Automated External Defibrillators

Automated External Defibrillator (AED) is a small portable machine that shocks a human heart back into a normal rhythm. They are used for sudden cardiac arrest (SCA) events.

AEDs are more common in the public places around us. This Risk Wise provides resources and information to help agencies identify risks and concerns and provide a

Legislation

The Oregon Legislature passed bills in 2009 and 2015 updating or amending ORS 431A.450, 431A.455 and ORS 30.802.

These bills require the placement of AEDs in certain public assembly areas.

“Public assembly areas” are defined as a single building 50,000 square feet or larger AND where:

- The public gathers in groups for discussion, shopping, entertainment, amusement, transportation uses; OR
- Business activities are conducted during business hours AND
- At least 50 individuals gather on a normal business day.

Locations used for education or worship are excluded.

ORS 431A.455 requires higher education campuses to have at least one AED in gathering areas. If campuses have more than one gathering place, at least one AED needs to be readily available.

Click the links to view the statutes.

ORS 30.802 Good Samaritan Law
ORS 431A Automated External Defibrillators

Risks and Goals

- AED users may try to perform life-saving strategies outside their level of training and comfort.
- Agencies may have inconsistencies in how they manage their AED program.
- Agencies may not meet statutory requirements.

The goal of an effective agency AED program is to increase the rate of survival of people who suffer a SCA event by using the consistent application of policy, procedure, and training. Effective AED programs deliver a shock to a victim within 3 to 5 minutes of collapse.
Program Recommendations

We recommend your AED program include the following.

- Develop a plan that incorporates the best practices outlined in the “American Heart Association AED Implementation Guide.”
- Assign a dedicated agency program coordinator.
- Obtain medical oversight from a licensed physician.
- Notify local EMS of the location of the AED in the building.
- Notify local EMS immediately after each use of the AED.
- Debrief each use of the AED to determine if the process worked correctly. Make changes as necessary to incorporate best practices for your location.
- Maintain a schedule for the AED and supporting supplies.
- Provide quality training for onsite responders.
- Use volunteers as responders to maintain immunities under the Good Samaritan Act, ORS 30.800 through 30.805.
- Follow the manufacturer guidelines for testing and maintenance of the AED.
- Ensure enough trained staff are available so at least one is present during regular business hours.
- Store the AED in an accessible location during regular business hours.
- Clearly indicate the presence and location of each AED on your site.
- Establish a policy to activate EMS and 9-1-1 as soon as the need for the use of the AED is recognized.

AED Resources, Links and Information

US-FDA Pre-market Searchable Database Link - **USFDA 510(k) Pre-market Database**. Type “AED” into the “Search For” window for a list of approved devices.

ORS 431 Public Health and Safety – AED Requirements - **ORS 431A.455**

ORS 30.800 Good Samaritan Law and 30.802 Liability for use of an AED - **Chapter 30 — Actions and Suits in Particular Cases**

Federal Regulations governing AED Use - **CFR - Code of Federal Regulations Title 21**

American Heart Association AED Implementation Guide - **AED Implementation Guide**

Learn about Automated External Defibrillators — **American Red Cross About Automated External Defibrillators**

FDA-Cleared AED Manufacturers—below
- **Cardiac Science**
- **Defibtech**
- **HeartSine Technologies**
- **Philips Healthcare**
- **Physio-Control**
- **ZOLL Medical Corporation**

OVER 300,000 AMERICANS DIE OF SUDDEN CARDIAC ARREST EVERY YEAR. UP TO 50,000 COULD BE PREVENTED BY IMMEDIATE AED USE.