

AUTOMATED EXTERNAL DEFIBRILLATOR (AED) POLICY AND PROCEDURES

By: Mary Doublet Director, Risk Management and Health Benefits

Fiscal Year 2023-2024

The following document describes the policies and procedures to be used in governing an early defibrillation program. It is the goal of this program to provide a rapid response to sudden cardiac arrest for employees, students, and visitors. It is the intent of this document to give the early defibrillation response team members general guidance in response to an incident of sudden cardiac arrest (SCA). The document is not intended to cover all circumstances involved in such emergencies. All early defibrillation response team members must operate within the parameters of this early defibrillation program.

Scope

This document describes the policies and procedures relating to an early defibrillation program utilizing employees who serve as responders in CPR and defibrillation therapy in the event of a medical emergency.

Purpose

The purpose of this policy is to provide guidance in the management or administration of the Colton Joint Unified School District's Automated External Defibrillator (AED) program.

Under California Civil Code Section 1714.21, the State of California provides protection from civil damages to entities that acquire an AED for emergency use as long as the entity has complied with subdivision (b) of Section 1797.196 of the Health and Safety Code. Individuals using an AED or performing CPR are protected from civil damages if they provide emergency care or treatment in good faith and do not expect compensation. These protections do not apply in the case of personal injury or wrongful death resulting from the gross negligence, willful, or wanton misconduct of the person who renders emergency care or treatment by the use of an AED.

This program brings together state and local regulations, policies, procedures, training requirements and standards, and medical direction required for the establishment of Colton Joint Unified School District's **Automated External Defibrillator (AED) Program.**

Medical Rationale

An Automated External Defibrillator (AED) is used to treat victims who experience sudden cardiac arrest (SCA), a condition that occurs when the electrical impulses of the human heart malfunction causing a disturbance in the heart's electrical rhythm called ventricular fibrillation (VF). This erratic and ineffective electrical heart rhythm causes complete cessation of the hearts normal function of pumping the blood resulting in sudden death.

Cardiopulmonary Resuscitation (CPR) is a means to intervene while emergency medical help has been notified and is in transit. The survival rate with using CPR is less than five percent. The most effective treatment for VF is the administration of an electrical current to the heart by a defibrillator, delivered within a short time of the onset of VF.

An AED is only to be applied to victims, who are unconscious, not breathing normally and showing no signs of circulation such as normal breathing, coughing or movement. The AED is connected to the victim by conductive pads. Whether a shock is needed is determined by the device and delivered automatically if it is determined to be appropriate.

Early Defibrillation Program Overview

The goal of the early defibrillation program is to participate actively in the chain of survival, illustrated below, by providing early defibrillation to any victim of sudden cardiac arrest (SCA).

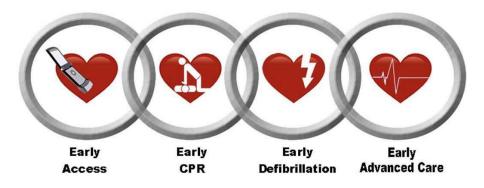


Figure 1. Chain of Survival

System Owner

The System Owner is Colton Joint Unified School District. See Appendix A for contact information.

Program Coordinator

At all times, while this policy and procedures are in effect, the District will maintain a program coordinator. This person is responsible for the overall coordination, implementation, and continued operation of the program. The program coordinator or alternate contact will be available in person or by phone within a reasonable amount of time to answer any questions or concerns. The Program Coordinator for Colton Joint Unified School District is the Director/Manager of Risk Management & Health Benefits.

