

La Harpe CSD 347 has made a commitment to being a viable link in this community's chain of survival. In response to this commitment, the elementary school buildings will have available in their public assembly areas an Automatic External Defibrillator (AED) for use by trained lay responders.

This Public Access Defibrillation (PAD) program will be managed/administered by the administration.

Memorial Hospital, Memorial Medication Clinic, and/or Hancock County Health Department will provide medical oversight and direction.

The PAD program will be registered as required by law, and all applicable documents will be submitted.

AED usage and training will follow American Heart Association and American Red Cross guidelines.

- Placed only on unconscious, unresponsive, not breathing victims who experience sudden cardiac arrest.
- Placed only on victims >1 year of age, pending current research.
- Placed and used only by trained responders.

The local EMS will be notified of the existence and placement of the AEDs at the schools.

In the event of AED use, EMS will be immediately and simultaneously activated, by calling 911.

Maintenance checks of AED will be conducted and recorded by the maintenance director.

Records pertaining to LHCS D's PAD program will be on file.

1. Trainees including physical fitness instructors and coaches will initially be selected by administration. After the initial core group is trained, participants may self-select by interest, with the ultimate goal to have all school personnel be trained responders.
2. Training site and programs will be arranged per American Heart Association (AHA)/American Red Cross (ARC) instructors(s); including designees(s) so trained.
3. Training will be conducted in groups of 4 to 6 per instructor, per AHA guidelines.
4. The designee will notify administrator's selected individuals (or those with expressed interest, as space is available) and place pre-course materials in appropriate mailboxes.
5. Training will last 2 to 4 hours following AHA/ARC guidelines and participants satisfactorily completing it will receive AED cards from the instructor's sponsoring community training center (CTC) in about 2-3 weeks post completion.
6. Refresher training is suggested every 3 – 6 months per refresher CD (found in the text if purchased, or distributed upon successful completion of training) and /or Web-based programs. An annual update class will be provided, time permitting, per the school nurse or her designee.
7. Formal re-training will be conducted every 2 years following AHA/ARC guidelines.

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Note: if AED is not immediately available, perform CPR until AED arrives on the scene.

Use of the AED is authorized by any personnel trained in CPR and use of the AED.

Materials: AED (from cabinet), gloves, gauze or towel, CPR mask, defib pads (included in the AED case), telephone.

Procedure.

1. First responder or witness assesses the scene for safety and determines unresponsiveness by tapping the shoulder and shouting "Are you okay?"
2. With unresponsiveness confirmed and directs someone to (a) activate EMS by calling 911 and (b) get the defibrillator. If the responder is alone, (s) he does this her/himself.
3. After determining unresponsiveness, open the airway, using the head tilt/chin lift procedure.
4. Check for breathing. Look, listen, and feel. If no breathing assessed, give two rescue breaths using the barrier mask if available, or mouth-to-mouth.
5. Check for signs of circulation, such as coughing or movement. (Selected responders may check for pulse (carotid site in adults and children, brachial in infants) if such was included in their training).
6. If there are no signs of breathing, coughing or movement, perform CPR until the AED arrives. Compress and release the bare chest 30 times at a rate of 80-100 compressions per minute. Give two breaths for every 30 compressions and continue until the AED arrives.
7. Place the AED on the user's side of the victim, near the head or shoulder. Turn ON if not already done so and follow the voice prompts.
8. Apply the appropriate electrodes (adult or child) to victim's bare chest. Apply according to diagram on back of package or on AED case. Dry chest with gauze or towel if necessary. Press pads firmly to skin. Be observant for any obvious swelling or lump indicating an implanted pacemaker or AICD. Remove any medication patch observed. For excessively hairy chest, be prepared to pull off the first set of electrodes and shave any remaining excessive chest hair (do so only if hair prevents a good seal between electrodes and skin – the machine will prompt you to "check electrodes".)
9. Stand clear of victim while machine analyzes heart rhythm. If necessary, remind any other responders to not touch the patient during this time.

If shock is advised:

- Clear area, making sure no one is touching the victim. Push SHOCK button when instructed. Device will analyze and shock up to three times. After three shocks, device will prompt to check for signs pulse, breathing or movement, and if absent, start CPR. If pulse and/or signs of circulation such as normal breathing and movement are absent, perform CPR for one minute. Device will countdown one minute of CPR and will re-analyze when CPR time is over.

If no shock advised:

- Device will prompt to check for pulse, breathing or movement and if absent, start CPR. Perform CPR for one minute. If these signs are present, check for normal breathing. Remember, irregular

gaspings is not breathing! If victim is not breathing normally, give rescue breaths at a rate of 12 per minute. AED will re-analyze after one minute.

- Continue cycles of analyses, shocks (if advised) and CPR until professional help arrives. Victim must be transported to hospital. Leave AED and electrodes attached until EMS arrives and disconnects AED or links electrodes to their monitor.
10. AED data will be downloaded from the device within 24 hours (weekdays) and copies sent to the authorizing physician.
  11. After use, the AED will be wiped clean and post-usage maintenance checks will be performed by the school nurse or her designee.