Automated External Defibrillation (AED) Plan

Florida Institute of Technology (Florida Tech)
Environmental Health & Safety (EH&S)
150 W University Blvd, Melbourne, FL 32901
Email: ehs@fit.edu
Website: https://www.fit.edu/office-of-environmental-health-and-safety/
## Revision History

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PURPOSE

Cardiovascular disease is the single greatest cause of death in the United States. Nearly half of those deaths are due to sudden cardiac arrest (SCA) in out-of-hospital settings, including the workplace. Prompt application of the integrated skills of cardiopulmonary resuscitation (CPR) and automated external defibrillation (AED) provide victims of SCA with the greatest chance of survival.

This plan was developed to address the use of AEDs in Florida Institute of Technology (Florida Tech) workplaces and areas of operations when mobile.

SCOPE

This plan applies to all AED’s owned by Florida Tech and located on any Florida Tech property.

BUDGET/PURCHASING

Budget is depending upon departments participating in this plan and operational availability. Departments wanting to purchase an AED must coordinate with the EHS Office before the device can be purchased. This is to ensure the appropriate device is purchased that meets/exceeds industry standards and device applicability is understood.

Additionally, any department that purchases an AED must follow all aspects of this plan.
RESPONSIBILITIES

Environmental Health & Safety (EHS) Office
The EHS Office will serve as the Program Administrator and will oversee the AED Program, this Plan, and vendor selection. EHS will also:
  o Contact the vendor for battery/pad replacement, maintenance, and repairs.
  o Notify departments when the location of an AED has changed.
  o Assist personnel in completing a Safety Incident Report upon an event using an AED.
  o Perform periodic AED audits to ensure all equipment is available, clean, not expired, and in good working order.

Department Responsibilities
Each Department should be aware of all AED’s within their location and how to use it in an emergency. Departments will also:
  o Have an ample number of AED’s available to ensure that an AED can be at the side of a collapsed person within 5 minutes.
  o Provide AED and CPR instruction, materials, and certification fees for each participant every two years or as needed who are permitted to participate in the AED program.
Employee Responsibilities
Department employees (with supervisor approval) may volunteer to participate in the AED program. Employees that wish to participate shall:

- Keep their CPR/AED training current to national standards;
- Provide EHS with documentation of AED/CPR course completion;
- Participate in the post-event incident analysis (after action review) as needed;
- Consider attending a post-event stress debriefing when offered.
- Within 24 hours following the event, the lead rescuer involved in a CPR and/or AED rescue attempt shall notify EHS and assist with documentation of the event using the Safety Incident Report found on the EHS website.

Vendor Responsibilities
Florida Tech will utilize an external vendor for AED equipment, servicing, and support. The vendor will support various aspects of the program. Although not exclusive, some specific areas of vendor support are:

- Provide additional in-person CPR/AED trainings;
- AED supply acquisition, unit service and repair;
- Mentor AED Liaisons upon request;
- Provide post incident analysis and debriefing as needed;
- Inform EHS of any issues of concern and recalls on equipment.
- Per the U.S. Department of Health & Human Service, ensure medical oversight by a licensed physician of all AED’s the vendor supplies to Florida Tech.
**TRAINING**

Please refer to the [Florida Tech Safety Training Webpage](https://map.fit.edu/css/assets/campus-map.pdf) for the most up to date information. Once on the page, select your given department/section area. Current standards require training to be ongoing every 2-years.

Additionally, Departments are encouraged to contact the EHS Office for additional in-person training resources (e.g. vendor support) that can be valuable references for CRP/First Aid/AED training, guidance, and support.

**AED PLACEMENT**

Placement of AED will be based upon the following:
- The amount personnel occupying the given area or an increase traffic flow of personnel;
- If the distance to the closest AED is more than 5-minutes;
- If individuals with a high-risk health problem are working in that area (personnel must voluntarily provide this information to their department);
- The department is mobile in nature and a mobile AED is easier to access;
- Large gathering of personnel above a normal work environment such as a public event.

The most up-to-date AED locations can be obtained by visiting the Florida Tech map webpage ([https://map.fit.edu/css/assets/campus-map.pdf](https://map.fit.edu/css/assets/campus-map.pdf)). This location has the most current campus map that will denote AED device locations. Employees who discover inaccurate information on the map are strongly encouraged to contact the EHS Office so that a revised version can be requested.

**AED MOUNTING**

The Americans with Disabilities Act (ADA) guidelines specify maximum reach ranges for health equipment such as automated external defibrillators and other life safety devices. The device must have an unobstructed approach, the maximum forward reach to the equipment is 48 inches above the floor. The maximum side reach for an unobstructed approach to an AED is 54 inches.

What does this mean?... The height to reach the handle of an AED in a public gathering place should be no more than 48 inches high.

Additionally, the ADA Accessibility Guidelines (ADAAG) specify that objects such as automated external defibrillator wall cabinets shall not protrude more than 4 inches from the wall into walks, corridors, passageways, or aisles.
AED RESPONSE PROTOCOL

Response to an emergency takes into consideration multiple factors. Individuals who decide to utilize AED’s must have been trained to do so and must feel confident. Additionally, they must understand that it is voluntary on their part.

Initial Assessment
An initial responder (separate from outside “First Responder”, e.g. Police) assessment determines the level of response required from them and outside responding agencies. This initial assessment includes:

- Assessment of the scene for safety of self and other responders.
- Use of gloves and other universal precautions prior to victim contact.
- Assessment of the victim for absence of responsiveness, respiration, and signs of circulation.
- Assessment for additional information about the patient or scene.

911 Notification
The initial responder ensures that 911 has been notified. If the defibrillator is not present at the scene, the responder verifies that it is being brought immediately or retrieves it themselves.

CPR Procedures
In the absence of the defibrillator, the initial responder initiates ABC’s of CPR (check airway—look for the rise and fall of the chest), breathing (place hand near nose/mouth and check for air movement), and circulation (check for a pulse) of CPR, establishing an airway, ventilating the victim, and beginning chest compressions, until the defibrillator arrives.

AED Application
Turn on the defibrillator as soon as it arrives at the scene and follow its prompts. If more than one initial responder member is present, one can apply the defibrillation pads and operate the defibrillator while the other continues CPR until told to stop. Perform any special procedures required (removal of medication patches, shaving of excessive chest hair, etc.) prior to placing the pads on the victim’s bare chest.

From this point, you will follow the directions of the AED prompts until First Responders arrive.
REFERENCES

OSHA General Duty Clause
Section 5(a)(1) of the Occupational Safety and Health Act

OSHA 3185-09N
Automated External Defibrillators

29CFR 1915.1030
Bloodborne Pathogens

29CFR 1910.1030
Bloodborne Pathogens

29CFR 1910.151
Medical services and First Aid (General)

29CFR 1915.87
Medical Services and First Aid (Shipyard)

29CFR 1926.50
Medical services and First Aid (Construction)

FDA: Automated External Defibrillators (AEDs)
APPENDICES

Appendix A: AED Location Map
https://map.fit.edu/css/assets/campus-map.pdf

Appendix B: Safety Incident Report Template