Program Coordinator Responsibilities

- Ensure that the AED Program complies with all federal, state and local regulations.
- Ensure that issues related to training, scheduling of basic and periodic reviews, and maintenance of training standards and authorized individual training, and record keeping are managed on a continuing basis.
- Coordinate employee selection for AED training.
- Contact Devices for Life (Program Manager) to coordinate equipment and accessory maintenance.
- Maintain records and all documents pertaining to program.
- Revise this policy and procedure as required.
- Contact Devices-For Life (Program Manager) for downloading the Medical Information after an event and send a copy to the medical advisor.
- Notify AED program vendor, Devices-For Life, LLC (Medical Director) of any emerging medical issues and/or events, and any AED program deficiencies and/or problems.

Site Coordinators and Location of AEDs

Site Coordinators have attended the AED orientation. It is the goal of the District to have at least (1) certified responder available at each site during business hours who can deliver defibrillation to an arrest victim within 3 to 5 minutes of collapse as recommended by the American Heart Association. We recognize that they legally do not have a duty to render aid but if they do so it is voluntary and in good faith.

The AEDs at the various facilities are tagged with instructions for use and Emergency Contact information.

PLEASE NOTE:

The AEDs within Colton Joint Unified School District's facilities are housed in wall cabinets with the proper AED signage for recognition and easy accessibility.

The AEDs located within the Colton Joint Unified School District facilities are intended for use by all employees during regular school hours.

Site Coordinators Responsibilities

- Understand and comply with the requirements of the Colton Joint Unified School District's AED policy.
- Maintain posted instruction, next to the AED, in no less than 14-point type, on how to use the AED. This is met by laminated tags that are affixed to the left side of each AED by a zip tie.
- Perform a quarterly AED check following the procedure checklist (Appendix C) and submit the report to the Program Coordinator no later than February 15, May 15, August 15, and November 15.
- Facilitate awareness to all staff members, at least once per year, to review AED information to include a product demonstration and one-page handout as required by law. (SB 658)
- Provide annual notification to school employees as to the location and number of units on the campus.
- When a medical event occurs, complete the AED Use Event Summary Form (Appendix D) and submit it to the Program Coordinator
- When a medical event occurs, ensure the AED is taken to the Program Coordinator within 24 hours for the medical report to be downloaded. Take the AED to the Program Coordinator on the next business day if the medical event occurs after hours.
- Contact the Program Coordinator whenever the ready kit needs to be replenished and/or the electrodes have been used during a medical event.
- Communicate with the Program Coordinator on issues and/or related problems with an AED and/or location of units.

A "Checklist for Site Coordinators" is attached as Exhibit E for reference.

Medical Control/Advisor

The Medical Advisor for the AED program is provided by Keystone Industrial Medicine.

Medical Advisor Responsibilities

The Medical Advisor for the AED program has the ongoing responsibility to:

- Provide medical direction for the use of AEDs.
- Ensure the AEDs are tested as required by law.
- Review guidelines for emergency procedures related to the use of the AED and CPR.
- Provide all information governing the use, installation, operation, training, and maintenance of the AED.
- Evaluate post-event review forms and digital files downloaded from the AED.
- Submit any reports required to the San Bernardino County Emergency Medical Services (EMS) agency as required by law (Report AED use via AED Use Event Summary Form, Appendix D.)

Program Manager

The Program Manager is Devices - For Life, LLC (DFL). The Program Manager is a certified AED specialist and approved vendor. The Program Manager is also a nationally licensed certified EKG technician.

Program Manager Responsibilities

- Provide on-site/WebEx annual AED audits.
- Provide on-site bi-annual AED audits & performance checks for any AEDs that have been identified as units used, vandalized or prompting any errors as per SB 658.
- Provide AED orientations (per terms or allotments per DFL quotes).
- Provide equipment and accessories (per terms or allotments per DFL quotes).
- Provide review of any new legislation, FDA notifications and manufacturer recalls or advisories as it relates to AEDs or program.
- Make recommendations as needed to either enhance program, minimize gaps and/or to help increase success of program.
- Provide budgets as needed for on-going support, maintenance and replacement items.
- Provide on-site support for on-going maintenance and troubleshooting for any AEDs identified as needing technical support.
- Provide assistance with or downloading of AEDs if used.
- Provide cleaning and restoring of AEDs after use.

