

26 JULY 2012



Medical Command

**PUBLIC ACCESS DEFIBRILLATION
PROGRAM**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

ACCESSIBILITY: Publications and forms are available for downloading or ordering on the e-Publishing website at <http://www.e-Publishing.af.mil/>

RELEASABILITY: There are no releasability restrictions on this publication

OPR: 354 MDG/SGOAM

Certified by: 354 MDG/CC
(Col Scott A Sprenger)

Supersedes: 354FWI44-103,
4 February 2011

Pages: 14

This instruction implements the provisions of the Cardiac Arrest Survival Act of 2000 and AFPD 44-1, *Medical Operations*. It applies to all Air Force military and civilian personnel, ANG units, and associate organizations on Eielson Air Force Base (EAFB). It establishes the responsibilities and procedures for the management of the Public Access Defibrillation (PAD) Program for EAFB. It provides guidance for the deployment of Automated External Defibrillators (AED) within buildings at EAFB. The AED is to be used for an emergency response to Sudden Cardiac Arrest (SCA), by trained personnel as a means to revive victims prior to arrival of medical personnel. This instruction requires the collection and maintenance of information protected by the Privacy Act of 1974 and the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The Privacy Act of 1974 ensures that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual (AFMAN) 33-363, *Management of Records*, and disposed of in accordance with Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS) located at <https://www.my.af.mil/afirms/afirms/afirms/rims.cfm>. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF Form 847, *Recommendation for Change of Publication*; route AF Form 847s from the field through the appropriate chain of command.

SUMMARY OF CHANGES

This revision was coordinated with the 168th Air Refueling Wing (ARW) and the publication now formally includes selected 168 ARW facilities where AEDs are deployed.

1. Roles and Responsibilities: 2

2.	Acquisition, Maintenance, Location, and Accountability:	3
	Attachment 1—GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION	6
	Attachment 2—AUTOMATED EXTERNAL DEFIBRILLATORS ACCESSORY KIT	7
	Attachment 3—AUTOMATED EXTERNAL DEFIBRILLATOR TREATMENT ALGORITHM	8
	Attachment 4—AUTOMATED EXTERNAL DEFIBRILLATOR RESPONSE REPORT	10
	Attachment 5—TRAUMATIC STRESS RESPONSE INFORMATION	12
	Attachment 6—AUTOMATED EXTERNAL DEFIBRILLATOR MONTHLY CHECKLIST	13
	Attachment 7—AUTOMATED EXTERNAL DEFIBRILLATOR USE CHECKLIST	14

1. Roles and Responsibilities:

1.1. **354th Fighter Wing Commander (354 FW/CC).** The 354 FW/CC has overall responsibility for the PAD program for selected 354 FW and 168th Air Refueling Wing (ARW) facilities. The 354 FW/CC will appoint the 354 MDG/CC and each participating squadron commander to meet and maintain objectives set forth in this document.

1.2. **354th Medical Group Commander (354 MDG/CC).** The 354 MDG/CC is responsible to the 354 FW/CC and 168 ARW/CC for implementation of the PAD program and will ensure all medical aspects are maintained and provide professional guidance on program administration.

1.2.1. Appoints, in writing, a medical director and a program coordinator.

1.2.2. Ensures host support to the 168 Medical Group for medical coordination and oversight.

1.3. **Medical Director.** The medical director will be a licensed physician proficient in EMS protocols, CPR and the use of an AED IAW *Federal Guidelines for PAD programs in Federal Facilities*, FR 28495, 23 May 2001.

1.3.1. The medical director or designee will perform quality assurance by review of all AED saved data and AED Response Reports (**Attachment 4**) within 48 hours of AED use. Additionally, the medical director will forward all response reports to the 354 MDG and 168 MDG Executive Committee of the Medical Staff for final review.

1.4. **Program Coordinator.** The program coordinator will be certified (at a minimum) as a Basic Life Support (BLS) Instructor. The program coordinator will provide guidance to site coordinators for the establishment and maintenance of the AED and will review site coordinator's binders and monthly checklists. He/she is responsible for the guidelines included in this document.

