

# Early Defibrillation Program Registration Guidelines



West Virginia Department of  
Health and Human Resources  
Bureau for Public Health  
Office of Emergency Medical Services

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## **Introduction**

During the 1999 Legislative Session, House Bill 2269 was passed, amending Chapter 16 Article 4C of the West Virginia State Code, authorizing the West Virginia Office of Emergency Medical Services to “register early defibrillation programs”. Working in partnership with the American Heart Association, American Red Cross, EMS, fire fighting, and law enforcement communities, the Legislation established definitions and criteria for entities providing early defibrillation programs including training, medical direction, protocols, and notification of local EMS systems.

## **Purpose**

The 1999 Legislature agreed with the scientific findings of the American Heart Association and others that as many as 250,000 Americans each year suffer from out-of-hospital sudden cardiac arrest. The medical/scientific community believes that 95% of these incidents result in death, and many of these deaths can be prevented if properly trained individuals could provide early automatic external defibrillation.

The Legislature felt very strongly that communities have invested significantly in enhanced 911 and emergency medical services systems. They indicated that early defibrillation programs had to meet certain standards and be coordinated with local 911 and EMS systems.

## Program Requirements

The Legislation requires that “an entity providing an early defibrillation program shall”:

1. Register the program with the Office of Emergency Medical Services, pursuant to article four-c of this chapter, identifying the placement of AEDs, training of AED operators, preplanned EMS system coordination, designation of a medical director, maintenance of AED equipment and reports of AED utilization;
2. Require the operator of an AED to receive appropriate training in cardiopulmonary resuscitation, referred to as “CPR”, in the operation of an AED and in the determination of advance directives from the American Heart Association, American Red Cross, any other nationally recognized course in CPR and AED, or an AED and CPR training program approved by the Office of Emergency Medical Services;
3. Maintain and test the AED in accordance with the manufacturer’s guidelines, and keep written records of this maintenance and testing;
4. Designate a medical director for the coordination of the program, which shall include, but not be limited to, training, coordinating with EMS, creating AED deployment strategies and reviewing each operation of an AED;
5. Notify the local EMS system and public safety answering point or other appropriate emergency dispatch center of the existence of an entity’s early defibrillation program, the location of the program and the program’s plan for coordination with the EMS system;
6. Provide that an operator of an AED who renders emergency care or treatment on a person experiencing cardiac arrest shall activate the EMS system as soon as possible and shall report the use of an AED to the program medical director; and
7. Comply with the guidelines of the West Virginia Office of Emergency Medical Services regarding data collection and reporting.

## How To Meet Program Requirements

1. The Program's Official Representative completes the enclosed application (page 7) and returns it to the Regional EMS Field Office (see map of field office locations).
2. The Program's Official Representative obtains an American Red Cross (ARC) or American Heart Association (AHA) course of instruction for each program provider/AED operator (see list of courses and contacts for ARC and AHA).
3. The Program's Official Representative prepares and administers the entity's AED maintenance program (see manufacturer's guidelines).
4. The Program's Official Representative retains the services of a licensed physician to be the Early Defibrillation Program Medical Director. This individual signs the entity's registration application and agrees to coordinate training, EMS integration, AED deployment strategies, and reviews each AED patient contact.
5. The Program's Official Representative confers with the local EMS agency and 911 center to establish a brief written plan for notification of the EMS system in case of an AED patient contact. This plan is to be submitted to the Regional EMS Field Office with the registration application (a sample plan can be found on page 9).
6. The Program's Official Representative prepares the list of AED operators affiliated with the entity including the operators' training. This list is part of the entity registration application submitted to the Regional EMS Field Office.
7. The Program's Official Representative completes and submits an AED Patient Contact Form whenever an AED operator uses the AED on a patient (submit the form as specified).

## How Does Being Compliant Help?

1. Being compliant with the provisions for an early defibrillation program:
  - a. Means you are **lawfully** performing a vital function for your community;
  - b. According to the Automated External Defibrillator section of Chapter 16 Article 4D, you as an AED provider are “not liable for civil damages as a result of any act or omission in rendering emergency medical care or treatment involving the use of an AED if the care or treatment does not amount to gross negligence, and the following conditions are met:
    1. The person, entity, certified trainer or medical director of the early defibrillation program is in compliance with the provisions of section three of this article, and;
    2. The person is an operator of an AED who gratuitously and in good faith rendered emergency medical care, pursuant to the requirements of section three of this article, other than in the ordinary course of the person’s employment or profession.”

Note: “Section three of this article” refers to the actual legislation in code.
  - c. Means you are supporting your local 911 center and EMS system by involving them in your planning and operations.
  - d. Means you are giving your program medical accountability and credibility by obtaining a physician medical director.
  - e. Means you are guiding the future of AED use in the state by filling out and mailing the Patient Contact Forms when you operate an AED with a patient. This data will allow researchers to determine trends on deployment strategies, program viability, patient response, etc.