- Complete and process all AED event data usage forms to include submission to the transporting hospital, County EMS Office, manufacturer and CJUSD Risk Management.
- Responsible for initial tagging of AEDs with device identifier, location, contact information and last minute instructions for the use of the AED as required by SB 658.
- Provide policy draft and annual review.
- Provide loaner units when an AED is removed from service until restored to working order or otherwise replaced.
- Provide 24/7 support.

School Principal Involvement for AED

Senate Bill 658 Effective 9/03/2015

An act to amend Section 1714.21 of the Civil Code, and to amend Section 1797.196 of the Health and Safety Code

This bill would revise the public or private K–12 school provisions by instead requiring, when an AED is placed in a public or private K–12 school, the school principal to ensure that the school administrators and staff annually receive information that describes sudden cardiac arrest, the school's emergency response plan, and the proper use of an AED, by instead requiring the school principal to ensure that instructions, in no less than 14-point type, on how to use the AED are posted next to every AED, and by deleting the requirement that the school principal designate the trained employees who are available to respond to an emergency that may involve the use of an AED during normal operating hours.

Assembly Bill 1766 Effective 1/1/2019

An act to amend Section 116045 of, to amend the heading of Article 5 (commencing with Section 116025) of Chapter 5 of Part 10 of Division 104 of, and to add Section 116046 to, the Health & Safety Code, relating to swimming pools.

This bill would require those public swimming pools, as defined, that are required to provide lifeguard services and that charge a direct fee to additionally provide an Automated External Defibrillator (AED) during pool operations, as specified. Because the failure to comply with these provisions would be a crime, the bill would create a state-mandating local program. The bill would also require the State Department of Education in consultation with the State Department of Public Health, to issue best practices guidelines related to pool safety at K-12 school as specified.

Assembly Bill 2009 Effective 7/1/2019

An act to add Sections 35179.4 and 35179.6 to the Education Code, relating to Interscholastic athletic programs.

Existing law authorizes school districts to provide specified medical services in connection with athletic events that are under the jurisdiction of, or sponsored or controlled by school districts. Existing law authorizes a public school to solicit and receive non-state funds to acquire and maintain an automated external defibrillator (AED).

If a school district or charter school elects to offer any interscholastic athletic program, this bill would require the school district or charter school to (1) ensure that there is a written emergency action plan in place, and posted as specified. (2) acquire, commencing July 1, 2019, at least one AED for each school within

the school district or charter school to be available on campus, (3) encourage that the

AEDs are available for the purpose of rendering emergency care or treatment, AEDs are available for the purpose of rendering emergency care or treatment as specified, (4) ensure that the AED or AEDs are available to athletic trainers and coaches and authorized persons at the athletic program's on campus activities or events, and (5) maintained and regularly tested, as specified.

Assembly Bill 1639 Effective 7/1/2017

An act to add Article 13.5 (commencing with Section 33479) to Chapter 3 of Part 20 of Division 2 of title 2 of the Education Code, relating to pupil safety.

This bill would create the Eric Paredes Sudden Cardiac Arrest Prevention Act and would require the State Department of Education to post on its internet website guidelines, videos and information sheet on SCA symptoms and warning signs, and other relevant materials relating to sudden cardiac arrest. The bill would require a pupil in any public school, including a charter school, or private school that elects to conduct athletic activities, and the pupils parent/guardian, to sign and return an acknowledgment of receipt of an information sheet on SCA symptoms and warning signs each school year before the pupil participates in an athletic activity, as specified. The bill would require a coach, athletic trainer, or authorized person, as defined, to remove from participation a pupil who passes out or faints while participating in or immediately following an athletic activity and would require a coach of an athletic activity to complete a SCA Awareness training course every other school year. The bill would impose penalties, on after July 1, 2019, for a violation of the provision requiring a coaching to complete a SCA training course as specified.