1.5. **Squadron Commander/Agency Director.** The group, squadron, flight commander or agency director will place the AED and associated equipment in an area that is easily

accessible to all personnel. He/she shall appoint a site coordinator to maintain the AEDs within their unit.

1.6. Site Coordinator. The site coordinator shall be a member of the local organization where the AED is deployed and is appointed in writing by the squadron commander or agency director. He/She must be (at a minimum) BLS certified. Monthly, the site coordinator will inspect the AED, check battery status, and notify Medical Equipment Repair Center (MERC) if problems arise. He/She will complete the PAD site coordinator's monthly checklist (**Attachment 5**) and file the checklists in a binder maintained at the unit. The binders will be reviewed annually by the program coordinator and at the medical director's discretion. The site coordinator will be responsible for the AED and recommended contents (**Attachment 2**). He/She will identify trained responders near each AED location for normal duty hours and track training documentation. After an AED is used, the site coordinator will arrange for traumatic stress response (TSR) debriefing sessions to be offered for all individuals involved in providing assistance in an emergency situation (**Attachment 2**).

1.7. Targeted Responders. Although anyone can use the AED during an emergency, those individuals identified as targeted responders will, at a minimum, be trained in BLS through the American Heart Association (Military Training Network) and should follow the protocol in an emergency situation as depicted in the "AED Treatment Algorithm" (**Attachment 3**). He/she will provide documentation of their training to the program coordinator.

1.8. AED Response Report. The responder will fill out the AED response report Attachment 4 and immediately (within 24 hours) submit it to the program coordinator. The program coordinator will review the report for accuracy and forward it to the medical director.

2. Acquisition, Maintenance, Location, and Accountability:

2.1. Acquisition. As a piece of medical equipment, procurement of AEDs for non-Medical Treatment Facility (MTF) units must be approved by the MTF's designated Equipment Review Authorization Activity (IAW AFI 41-209, paragraph 7.28.1.1.).

2.1.1. Approved AED requirements for non-MTF organizations procured by medical logistics will be issued to non-DHP RC/CCs funded with O&M dollars provided by the requesting unit (IAW AFI 41-209, paragraph 7.28.1.1.).

2.1.2. Procurement of all AEDs will be coordinated with the 354 MDG Medical Logistics Flight to ensure the unit is aware of all procedures to purchase the unit-funded AED.

2.1.3. Using activities may request to purchase an AED using their GPC. If procured by the using activities GPC, the accountable base medical supply officer must approve the purchase (IAW AFI 41-209, paragraph 7.28.1.2 and AFI 64-117, paragraph 2.2.3.).

2.1.4. The Medical Logistics Flight Commander/Chief will annotate the approved request with a statement requiring an initial inspection by the host Biomedical Equipment Technician (BMET) shop. Ensuring the initial inspection is completed is the responsibility of the purchasing unit (IAW AFI 41-209, paragraph 7.28.2.).

2.1.5. Recommended items to accompany AED (*See attachment 2*). The unit requiring these supplies is responsible for funding them.

2.2. Maintenance.

2.2.1. Biomedical Maintenance will inspect AEDs annually. (IAW AFI 41-201, paragraph 2.15.4.)

2.2.2. It is the owning units' responsibility to deliver the AED to Biomedical Maintenance for annual inspection. If the AED is not delivered to Biomedical Maintenance within 7 working days of request, the AED will be removed from Defense Medical Logistics Support System (DMLSS) and the owning unit's commander will be notified.

2.2.3. If an AED is found to need repair; the owning unit, not the MDG or Biomedical Maintenance, will coordinate and fund the repair with the manufacturer. Upon the repaired unit's return, it will be inspected by Biomedical Maintenance. (IAW AFI 41-209, paragraph 7.28.3.)

2.2.4. The owning unit is responsible for the purchase and replacement before expiration of all consumable supplies to include batteries for the AED. (IAW AFI 41-209, paragraph 7.28.3.)

