might be beneficial.

The district will place AEDs in the following locations: The main building at the elementary school, and the gym (Grange building). The district will select and train staff members in its use. If any event occurs requiring use of an AED, trained staff will:

- Dial 911 immediately;
- Follow Cardio-Pulmonary Resuscitation (CPR) procedures; and
- Retrieve and use the AED as training dictates.

### **AED Selection, Placement and Management**

#### **A. Approved Equipment:**

1. All AEDs purchased or donated for placement in district facilities must meet the requirements of, and be approved by, Douglas County Emergency Medical Services (EMS), and/or the NCESD.
2. To the extent possible, the brand of AED used should be the same throughout district facilities to provide consistency in training and operation.
3. The district will maintain on file a specifications/technical information sheet for each approved AED model purchased or donated to the district.
4. The district will notify local EMS of the existence and location of the AEDs

#### **B. Training:**

1. Selected staff (Defibrillator Response Team or DRT) will be provided with an initial training course approved by the Washington State Department of Health in the use of AEDs. A copy of the training certificate will be kept in the employee's personnel file.
2. Upon acquiring the defibrillator, medical direction in CPR and AED use will be obtained from an approved instructor.
3. AED use will be included in CPR training programs arranged by the district and directed by an approved trainer. AED training course shall be consistent with the AHA Heartsaver course and include the following content:
  - A. Proper, safe and effective use, maintenance, and periodic inspection of the AED device and common troubleshooting techniques for an AED
  - B. Assessment of an unconscious person to determine if a cardiac arrest has occurred, and the appropriateness of applying the AED.
  - C. Defibrillator safety precautions to enable the user to administer a shock without jeopardizing the safety of the victim, the user, or other persons at the scene.
  - D. Rapid accurate assessment of the victim's post-shock status to determine if further activation of the AED is necessary.
  - E. The role of the rescuer in the coordination of care for the cardiac arrest victim on arrival of EMS personnel.

- F. Scenario-based practice consistent with common scenarios that rescuers may face.
- G. Routine AED maintenance trouble shooting options and special situations that the rescuer might encounter.
- H. An AED is best utilized by those who have successfully completed the AHA Heartsaver AED course, or equivalent, and has demonstrated proficiency with the AED through completion of a AED-CPR skills evaluation. However, in an actual event, if no trained persons are available, responding laypersons should follow directions provided by a 911 dispatcher.

- 4. Proficiency re-training for district employees certified in AED-CPR skills will be required every two years. Every two years, all DRT members will undergo AED-CPR skills proficiency demonstration, conducted by a qualified AHA instructor. This will include, but not be limited to, the following:
  - a. Safe and effective use of the *AED*
  - b. Perform in a single or multi-shock practical exam.
  - c. Demonstrate common trouble-shooting techniques used with the *AED*
  - d. Provide documentation of routine maintenance.
- 5. Employees receiving training in the use of the AED may include health room assistants and office staff with health room responsibilities. Absent a contractual requirement, training is voluntary.
- 6. Employees should use the AED only to the extent their training allows.
- 7. Employees trained to use an AED will only be held to the standards embodied in the state's Good Samaritan Legislation (RCW 4.24.300).

C. Accessibility, Availability, Security:

- 1. During school hours, the AED will be housed in a designated location that allows for security and visibility. Ideally, the AED will be placed near a phone. Staff should be able to access the device outside of school hours.
- 2. Outside of school hours, the AED may be moved from its normal location by trained staff in order to support athletic or academic activities. A sign must be left in its place that clearly indicates who has the AED, its exact temporary location and estimated time of return.
- 3. Community members and individuals using district facilities on a contractual basis are not guaranteed access to an AED or AED trained staff.

D. Routine Maintenance:

- 1. A schedule for maintaining the AED will be dictated by the product manufacturer and the Washington Department of Health.
- 2. Most AEDs perform periodic self-diagnosis, including a check of battery strength and an evaluation of internal components.
- 3. Office staff will be responsible for checking the AED, including monitoring battery and maintenance indicators, and will immediately determine if device needs to be serviced or if supplies are missing or will soon expire.

4. Periodic maintenance of the AED will be documented by dating and initialing a card located in the AED storage cabinet.

### **Emergency Response During School Hours:**

- A. Assess scene safety. Rescuers are not expected to place themselves at risk in order to provide aid to others. Make the scene or environment safe before attempting to provide assistance. Move the victim out of traffic, out of water, and/or verify that the victim is not in contact with any live electrical connections.
- B. Confirm unresponsiveness
- C. Activate System
  1. From any school campus phone or cellular phone, dial 9-1-1.
  2. Alert main school office to the emergency and victim's location. If victim is in the gym, gym parking lot, or surrounding area, send a runner to the office to call 9-1-1 if available.
  3. Main office staff will notify DRT members to retrieve AED and report to the emergency scene.
  4. Main office staff will assign someone to wait at main building entry to direct Emergency Medical Services (EMS) to the victim's location if necessary.
- D. CPR/AED Trained Rescuer Response:
  1. Observe universal precautions using gloves and ventilation mask.
  2. Open airway.
  3. Check for breathing. If breathing normally, continue to monitor closely while checking for pulse. If breathing normally, place in the recovery position and monitor breathing closely.
  4. If the victim is not responsive and not breathing normally, immediately obtain and apply the AED.

