I. Policy

II. Definitions

“Automated external defibrillator” (AED) - a medical heart monitor and defibrillator device that:

- Is cleared for market by the federal Food and Drug Administration (FDA);
- Recognizes the presence or absence of ventricular fibrillation or rapid ventricular tachycardia;
- Determines, without intervention by the operator, whether defibrillation should be performed;
- On determining that defibrillation should be performed, automatically charges; and
- Either (1) requires operator intervention to deliver the electrical impulse, or (2) automatically continues with delivery of electrical impulse.

The Maryland Public Access Automated External Defibrillator Program permits an organization, which meets certain requirements, to make AEDs available for individuals suffering sudden cardiac arrest on the premises prior to the arrival of emergency medical services personnel.

MIEMSS - Maryland Institute of Emergency Medical Services Systems

“School-sponsored athletic event” means an interscholastic, corollary or intramural sporting event that takes place on-site at a public high school or middle school, including practices and scrimmages.

III. Procedure

The purpose of this regulation is to provide guidance in the administration of an AED Program. An AED is used to treat victims who experience sudden cardiac arrest. The treatment must be delivered within a short time to be effective. Sudden cardiac arrest occurs when the electrical impulses of the human heart malfunction causing ventricular fibrillation, a condition that will result in sudden death unless appropriately treated. The most effective treatment for ventricular fibrillation is the administration of an electrical current (shock) to the heart by a defibrillator such as an AED. It is only to be applied to victims who are unconscious, and without pulse, signs of circulation and normal breathing. Use of an AED is a link in the “chain of survival” as defined by the American Heart Association, which also includes cardio-pulmonary resuscitation (CPR).

As a safety measure, to prevent unnecessary shocks, the AED automatically analyzes the heart rhythm to determine if an abnormal rhythm is detected. If the abnormal ventricular fibrillation rhythm is detected, the AED will charge to the appropriate energy level, advise, and allow the operator to deliver an appropriate shock. If shocked, the heart ideally will convert back to the normal rhythm and the life will be saved.

At least one AED will be on site at each FCPS middle and high school during the school day and available for use at each school-sponsored athletic event.
A. Roles and responsibilities:

1. FCPS will comply with the MIEMSS requirements that must be maintained in order to participate in the Maryland Public Access AED Program.

2. The Health Services Specialist and the Supervisor of Athletics will provide central program coordination.

   Central program coordinator responsibilities include:
   
   a. Implementing and administering the AED Program.
   
   b. Facilitating MIEMSS required monthly inspection, any manufacturer recommended maintenance, and other associated program tasks for all sites associated with a registered Public Access AED Program.
   
   c. Maintaining certificate issued by MIEMSS in a place where it is readily available.
   
   d. Instituting remedial action as necessary to resolve any issues of compliance with Title 30 MIEMSS Subtitle 06 AED Program.

3. The principal’s designee or building manager’s designee will provide program coordination for his/her individual school or FCPS building. For purposes of this document, the designee in each FCPS school or building will be called the AED program facilitator.

4. Athletic Directors will serve as the AED program facilitators in all high schools.

   AED program facilitator responsibilities include:
   
   a. Providing information regarding the AED to all employees or volunteers at a facility.
   
   b. Reporting suspected cardiac arrest and/or use of an AED to MIEMSS.
   
   c. Ensuring that all equipment and supplies are present and working correctly.
   
   d. Maintaining a file with specifications/technical information sheets for each approved AED model assigned or donated to the school/building.
   
   e. Maintaining records related to testing/proper functioning of AEDs and the presence of required equipment.
   
   f. Obtaining follow-up maintenance and replacement as needed if an AED or supplies are used.

B. Location of AEDs

1. The principal/designee or building manager will determine the location of AEDs in his/her building.

2. AEDs shall be placed in locations which are visible and readily accessible to any person willing to operate the AED in the event of a suspected cardiac arrest. The location of AEDs should allow staff members to retrieve the device outside of normal school/building hours if necessary.
3. In high schools, the AED may be moved from its designated location by the school athletic trainer or FCPS coach to support athletic department activities after school hours.
   
a. During interscholastic school sponsored athletic events, the host school will be responsible for providing an AED.

   b. If removed from its storage location, the AED must be signed out. Information regarding the person responsible for it, the time it was removed, the location to which it has been taken, and the estimated time it will be returned must be left in the storage location. (Form on FCPS Web site under “Specialized Health Forms” [http://www.fcps.org/student-services/forms](http://www.fcps.org/student-services/forms)

   c. The FCPS coach/athletic trainer will be responsible for taking an AED to out-of-state athletic events.