2.3. **Location:** AEDs should be placed in facilities to ensure timely response for a medical emergency. Factors to consider in determining AED placement include the following:

2.3.1. Facility size.

2.3.1.1. Number of employees in the facility.

2.3.1.2. Number of people that may have public access to the facility on a daily basis.

2.3.1.3. Average age of the facility occupants.

2.3.1.4. Incidence of heart disease given the population at hand.

2.3.1.5. An easily accessible position (e.g., placed at a height so all individuals can reach and remove, unobstructed access).

2.3.1.6. A secure location that prevents or minimizes the potential for tampering, theft, and/or misuse.

2.3.1.7. A location that is well marked, publicized, and known among trained staff.

2.3.1.8. A nearby telephone that can be used to call 911, EMS, or security forces to be sure that additional help is dispatched.

2.3.2. Initial locations of AEDs on the base are as follows:

2.4. **Accountability.** The program coordinator is responsible for ensuring that each unit's AED site coordinator point of contact is kept current.

2.4.1. All 354 FW and 168 ARW AEDs will be loaded into the Defense Medical Logistics Standard Support system as a piece of accountable medical equipment by the 354 MDG Medical Equipment Management Office (MEMO) in coordination with the BMET shop.

2.4.2. AEDs will also be inventoried annually by the AED site coordinator as direct by the 354 MDG MEMO. To certify that the inventory was conducted, the AED site coordinator will sign the DMLSS generated Custodian Receipt/Location List (CR/LL).

2.4.3. AED site coordinators, along with their replacements, will contact the 354 MDG MEMO 30-45 days prior to PCSing or deploying to ensure signing over the AED to the replacement is accomplished. The sign over is not complete until the program coordinator has been given an updated copy of the squadron commander/agency director appointment letter identifying the replacement and the replacement has signed the (CR/LL).

354 FW Facilities

Base Gym	(5 AEDs)	Primary Care Waiting Area	(1 AED)
Bowling Alley	(1 AED)	Medical Equipment Repair	(1 AED)
Arctic Survival	(1 AED)	Bldg 1337	(1 AED)
Ski Lodge	(1 AED)	Bldg 1338	(1 AED)
SFS vehicles	(6 AEDs)	Base Chapel	(1 AED)
Fire Department	(2 AEDs)	Amber Hall	(2 AED)
Blair Lake Range	(1 AED)	Red Flag Bldg 1141	(1 AED)
Power Plant	(1 AED)	Commissary (1 AED) procured by 354 FW/CPTS	
LRS Fuels	(2 AEDs)	BX (1 AED) procured by 354 FW/CPTS	

168 ARW Facilities

Bldg 1140	(1 AED)	Bldg 1176	(2 AEDS)
Bldg 1168	(1 AED)	Flight Line Expediter Vehicle	(1 AED)
Bldg 1171	(1 AED)		

JAMES N. POST III, Brigadier General, USAF
Commander

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

Guidelines for PAD programs in Federal Facilities, FR 28495, 23 May 2001.

Public Health Improvement Act of 2000, Title IV, Subtitle A, Cardiac Arrest Survival Act (CASA); (H.R. 2498)

42 U.S.C. 241 note, *Healthcare Research and Quality Act of 1999*, Section 7

42 U.S.C., *Public Health Service Act*, Section 238, 247, 248: Title 2, Part B

American Heart Association, 1999

Adopted Form(s)

AF Form 847, *Recommendation for Change of Publication*, 22 September 2009

Terms

Cardio-Pulmonary Resuscitation (CPR)— The act of providing respiratory ventilation and heart (cardiac) compression by an external source. This most commonly is provided to an individual who is without both spontaneous respiration and heartbeat, and is provided by someone capable of performing the required mechanical action.

Emergency Medical Services (EMS)— The term used to describe the rapid response team of medically trained personnel to provide emergency medical assistance as necessary.

Basic Life Support (BLS)— A training program that teaches basic CPR techniques as well as AED use.

Automated External Defibrillator (AED)— A defibrillator device that is used to provide electrical stimulation to the heart during sudden cardiopulmonary arrest.