## What Can't You Do?

1. You **can't** respond with an AED off-site to provide this service unless you are a licensed EMS agency or have an Affiliation Agreement with a licensed EMS agency. Early defibrillation programs are established for use on-site and should be placed in a central location. Vehicles used on-site, i.e., a coal mine or industrial facility may be used to transport the AED for use elsewhere on the site.

Site examples are:

- a. Sports Complexes
  - b. Churches
  - c. Industrial Sites/Coal Mines
  - d. Schools
  - e. Community Swimming Pools
  - f. Retail Stores
  - g. Others as agreed upon
2. An individual responder cannot provide medical assistance above the level of his/her training, certification or professional license, and the regulations associated with such training, certification or professional license.

## Approved Training Courses

The Office of EMS has approved several courses of instruction from two current sources - the American Red Cross and the American Heart Association. Others will be reviewed as necessary.

The approved American Red Cross course is:

- ! Adult CPR/AED Training Course

The approved American Heart Association courses are:

- ! Heartsaver AED (with skills-station and exam)
- ! Heartsaver FACTS
- ! Healthcare Provider (with AED module and exam)
- ! ACLS Provider Course
- ! ACLS Instructor Course

## Training Contacts:

### American Red Cross:

Karen Shuster, Director, Health and Safety Services  
or  
American Red Cross, North Central WV Chapter  
718 West Pike Street  
Clarksburg, WV 26301

Phone:           Main Office Number:       304-624-7689  
                    Cell Number:                304-476-2812

### American Heart Association:

Megan Bibler, ECC Regional Associate  
American Heart Association  
5455 North High Street  
PO Box 163549  
Columbus OH, 43216-3549

Phone: 1-800-282-0291 Extension 360

For further information or assistance - contact your Regional EMS Field Office (see the attached map).

# Early Defibrillation Program Registration Application

Date:

Entity Requesting Program Registration:

Program Official:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mailing Address:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Address:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Medical Director:

Name: \_\_\_\_\_ WV License #: \_\_\_\_\_

Signature: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

AED Locations: (Attach more sheets if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of AED's to be deployed:

**Note:** This form, the Early Defibrillation Program Operator Roster form, and the Early Defibrillation EMS Integration Plan make up a complete registration packet.



## Early Defibrillation EMS Integration Sample Plan

Entity: \_\_\_\_\_

Official Representative: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

I contacted the local 911 center on \_\_\_\_\_ and spoke with \_\_\_\_\_ whose title is \_\_\_\_\_.

I notified him that we would be implementing an Early Defibrillation Program on or about \_\_\_\_\_. I explained that we were following the Early Defibrillation Program Guidelines provided by the West Virginia Office of Emergency Medical Services. I also explained that all operators have been trained that if an AED is used on a patient, 911 must be notified immediately to start EMS System activation. I inquired as to what agencies would typically respond to this location and requested a list. The following Agencies were contacted and notified of our Early Defibrillation Program.