4. FCPS is not responsible for providing or ensuring access to AEDs or AED services to organizations that use the school buildings after school hours.

C. Use of the AED

1. The AED should be used on any person suspected of being in cardiac arrest. Signs of suspected cardiac arrest include the following:

   a. Victim is unresponsive.

   b. Victim is not breathing, or is breathing ineffectively.

   c. Victim has no signs of circulation such as pulse and coughing, or movement.

2. The individual using the AED is expected to use the AED in accordance with his/her training. When an individual’s training conflicts with the auditory and visual prompts of the device, the individual shall follow the auditory and visual prompts.

3. Emergency Medical System (EMS - 911) must be called immediately when a sudden cardiac arrest occurs or is suspected.

4. Upon arrival, the EMS staff assumes care and responsibility for the victim.

D. Reporting

1. If there is a suspected cardiac arrest at an FCPS location or event, the [Maryland Public Access AED Report form for Cardiac Arrests](https://www.miemss.org/home/Portals/0/Docs/AED/MD_Facility_AED_Report_Form_Cardiac.pdf?ver=2011-12-02-090316-167) should be completed and faxed to MIEMSS as soon as possible but not longer than 48 hours following the incident, even if the AED was not used.

2. The AED program facilitator will notify the principal of the school or building manager as well the Central Program Coordinator as soon as is feasible following the use of an AED.

3. If there is a suspected malfunction of the AED, a report must be filed with the Food and Drug Administration (FDA), and a copy of the report must be sent to MIEMSS. Information on device malfunction reporting maybe found at the following FDA website:
E. Training

1. The AED central program coordinators, AED facilitators, as well as individuals who are expected to operate the AED, must complete CPR/AED training that at a minimum includes content consistent with the recommendations for layperson CPR and AED training in the most current publication of the American Heart Association Guidelines for CPR and Emergency Cardiovascular Care.

2. The FCPS training center coordinator is responsible for ensuring that all Health/PE teachers receive and maintain current AED/CPR training.

3. All athletic directors, athletic trainers, physical education teachers, and coaches are responsible for maintaining current AED/CPR certification.

4. FCPS certified instructors will provide initial and re-certification training annually. This training will be made available to all athletic directors, athletic trainers, physical education teachers, coaches and other staff designated by the AED central program coordinator/ athletic director/school principal.

5. Newly hired athletic directors, athletic trainers, and coaches must be AED/CPR certified before assuming responsibilities at athletic events.

6. The athletic director at each high school will maintain training records relevant to E.5 above.

7. Frederick County Health Department will provide and ensure that all School Nurses (Registered Nurses), Licensed Practical Nurses, and Health Room Technicians maintain current Healthcare Provider CPR/AED training.

F. Equipment

1. A ready to use AED should be kept in an unlocked case with no visible signs of damage that would interfere with its use.

2. Supplemental equipment to be kept with each AED include:
   a. At least 2 sets of adult defibrillator chest pads and 1 set of pediatric chest pads
   b. Disposable latex free gloves
   c. Maryland Public Access AED Report Forms for Cardiac Arrests and Instructions.

G. Equipment Checks and Maintenance

1. All equipment and accessories necessary for support of medical emergency response shall be maintained in a state of readiness.

2. The individual school AED program facilitator will be responsible for AED checks. Information from the checks is to be recorded on the Rescue One AED Management software system. The AED Monthly Safety Inspection Record will serve as backup.
documentation when the software system is not immediately accessible. (Form on FCPS Web site under “Specialized Health Forms” http://www.fcps.org/student-services/forms) AED check information should be entered into the software system as soon as is feasible once the system is again able to be accessed.

3. The individual school/building AED program facilitator shall be responsible for having regular equipment maintenance performed as necessary.

4. All maintenance tasks shall be performed according to equipment maintenance procedures as outlined in the operating instructions.

5. Following use of emergency response equipment, all equipment shall be cleaned and/or decontaminated as required.

Approved:

Original signed by

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Superintendent