Defibrillation— The application of an electric shock, via a defibrillator, directly through a person's chest.

Sudden Cardiac Arrest (SCA)— SCA occurs when the heart fibrillates -- a chaotic, abnormal electrical activity of the heart, which causes the heart to quiver in an uncontrollable fashion.

Medical Emergency— When circumstances exist whereby the behavior of an individual leads a reasonable person to believe that the individual is experiencing a life-threatening condition that requires an immediate medical response.

Federal Building— A building or portion of a building owned, leased or rented by a federal agency, which includes buildings on military installations of the United States.

Attachment 2

AUTOMATED EXTERNAL DEFIBRILLATORS ACCESSORY KIT

A2.1. The following is a list of recommended items that can be stored in a container next to the AED.

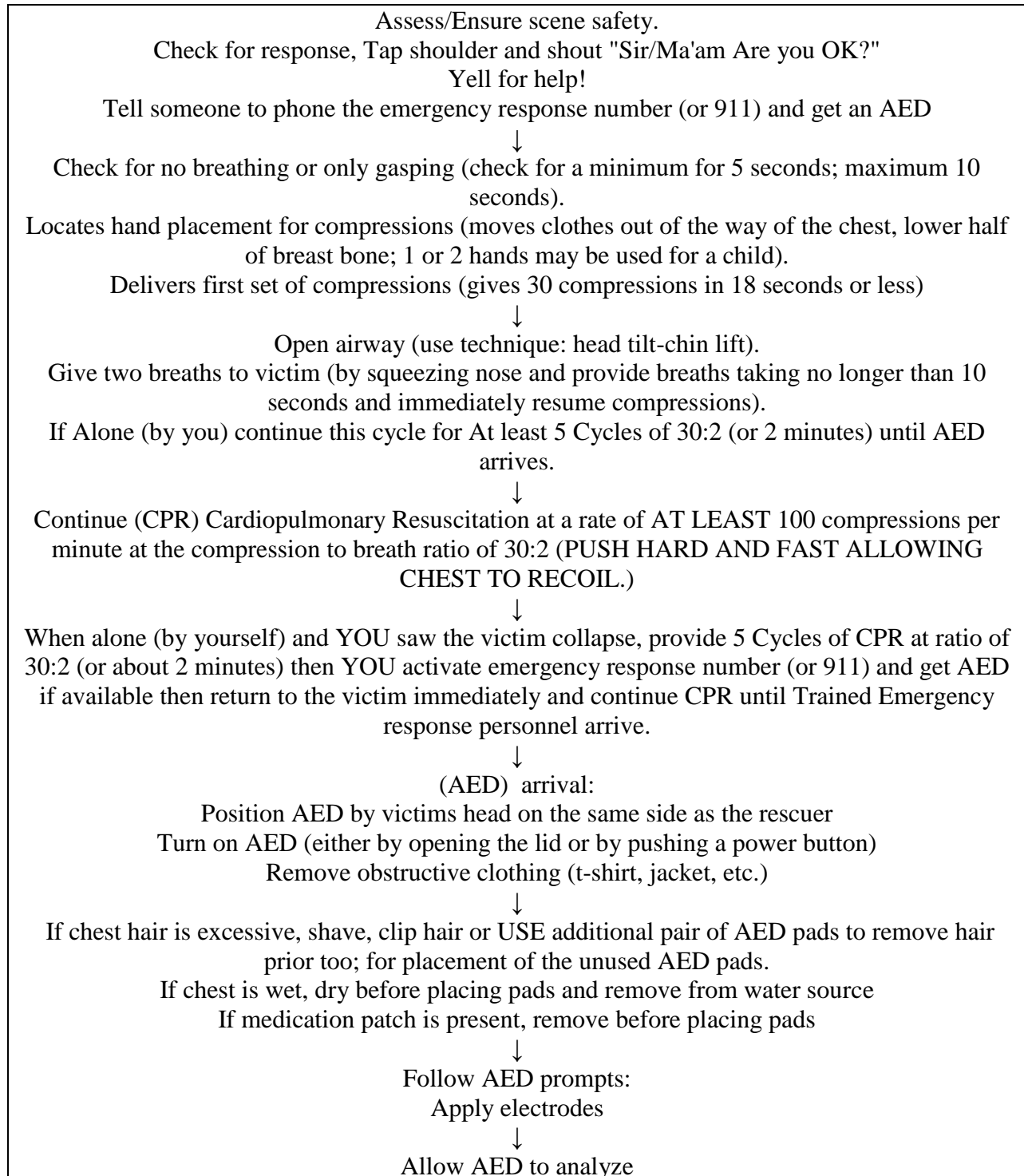
Figure A2.1. Items Stored with AED

Non-Latex Gloves
Trauma Scissors
Disposable Shaving Razor
Medical Tape
Extra Electrode Pads
Barrier Mask
Copy Of AED Response Report, Pad Of Paper, Pens
Absorbent Towel