Trained Employees-§100037

(a) Any training program, AED Service Provider or vendor may authorize a Lay Rescuer to apply and operate an AED on an unconscious person who is not breathing only if that Lay Rescuer has successfully completed a CPR and AED course according to the standards prescribed herein.

(b) The training standards prescribed herein shall apply to employees of the AED Service Provider and not to licensed, certificated or other prehospital emergency medical care personnel as defined by Section 1797.189 of the Health & Safety Code.

Required Training Hours and Topics

The training shall consist of not less than 4 hours and will comply with the American Heart Association (AHA) or the American Red Cross (ARC) standards presented in one session and shall include the following topics and skills.

- 1. Proper use, maintenance and periodic inspection of AED;
- 2. The importance of:
 - a. CPR
 - b. Defibrillation
 - c. Advanced life support
 - d. Internal emergency response system
 - e. Adequate airway care
- 3. Overview of the local EMS system, including 9-1-1 access, and interaction with EMS personnel.
- 4. Assessment of an unconscious patient to include evaluation of airway, breathing, and circulation, to determine if cardiac arrest has occurred and the appropriateness of applying and activating an AED.
- 5. Information relating to defibrillator safety precautions that enable the individual to administer shock without jeopardizing the safety of the patient or the authorized individual or other nearby persons to include, but not limited to:
 - Presence of water or liquid on or around the victim
 - Presence of transdermal medications, implanted pacemakers or automatic implanted cardioverter-defibrillators
- 6. How to use the District's AED units and follow the prompts of the AED once the unit is turned on?
- 7. Upon the arrival of more medically qualified personnel, communicate the actions already taken.

Basic training and review sessions will be conducted according to the following schedule:

- AED renewal will be conducted at least every two years per the AHA.
- The Program Coordinator may schedule reviews more often if necessary.

Authorized AED Users

The AED may be used by:

- Any person who meets the training requirements set forth by the American Heart Association or American Red Cross guidelines in CPR/AED
- Anyone who has received training through the District's AED training program
- Anyone who, per the Good Samaritan Law (California Civil Code 1714.2 and 1714.21), has acted in good faith and not for compensation rendering emergency care or treatment by the use of an AED at the scene of an emergency

Emergency Medical Response Plan

• Once an emergency is identified, CALL 911.

AHA District Trained Personnel/Site Coordinators: Employee's Responsibilities during an event

- Receive emergency medical calls from internal locations within a District facility
- Contact the external community 9-1-1 response team
- Contact the Site Coordinator and/or an AED-trained employee and send to emergency locations
- Assign someone to meet responding EMS aid vehicle and direct personnel to the site of the medical emergency
- Notify Program Coordinator of any ensuing medical emergency by assisting the Site Coordinator in completing the AED Use Event Summary Form (Appendix D) and submitting it to the Program Coordinator

AED Equipment

Approved Equipment:

- Defibtech ReviveR
- HeartSine Samaritan

Additional Equipment

- Wall cabinet (mounted)
- 3D Sign placed over security alarmed wall cabinet
- One set of adult and pediatric defibrillation pads
- One Ready Kit containing:
 - o one pair of universal size latex-free gloves
 - o one razor
 - o one set of trauma sheers
 - o one facemask barrier device
 - o one gauze pad
 - o one towelette

Equipment Use

- The AED will be brought to all medical emergencies.
- The AED should be used on any person who displays **ALL** the symptoms of cardiac arrest:
 - Victim is unconscious
 - Victim is not breathing
 - Victim is non-responsive

Protocols for Use

1. Following CPR guidelines, establish unresponsiveness. **CALL 9-1-1** or ask a bystander to call 9-1-1 for you.

2. If a second rescuer is present, CPR should be initiated until the AED is brought to the scene and electrodes are placed on the victim's chest.