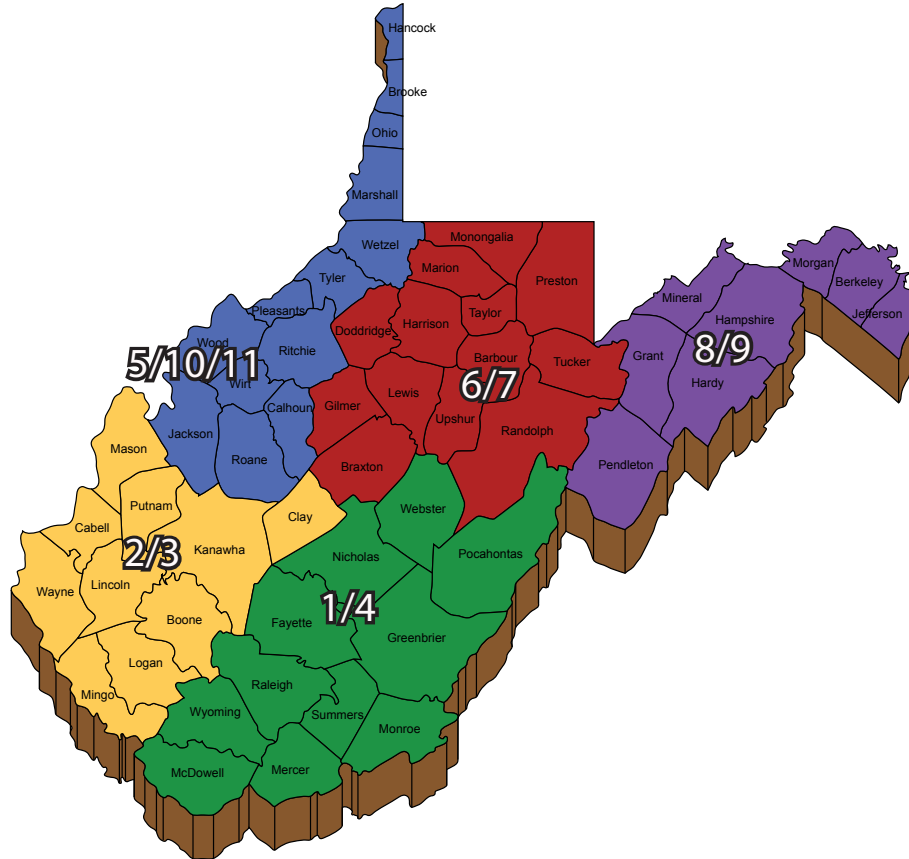
Date	Agency	Contact

**Note: This Form, the Early Defibrillation Program Registration Form, and the Early Defibrillation Operator Roster make up a complete registration packet.**



# TSN Regional EMS Service Areas

WV EMS TSN, Inc. Headquarters  
 4921 Elk River Road, Elkview, WV 25071-0100  
 Joe E. Richards, MA, QMRP II Chief Executive Officer  
 jrichards@wvemstsn.net  
 Office: (304) 965-0573 FAX: (304) 965-0524



**WV EMS TSN Regional Office 1/4**

503 Myers Avenue  
 Beckley, WV 25801  
 (304) 860-1900 / (304) 860-1901 / (304) 860-1902 (FAX)  
 Program Director: Laura Forren  
 Program Assistant: Toni Hall  
 lforren@wvemstsn.net  
 thall@wvemstsn.net

**Service Area Region 1:**  
 McDowell, Mercer, Monroe, Raleigh,  
 Summers, Wyoming

**Service Area Region 4:**  
 Fayette, Greenbrier, Nicholas,  
 Pocahontas, Webster

**WV EMS TSN Regional Office 2/3**

PO Box 7005  
 Huntington, WV 25774-7005  
 (304) 523-9102 (304) 523-7800 (FAX)  
 Program Director: Jim Donathan  
 Program Assistant: Arisba Fink  
 jdonathan@wvemstsn.net  
 afink@wvemstsn.net

**Service Area Region 2:**  
 Cabell, Lincoln, Logan  
 Mason, Mingo, Wayne

**Service Area Region 3:**  
 Boone, Clay, Kanawha, Putnam

**WV EMS TSN Regional Office 5**

58 Fox Drive, #3  
 Mineral Wells, WV 26105  
 (304) 489-1110 (304) 489-1130 (Fax)  
 Program Director: Allisynne Dunlap  
 Program Coordinator: Rocki Louden  
 adunlap@wvemstsn.net  
 rlouden@wvemstsn.net

**Service Area:**  
 Calhoun, Jackson, Pleasants, Ritchie,  
 Roane, Tyler, Wirt, Wood

**WV EMS TSN Regional Office 6/7**

1829 Pleasant Valley Road  
 Fairmont, WV 26554-2700  
 (304) 366-8764 (304) 366-5091 (Fax)  
 Program Director: Gail Dragoo  
 Program Assistant: Marsha Myers  
 gdragoo@wvemstsn.net  
 mmyers@wvemstsn.net

**Service Area:**  
 Barbour, Braxton, Doddridge, Gilmer,  
 Harrison, Lewis, Marion, Monongalia,  
 Preston, Randolph, Taylor, Tucker, Upshur

**WV EMS TSN Regional Office 8/9**

82 Sue Court  
 Martinsburg, WV 25401-2911  
 (304) 263-4913 (304) 263-2302 (Fax)  
 Acting Program Director: Gail Dragoo  
 Program Coordinator: Douglas M. Pittinger  
 Program Assistant: Vacant  
 gdragoo@wvemstsn.net  
 dpittinger@wvemstsn.net

**Service Area:**  
 Berkeley, Grant, Hampshire, Hardy, Jefferson,  
 Mineral, Morgan, Pendleton

**WV EMS TSN Regional Office 10/11**

919 Mull Center  
 Wheeling, WV 26003  
 (304) 233-4440 (304) 233-4402 (Fax)  
 Program Director: Allisynne Dunlap  
 Program Assistant: Regina Patroski  
 adunlap@wvemstsn.net  
 rpatroski@wvemstsn.net

**Service Area:**  
 Brooke, Hancock, Marshall, Ohio, Wetzels

ENROLLED  
COMMITTEE SUBSTITUTE  
FOR  
H. B. 2269

(By Delegates Staton, Facemyer and Martin)

[Passed March 11, 1999; in effect ninety days from passage.]