Attachment 3

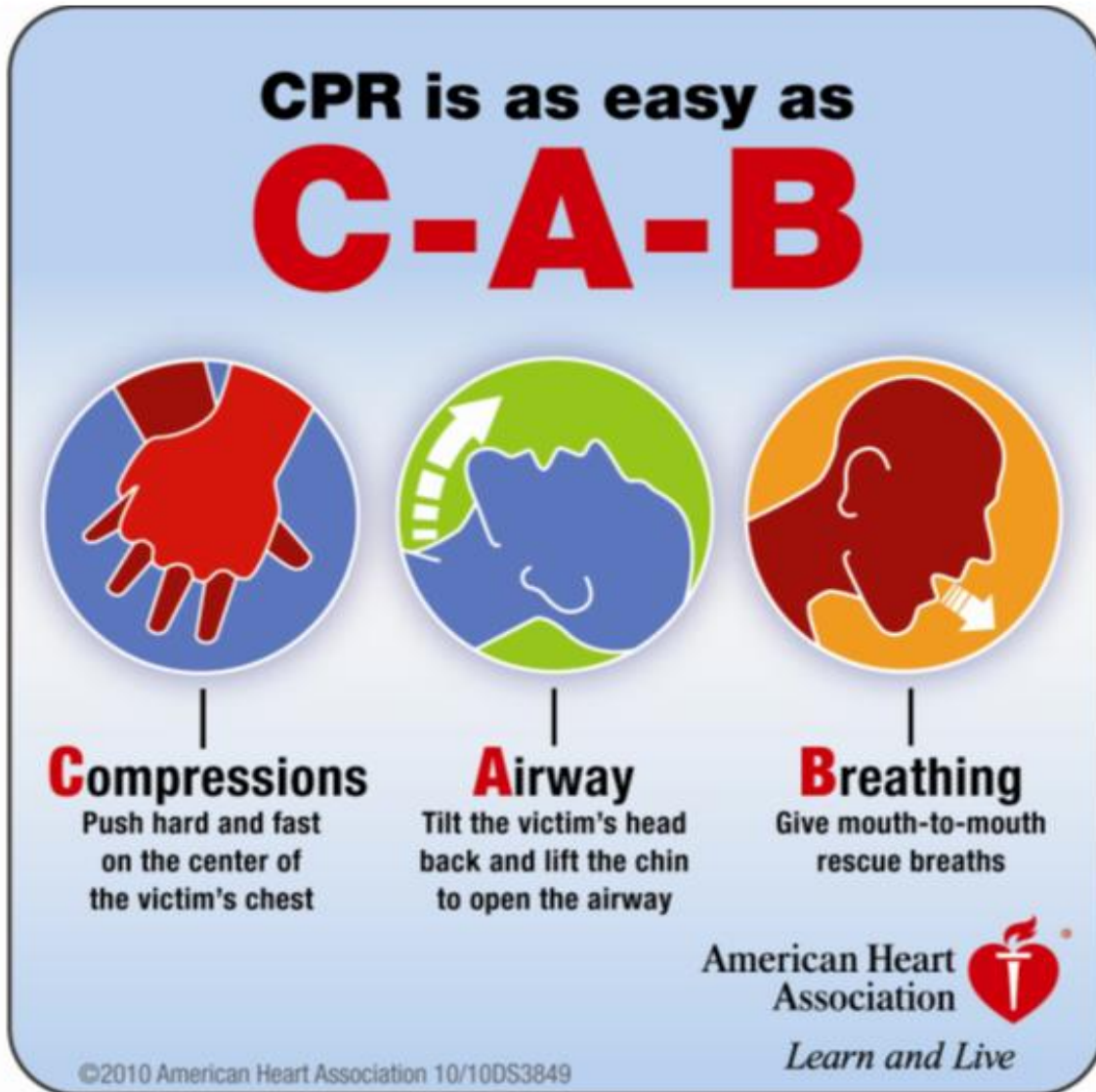
AUTOMATED EXTERNAL DEFIBRILLATOR TREATMENT ALGORITHM

Figure A3.1. Automated External Defibrillator Treatment Algorithm



If indicated, deliver shock by pressing illuminated shock button
Continue care as per AED prompts until Emergency Personnel Arrive.

Figure A3.2. Compressions Airway Breathing



Attachment 4

AUTOMATED EXTERNAL DEFIBRILLATOR RESPONSE REPORT

Figure A4.1. Automated External Defibrillator Response Report

Please initial all restorative/corrective action items listed below:

_____ Remove used PC Card, or transport the entire device, label it with patient ID (Name: last, first, last four SSN), and replace AED unit with a spare PC card

_____ Follow monthly checklist guidelines to restore AED unit back to ready state (Attach. 5)

_____ Replace/restock any accessory items as necessary

_____ Deliver used PC card **AND** this checklist to the AED medical director for review and filing within one (1) duty day.

_____ Schedule/Conduct critical incident stress management TSR debriefing as determined necessary by the AED Coordinator

TSR debriefing planned? _____ (date) _____; Conducted? _____ (date) _____

Incident Details

Date incident occurred _____

Time incident occurred _____

Location incident occurred _____

Time EMS called _____

Time AED placed on patient _____

Time EMS arrived on scene _____

Was CPR given before the AED arrived? (circle one) **Yes / No / Don't know**

If "Yes," names of rescuers: _____

Were AED shocks administered? (circle one) **Yes / No / Don't know**; If yes, how many _____

Did victim:

Regain a pulse? Yes / No

Resume breathing? Yes / No

Regain consciousness? Yes / No

Patient Information (if known)