3. If the individual is unconscious, not breathing and has no signs of circulation, turn the AED on by pushing the green on/off button and follow voice and light prompts.

NOTE: If the individual is under the age of 8 and/or weighs less than 55 pounds, the adult electrodes can be used as long as they can be placed on the chest without touching or overlapping.

4. The unit, with voice and visual prompt will instruct you to place electrodes on the victim.

5. Apply gloves.

6. Loosen any clothing to expose the chest completely. If necessary, cut clothing in the center to expose the chest completely. **REMOVE ANY VISIBLE MEDICATION PATCHES. DRY THE SKIN WITH GAUZE.**

7. Turn on AED by pressing green on/off button, open electrode package, place electrodes according to prompts and diagram on package.

- If excessive hair is present, shave the area necessary to provide skin contact with the electrode patch. It is not necessary to shave completely. Do not use excessive time shaving.
- If the individual has an implanted pacemaker or defibrillator unit, **do not place the electrodes directly over these areas.** (Usually a raised area is noticeable under the skin.) Place the electrodes as close to the recommended placement as possible.

8. As soon as the AED detects proper placement of the electrodes, the voice prompt will say, "Do not touch patient; analyzing rhythm."

9. If the AED detects the need for defibrillation, the voice prompt will say, "Stand clear, rhythm detected shock will be delivered in 3-2-1, then it will ask you to push the flashing triangle button. If the AED does not detect the need for defibrillation, the voice prompt will say, "It is now safe to touch the patient, start CPR, give 30

compressions then give two breaths," *Continue* until help arrives or until the AED instructs you otherwise.

10. If at any time the individual regains consciousness, provide supportive care such as airway maintenance, rescue breathing, etc., as needed until help arrives. DO NOT REMOVE THE ELECTRODES OR TURN THE AED OFF UNTIL INSTRUCTED TO DO SO BY EMS OR MEDICAL PERSONNEL.

- 11. Once EMS providers arrive, relinquish care to them.
- Provide a brief verbal report of the incident, including time of your arrival, any rescue action taken, any pertinent medical history if available, and any personal information available such as name, age, etc.
- Only at the direction of rescue personnel, disconnect the electrodes from the AED and then close the lid of the AED.
- Report event immediately to your Site Coordinator. The Site Coordinator will report the event to the Program Coordinator.

Internal Post-Event Responsibilities and Documentation

Place a note in the wall cabinet noting the removal of the AED and location of nearest AED. Submit a completed AED Use Event Summary Form (Appendix D) to the Program Coordinator. Take the AED to the Program Coordinator for medical report downloading or contact the Program Manager for downloading and restoration of unit.

External Post-Event Documentation

A copy of the AED Use Event Summary Form shall be presented within 24 hours of the emergency to the Program Manager.

Returning the Unit to Pre-Event Status

Contact the Program Manager to:

- Download any data and erase from memory.
- Determine functionality of the AED.
- Clean and disinfect the AED as needed.
- Check and replenish supplies as appropriate including adult/pediatric pads, gauze pads, razor, and gloves by contacting the Program Coordinator.
- Tag AED with a bi-annual tag (per SB 658)
- Check the device and housing for cracks and other damage
- Return the AED to its designated place with appropriate supplies

Post-Event Review

Following each event where an AED is utilized, a review shall be conducted to learn from the experience. The Program Manager and Program Coordinator shall conduct and document the post-event review. All key participants in the event shall participate in the review. Included in the review shall be the identification of actions that went well and the area where improvement would be necessary as well as critical incident stress debriefing. A summary of the post-event review shall be maintained by the Program Manager and Program Coordinator.

