

SUNY PAD Program Periodic Review

ACRONYMS AND REFERENCES

PAD = Public Access Defibrillation

See *Public Access Defibrillation*, NYS DOH, Bureau of EMS, Policy Statement 09-03, March 2009 @ <http://www.health.ny.gov/professionals/ems/pdf/09-03.pdf>

State Agency AED Mandate: Pursuant to Chapter 510 of the Laws of 2004 and Part 303 of Title 9 of the NYCRR, the State of New York requires all public institutions and buildings of the state, including leased facilities, to be equipped with automatic external defibrillators (AEDs). See <http://ogs.ny.gov/BU/BA/AED.asp> for additional information.

AED = Automatic External Defibrillator

EHCP = Emergency Health Care Provider

REMSCO = Regional Emergency Medical Services Council
<http://www.health.ny.gov/professionals/ems/regional.htm>

LOCATION OF AEDS

Are signs or notices to identify AED locations posted at main entrances in any facility or building in which an AED is stored or maintained on a regular basis? (*The law is silent of the specifications for the sign or notice, but it should be of the size and type that will be easily legible upon entry to the building.*)

Are AEDs placed to support response to the scene of cardiac event *within three minutes*?

Are units inspected and maintained according to manufacturer's recommendations (e.g., monthly inspections)?

Who is responsible for inspection and maintenance?

Check if a review of an adequate sample of records support that the maintenance program is in place and effective.

Are pediatric pads available in those areas where children are likely to be on a regular basis? (If not all unit have pediatric pads, the decision process should be documented.)

TRAINING OF VOLUNTEERS

Has the campus trained at least the greater of 2 volunteers per AED unit or 2 volunteers per floor?

Are a sufficient number of volunteers currently certified?

Is the campus using a NYS DOH approved CPR/AED training program? *(Note: SUNY Life Saver program is not current and should not be used.)*

Indicate programs used:

American Heart Association

American Red Cross

American Safety & Health Institute

Emergency Care and Safety Institute

Emergency First Response

Emergency Services Institute

EMS Safety Service, Inc

Emergency University

Medic First Aid International

National Safety Council

REMSCO of NYC, Inc

Wilderness Medical Associates

Other

PAD NOTICE OF INTENT AND COLLABORATIVE AGREEMENT

Has a notice of intent to provide public access defibrillation ([DOH 4135](#)) been submitted to the local Regional Emergency Medical Services Council (REMSCO) and the NYS Department of Health?

Has the EHCP entered into a collaborative agreement for the PAD program? *See [Providing Medical Direction, NYS DOH, Bureau of EMS, Policy Statement 11-03, March 2011](#)*
<http://www.health.ny.gov/professionals/ems/pdf/11-03.pdf>

Who is the EHCP? Contact Info?

Is the collaborative agreement current?

Expiration Date, if applicable:

The collaborative agreement includes:

Written practice protocols for the use of the AED;

Written policies and procedures which include:

Training requirements for AED users:

A process for the immediate notification of EMS by calling of 911;

A process for identification of the location of the AED units;

A process for routine inspection of the AED unit(s) as well as regular maintenance and which meet or exceed manufacturers' recommendations;

Incident documentation requirements, and

Participation in a regionally approved quality improvement program.

Provide written notice to the 911 and/or the community equivalent ambulance dispatch entity of the availability of AED service at the organization's location;

Has the Notice of Intent (NOI) to Provide PAD (DOH 4135) and a signed Collaborative Agreement been filed with the appropriate Regional Emergency Medical Services Council (REMSCO)?

Has a new NOI and Collaborative Agreement been filed with the REMSCO if the EHCP changes.

AFTER AED USE

In the event that the PAD program uses the AED to defibrillate a person, the program must report the incident to the appropriate REMSCO within 48 hours. The REMSCO may request additional information regarding the incident, but the PAD must report, at a minimum, the following information:

The name of the PAD program;

Location of the incident;

The date and time of the incident;

The age and gender of the patient;

Estimated time from arrest to CPR and the 1st AED shock;

The number of shocks administered to the patient:

The name of the EMS agency that responded, and

The hospital to which the patient was transported.

A copy of the usage report should also be provided to the EHCP and System Administration.

COMMENTS

DATE OF REVIEW:

PERSON CONDUCTING REVIEW:

DATE NEXT REVIEW IS DUE:

(Note there is no formal requirement for periodic review; annual program reviews are recommended.)