AN ACT to amend chapter sixteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, by adding thereto a new article, designated article four-d, relating to automated external defibrillators; setting forth legislative purposes and findings; defining terms; establishing certain criteria for entities providing an early defibrillation program, including training for designated operators within a defibrillation program; involving a physician medical director in the medical protocols of a defibrillation program; notifying emergency medical services system when an entity establishes an early defibrillation program; activating the emergency medical services system when an automated external defibrillator is used by an operator; authorizing the development of guidelines for coordination of early defibrillator programs by the office of emergency medical services; and providing limitation of liability for compliance with the statutory provisions except in instances of gross misconduct.

*Be it enacted by the Legislature of West Virginia:*

That chapter sixteen of the code of West Virginia, one thousand nine hundred thirty-one, as amended, be amended by adding thereto a new article, designated article four-d, to read as follows:

ARTICLE 4D. AUTOMATED EXTERNAL DEFIBRILLATORS.

§16-4D-1. Purpose and findings.

(a) The West Virginia Legislature hereby finds and declares that each year more than two hundred fifty thousand Americans die from out-of-hospital incidents of sudden cardiac arrest. More than ninety-five percent of these incidents result in death and, in many cases, death occurs because properly trained persons

with life- saving automated external defibrillators arrive at the scene too late.

(b) The American Heart Association estimates that more than twenty thousand deaths could be prevented each year if early defibrillation were more widely available.

(c) Many communities around the country have invested in 911 emergency notification systems and emergency medical services, including well-trained emergency personnel and ambulance vehicles. However, in many communities, there are not enough strategically placed automated external defibrillators and persons trained to properly operate them.

(d) It is, therefore, the intent of this Legislature to improve access to early defibrillation by encouraging the establishment of automated external defibrillator programs in careful coordination with the emergency medical services system.

#### §16-4D-2. Definitions.

(a) "Automated external defibrillator", hereinafter referred to as AED, means a medical device heart monitor and defibrillator that: (1) Has undergone the premarket approval process pursuant to the Federal Food, Drug and Cosmetic Act, 21 U.S.C. § 360, as amended; (2) is capable of recognizing the presence or absence of ventricular fibrillation; (3) is capable of determining, without intervention by the operator, whether defibrillation should be performed; and (4) upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.

(b) "Early defibrillation program" means a coordinated program that meets the requirements of section three of this article and one that provides early public access to defibrillation for individuals experiencing sudden cardiac arrest through the use of an automated external defibrillator.

(c) "Emergency medical services (EMS)" means all services established by the Emergency Medical Services Act of 1973 in article four-c of this chapter including, but not limited to, the emergency medical services plan of the department of health and human resources providing a response to the medical needs of an individual to prevent the loss of life or aggravation of illness or injury.

(d) "Entity" means a public or private group, organization, business, association or agency that meets the requirements of section three of this article. "Entity" does not include emergency medical services operational programs or licensed commercial ambulance services.

(e) "Medical director" means a duly licensed physician who serves as the designated medical coordinator for an entity's early defibrillation program.

§16-4D-3. Early defibrillation programs.

(a) An entity providing an early defibrillation program shall:

(1) Register the program with the office of emergency medical services, pursuant to article four-c of this chapter, identifying the placement of AEDs, training of AED operators, preplanned EMS system coordination, designation of a medical director, maintenance of AED equipment and reports of AED utilization;

(2) Require the operator of an AED to receive appropriate training in cardiopulmonary resuscitation, referred to as "CPR", in the operation of an AED and in the determination of advance directives from the American Heart Association, American Red Cross, any other nationally recognized course in CPR and AED, or an AED and CPR training program approved by the office of emergency medical services;

(3) Maintain and test the AED in accordance with the manufacturer's guidelines, and keep written records of this maintenance and testing;

(4) Designate a medical director for the coordination of the program, which shall include, but not limited to, training, coordinating with EMS, creating AED deployment strategies and reviewing each operation of an AED;

(5) Notify the local EMS system and public safety answering point or other appropriate emergency dispatch center of the existence of an entity's early defibrillation program, the location of the program and the program's plan for coordination with the EMS system;

(6) Provide that an operator of an AED who renders emergency care or treatment on a person experiencing cardiac arrest shall activate the EMS system as soon as possible and shall report the use of an AED to the program medical director; and

(7) Comply with the guidelines of the West Virginia office of emergency medical services regarding data collection and reporting.

§16-4D-4. Limitation on liability.

A person is not liable for civil damages as a result of any act or omission in rendering emergency medical care or treatment involving the use of an AED if the care or treatment does not amount to gross negligence and the following conditions are met:

(1) The person, entity, certified trainer or medical director of the early defibrillation program is in compliance with the provisions of section three of this article; and

(2) The person is an operator of an AED who gratuitously and in good faith rendered emergency medical care, pursuant to the requirements of section three of this article, other than in the ordinary course of the person's employment or profession.