Equipment Maintenance

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

- The Site Coordinator at each District site shall be informed of changes in availability of the AED. If equipment is withdrawn from service, the Program Coordinator and the Program Manager shall be informed and notified when the equipment is returned to service.
- The Program Coordinator shall be responsible for arranging with the Program Manager to have equipment maintenance performed and documented on a defined "regular" basis. All maintenance tasks shall be performed according to equipment maintenance procedures as outlined in the operating instructions.
- Following use of emergency response equipment, all equipment shall be cleaned and/or decontaminated as required. If contamination includes body fluids, the equipment shall be disinfected.

Routine Maintenance

- The AED monitors daily battery strength.
- The Site Coordinator will perform a quarterly AED check following the procedure checklist (Appendix C). The procedure checklist will be initialed by the Site Coordinator after the completion of the quarterly check and forwarded to the Program Coordinator.
- If the Visual Indicator is manipulated, flashes red and omits an audible beep, or any other abnormal checklist finding is noted, the Program Coordinator is to be notified immediately. The AED will be checked and serviced.
- If the expiration date of the electrode is within 3 months, the Program Coordinator or designee is to be notified immediately.

Ready Kits include:

- One set of defibrillation electrodes connected to the device
 - Adult pads
 - Pediatric pads
- One pair of universal size latex-free gloves (individually bagged/wrapped)
- One disposable razor (with handle and safety cap)
- One set of trauma sheers
- One 1-way valve barrier mask that is wrapped in a poly bag
- Two packages of gauze (sealed)

Applicable Documents

- American Heart Association or American Red Cross AED Guidelines
- State Immunity from Liability Exclusion
- California State Statutes and Regulations pertaining to the use of Public Access Defibrillators – Title 22 Senate Bill 658

Appendix A Contact Information

For information and assistance regarding the AED program, the individuals listed below may be contacted. Every effort should be made to first contact the Program Coordinator. Only when the Program Coordinator or the District Patrol cannot be reached, will contact be made with the Program Manager.

Program Coordinators

Name	Title	Phone No.
Mary Doublet	Director, Risk Management	909-580-6618
Jessica Jimenez	Risk/Safety Specialist	909-580-6612
Nicole Geiger	Risk/Safety Specialist	909-580-6614
Giovanna DeLeon	Administrative Assistant	909-580-6611

Medical Director

Name	Title	Phone No.		
Dr. Paul Kim	Physician	(909) 521-8818		

Program Manager

Name	Title	Phone No.		
Theresa Fox	Devices For Life, LLC	(714) 394-2606		

Appendix B AED Site Locations

Preschool and Elementary Schools

Site	AED Location			
01 – Alice Birney Elementary	Office			
02 – Cooley Ranch Elementary	Health Office			
03 – Crestmore Elementary	Health Office			
04 – Michael D'Arcy Elementary	Health Office			
05 – Grand Terrace Elementary	Health Office			
06 – Ulysses Grant Elementary	Health Office			
07 – Ruth Grimes Elementary	Health Office			
08 – Jurupa Vista Elementary	Health Office			
09 – Mary B. Lewis Elementary	Health Office			
10 – Abraham Lincoln Elementary	Health Office			
11 – William McKinley Elementary	Health Office			
12 – Reche Canyon Elementary	Office			
13 – Paul Rogers Elementary	Office Hallway			
14 – San Salvador Preschool	Office			
15 – Gerald A. Smith Elementary	Health Office			
16 – Sycamore Hills Elementary	Office			
17 – Terrace View Elementary	Health Office			
18 – Woodrow Wilson Elementary	Health Office			
19 – Walter Zimmerman Elementary	Health Office			
20 – Joe Baca Middle	Health Office			
21 – Joe Baca Middle	PE Equipment Room			
22 – Colton Middle	Health Office			
23 – Colton Middle	Boys PE Room			
24 – Terrace Hills Middle	Health Office			
25 – Terrace Hills Middle	Girls Locker Room			
26 – Terrace Hills Middle	Counseling Office			
27 – Ruth O. Harris Middle	Health Office			
28 – Ruth O. Harris Middle	Girls PE Room			