### **Age > 8 Years to Adults:**

- If AED is not immediately available, begin chest compressions and breathing (CPR) until the AED arrives. Check for a pulse before beginning CPR, but if a pulse is not CLEARLY identified within 10 seconds, give cycles of 30 compressions and 2 breaths at a rate of 100 – 120 compressions per minute. Compression-only CPR (no ventilations) is equally acceptable based on rescuer preference and comfort. Perform CPR until the AED arrives and is ready for use.

### **Infants/Children < 8 Years:**

- If a rescuer is alone and the victim is a child <8 years old or <55 lbs. and has no known cardiac condition, perform two (2) minutes of infant/child CPR before activating the emergency response system and getting the AED.
5. AED Trained Rescuer Response:
    1. Turn on AED.
    2. Apply electrode pads to victim's bare chest (according to diagram on pads)

- Peel electrode pads, one at a time, from the backing or liner.
- Shave or clip chest hair if it is so excessive it prevents a good seal between electrode pads and skin.
- Wipe chest clean and dry if victim's chest is dirty or wet.
- Press electrode pads firmly to skin.

**NOTE:** If victim is < 8 years old or < 55 lbs., remove pre-connected adult defibrillation electrodes and connect the Infant/Child Reduced Energy Defibrillation Electrodes to the AED. Do not delay therapy to determine precise age or weight of child. If in doubt, defibrillate with pre-connected defibrillation electrodes.

3. Analyze rhythm. Make sure no one is touching the victim, cables, clothing or AED. Refrain from using any portable radios near the victim while the AED is analyzing.
4. If a shockable rhythm is detected, the AED will charge.
5. Look around to ensure no one is touching the victim and call loudly, "Everyone clear".
6. Depress the shock button when directed to do so by the AED.
7. Immediately after shock, resume CPR for 5 cycles (or 2 minutes if compression only CPR) before reanalyzing. If a shock is again advised, follow the previous three steps.
8. If a non-shockable rhythm is detected, the AED will direct you to check a pulse, and if no pulse to begin CPR.
9. Continue with CPR for 5 cycles (or 2 minutes if compression only CPR). Check rhythm every 5 cycles (or 2 minutes if compression only CPR) and continue algorithm until EMS providers arrive, or an endpoint as outlined below is achieved.
10. If the victim should regain a pulse but is not breathing, perform rescue breathing.
11. If the victim regains a pulse and starts breathing, place in the recovery position and monitor pulse and breathing closely.
12. Upon EMS arrival, turn over the care of the victim. Assist EMS as directed.

### **Emergency Response After-School Hours:**

#### **A. Athletic Trainer-Covered Events:**

1. Confirm unresponsiveness
2. Activate system:
  - From any school campus phone, public or cellular phone, dial 9-1-1.
  - Alert athletic staff of emergency by sending a runner to inform the athletic trainer, athletic director or field/gym manager.
  - If present, the athletic trainer, or a designee, will retrieve the AED.
  - If a CPR and/or AED trained individual is available, CPR and AED procedures should be initiated until EMS arrives.
  - Follow CPR/AED procedure steps in section: During School Hours, starting at #4.

B. Academic and Other School Events (if AED available):

1. Confirm unresponsiveness
2. Activate system:
  - At any school campus phone, public or cellular phone, dial 9-1-1.
  - Alert the supervising staff member of the emergency.
  - If CPR/AED trained, the supervising staff will retrieve the AED. CPR and AED procedures should be initiated until EMS arrives.
  - Follow CPR/AED procedure steps in section: During School Hours, starting at #4.

**Post-Emergency Event:**

A. Event Data

1. Immediately following the incident, the supervising employee will contact EMS to retrieve data from the AED.
2. The supervising employee will document the name of the fire/rescue responder and include this information on the district accident form.
3. The supervising employee will forward a copy of completed form to AED Program Coordinator or designee on the next business day.

**Return of the AED to operational service:** As soon as possible after the event, a designated staff member from maintenance will complete a post-event checklist to ensure that the AED is returned to operational condition, including replacement of any single use items and resuscitation supplies.

**Critical event stress debriefing:** District employees may arrange an informal debriefing for school district and community members regarding the incident. EMS may also assist in setting up a debriefing.

**Adoption Date: May 30, 2019**

**Orondo School District #13**

**Revised:**

**Classification: Priority**