Name (Last, First, MI) _____

Male / female (circle one)

Age _____

Last four of SSN _____

Assigned unit _____

Branch of service/civilian _____

Date of birth _____

Phone number (HOME) _____ (WORK) _____

Home address _____

Notes/Comments:

Name/Unit of person completing report: _____

Phone: _____

Date checklist sent to medical director: _____

Date received by medical director: _____

Name of medical director: Print: _____ Signature: _____

Privacy Act of 1974 Applies when information filled in.

FOR OFFICIAL USE ONLY

Attachment 5

TRAUMATIC STRESS RESPONSE INFORMATION

A5.1. What is traumatic stress response? It is a comprehensive system of crisis intervention designed to assist individuals and groups affected by traumatic events (natural disasters, terrorist events, suicides, and death--either accidental or intentional).

A5.2. What events could initiate a request for TSR services? Many types of events have the potential to produce individual and community traumatic stress. Events include: large scale disasters (tornadoes, bombings, hurricanes, etc.) and small-scale disasters (suicide, death or near-death of coworker, workplace violence event, etc.). TSR services will be provided after traumatic events to help those who have experienced the events. The goal is to assist those affected by traumatic events to cope with the normal stress reaction in an effective manner. These actions are intended to minimize the impact of exposure to these events and prevent or mitigate permanent disability if possible.

A5.3. What is the procedure for requesting TSR services? The office of record for TSR services is the Mental Health clinic (377-3071). Please address any inquiries about TSR services to the Chief of the TSR team.