Appendix B AED Site Locations

High Schools and District Offices

Site	AED Location		
01 – Bloomington High	Health Office		
02 – Bloomington High	Athletic Director's Office		
03 – Bloomington High	Football Stadium		
05 – Colton High	Health Office		
06 – Colton High	PE Office		
09 – Grand Terrace High	Health Office		
10 – Grand Terrace High	Gym		
11 – Grand Terrace High	Pool Area –Outside		
13 – Slover Mountain High	Health Office		
38 – Washington High	Health Office		
39 – Maintenance and Operations	Warehouse		
40 – District Office (Valencia)	Business Services Division Hallway		
41 – District Office (Valencia)	Print Shop		
42 – Transportation	Office		
43 – Board Room	Main Lobby		
44 – District Office (Hermosa)	Staff Lounge		
45 – Risk Management (Roving)	Office		
07 – Colton High	Security Office		
47 – Adult Education	Office		
12 – Grand Terrace High School	Stadium- Coaches Office		
08 – Colton High School	Stadium- Coaches Office		
14 – Slover Mountain High School	Pool Area – Outside		
04 – Bloomington High School	Gym		
15- Colton High	Athletic Directors Office		
53 – District Office (Hermosa)	Risk Management		
54- Student Service/PPS	Copy Room		
55- Language Support Services	Connecting Hallway		
56- Risk Management (Roving)	Office		
57- Risk Management (Roving)	Office		

Appendix C AED Quarterly Checklist

Each AED must be checked on a quarterly basis as indicated below. The completed form shall be forwarded to the Program Coordinator (fax to 909.433.9469 or email to giovanna_deleon@cjusd.net).

Month of Inspection: Year of Inspection: Site:	February May August November 20XX
# of Units to Inspect:	1 2 3 4 5 (For units 3 or more, submit multiple sheets)

Site Coordinator Name (Printed): Site Coordinator Signature:

AED Location:	AED Location:		
AED Serial #:	AED Serial #:		
Battery expiration date:	Battery expiration date:		
Adult pad expiration date:	Adult pad expiration date:		
Pediatric pad expiration date:	Pediatric pad expiration date:		
No physical damage to AED and	No physical damage to AED and		
casing	casing		
Status indicator blinking green	Status indicator blinking green		
(if red, notify Risk Management	(if red, notify Risk Management		
immediately)	immediately)		
Ready Kit Pack (disposable	Ready Kit Pack (disposable		
razor, scissors, one-way face mask,	razor, scissors, one-way face mask,		
gloves, gauze, towelette)	gloves, gauze, towelette)		
Return any extra ready kit pack items	Return any extra ready kit pack items		
to RM.	to RM.		

AED Use Event Summary Form

AED USE EVENT SUMMARY FORM

Location Of Event:			Age of Victim:		
Date Of Event: Time of Event:					
Oversight Physician:					
Program Coordinator: Devic	es For Life, LLC				
Was The Event Witnessed Or N	Was The Event Witnessed Or Non-Witnessed?				
Name Of Rescuer Involved:					
Internal Response Plan Activat	ed? 📃 Yes	No No	AED Seria	l #:	
Was 9-1-1 Called?	Yes 🔲 No	If Yes, Name Of 9-1	-1 Caller:		
Name Of Responding EMS/Fire	e/Police Agency:				
Was CPR Given Before AED Ar	rived?	Yes	📃 No	D	
If Yes, Name(s) Of CPR Rescue	r(s):				
Were Shocks Delivered?	Yes 📃 No	If Yes, Total Numbe	r Of Shock	5:	
	Regain A Pulse?	Yes	Ne Ne	o (Unknown
Did Victim	Resume Breathing?	Yes	🔲 N	o (Unknown
	Regain Consciousness?	🔲 Yes	🔲 N	o (Unknown
Was The Procedure For Transferring Patient Care To Local EMS Agency Executed?					
Hospital/Medical Center Patient Was Transported To:					
County Of Event Occurred:					
Name Of Person Completing This Form:					
PLEASE MAIL OR FAX THIS COMPLETED FORM TO: Attn: AED Coordinator Devices For Life					

Devices For Life P.O. Box 28062 Anaheim Hills, CA 92809 PH: 714.394.2606 Fx: 424.206.1430



Appendix E Checklist for Site Coordinators

Thank you for accepting the role as Site Coordinator for the Colton Joint Unified School District Automatic External Defibrillator (AED) Program. As the Site Coordinator, you will have the following responsibilities:

Quarterly Check of the AED

- Complete the AED Quarterly Checklist (Appendix C).
- Submit this report to the Program Coordinator.

During a Medical Event:

- Call 9-1-1 immediately If you can't do so yourself, DIRECT someone to call
- Grab the AED from the wall cabinet or DIRECT someone to get the AED
- Open the lid of the AED and follow the prompts
- Stay with the victim until emergency personnel arrive on scene

After a Medical Event:

- Leave a note in the wall cabinet noting the removal of the AED and location of nearest AED.
- Complete an AED Use Event Summary Form (Appendix D)
- Take the AED to the Program Coordinator for medical report downloading
- Send all information to <u>theresafox@devicesforlife.com</u> or faxed to (424) 206-1430.
- Contact the Program Manager for replacement parts, cleaning of unit and performance test.

Ongoing Responsibilities:

- Review the District's AED Policy and Procedures Manual
- Discuss the District's AED program at staff meetings
- Inform new employees of the District's program
- Notify the Program Coordinator of any changes and/or concerns with your facility's AED

Risk Management - risk_management@cjusd.net District Security at (909) 580-6520 Devices For Life, LLC at (714) 394-2606 for assistance

Definitions

Early Defibrillation Response Team Member. An individual who is trained in AED use to respond to SCA medical emergencies and may also be a member of the Emergency Response Team.

Automated external defibrillator (AED or defibrillator). An

automated computerized medical device programmed to analyze heart rhythm, recognize rhythms that require defibrillation, and provide visual and voice instructions for the device operator, including, if indicated, to push the button to deliver an electric shock.

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 ERT or EMS.

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, who provide medical assistance and/or ambulance transport.

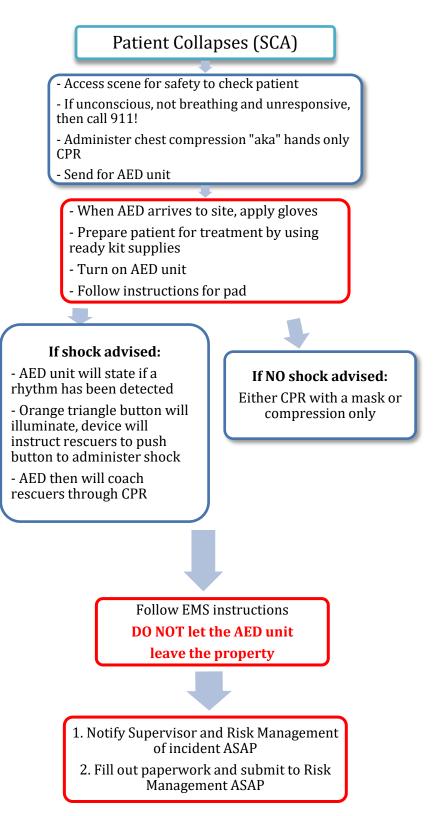
Emergency Response Team (ERT), or Medical Emergency Response Team (MERT). A group of medical responders who train on a regular basis to respond to medical emergencies.

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

Sudden cardiac arrest (SCA). A significant life-threatening event when a person's heart stops or fails to produce a pulse.

Adult Response Flow Chart

(Age 8 and older is considered an adult)



Child Response Flow Chart

(Anyone under age 8 or under 55lbs)