Attachment 6

AUTOMATED EXTERNAL DEFIBRILLATOR MONTHLY CHECKLIST

Figure A6.1. Automated External Defibrillator Monthly Checklist

ALL PURPOSE CHECKLIST		PAGE	OF	PAGES
NO.	ITEM	OPR	DATE	
TITLE/SUBJECT/ACTIVITY/FUNCTIONAL AREA AED Monthly Checklist Site Coordinator Monthly Checklist		MODEL: _____ LOCATION: _____		
<i>(Assign a paragraph number to each item. Draw a horizontal line between each major paragraph.)</i>				
	1. Check battery. Replace if necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2. Examine AED case, connector and battery compartment for:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	a. foreign substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	-clean the device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. check for damage: - contact 354 MDG Medical Equipment Repair Center (MERC) @ 377-6510	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3. Examine:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	-the battery pins for corrosion or discoloration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	-expiration dates on the batteries and electrode pads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	-accessory cables for cracks. Broken, bent or missing connectors and wires.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If any of the above criteria is met for replacement or repair contact 354 MD MERCK.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4. With battery properly installed, press the (ON) button for the AED and look for:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	a. self test message	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. momentary illumination of each LED and LCD segments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. battery LOW or replacement or repair contact 354 MDG MERC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	**Note: to clean AED, use a damp cloth with rubbing alcohol, peroxide solution or quarternary ammonium compounds. DO NOT USE BLEACH OR PHENOL: DO NOT AUTOCLAVE, STEAM OR GAS STERILIZE.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Attachment 7

AUTOMATED EXTERNAL DEFIBRILLATOR USE CHECKLIST

Figure A7.1. Automated External Defibrillator Use Checklist

ALL PURPOSE CHECKLIST		PAGE 1	OF 1	PAGES
TITLE/SUBJECT/ACTIVITY/FUNCTIONAL AREA		OPR	DATE	
(AED) Automated External Defibrillator USE - Chain of Survival (attach 7) In Case of Emergency, Initiate Chain of Survival IAW 2010 AHA guidelines			20110912	
NO.	ITEM			
	<i>(Assign a paragraph number to each item. Draw a horizontal line between each major paragraph.)</i>			
	Assess/Ensure scene safety.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Check for response, Tap shoulder and shout "Sir/Ma'am Are you OK?"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yell for help!	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Tell someone to phone the emergency response number (or 911) and get an AED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Check for no breathing or only gasping (check for a minimum for 5 seconds; maximum 10 seconds).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Locates hand placement for compressions (moves clothes out of the way of the chest, lower half of breast bone; 1 or 2 hands may be used for a child).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Delivers first set of compressions (gives 30 compressions in 18 seconds or less)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Open airway (use technique: head tilt-chin lift).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Give two breaths to victim (by squeezing nose and provide breaths taking no longer than 10 seconds and immediately resume compressions).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If Alone (by your self) continue this cycle for Atleast 5 Cycles of 30:2 (or 2 minutes) until AED arrives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Continue (CPR) Cardiopulmonary Resuscitation at a rate of ATLEAST 100 compressions per minute at the compression to breath ratio of 30:2 (PUSH HARD AND FAST ALLOWING CHEST TO RECOIL.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	When alone (by your self) and YOU saw the victim collapse, provide 5 Cycles of CPR at ratio of 30:2 (or about 2 minutes) then YOU activate emergency response number (or 911) and get AED if available then return to the victim immediately and continue CPR until Trained Emergency response personnel arrive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(AED) arrival:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Position AED by victims head on the same side as the rescuer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Turn on AED (either by opening the lid or by pushing a power button)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Remove obstructive clothing (T-shirt, jacket, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If chest hair is excessive, shave, clip hair or USE additional pair of AED pads to remove hair prior too; for placement of the unused AED pads.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If chest is wet, dry before placing pads and remove from water source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If medication patch is present, remove before placing pads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Follow AED prompts:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Apply electrodes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Allow AED to analyze	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	If indicated, deliver shock by pressing illuminated shock button	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Continue care as per AED prompts until Emergency Personnel Arrive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>