UNIVERSITY OF OKLAHOMA
RISK MANAGEMENT
AUTOMATED EXTERNAL DEFIBRILLATOR POLICY

I. Purpose
Automated external defibrillators (AEDs) can be life saving devices for persons suffering from sudden cardiac arrest (SCA). The University of Oklahoma (OU) recognizes having AEDs on campus serve to enhance life safety by enabling users to administer defibrillation in a SCA emergency, if possible, prior to the arrival of emergency responders. The intent of this document is to establish an AED policy for the OU-Norman campus that will be utilized as a source of reference for designated AEDs on campus.

II. Policy Statement
University departments in pursuit of AEDs, or in possession of, shall meet the requirements as set forth in this policy.

III. Scope
This policy identifies the requirements, procedures and responsibilities pertaining to the purchasing, installation, location, maintenance, inspecting, record keeping, user training, and use of AEDs.

IV. Definitions
AED-Automated External Defibrillator
AHA-American Heart Association
ARC-American Red Cross
Designated Employees-Persons who have been assigned to, tasked with, or identified by their associated departments to use AEDs.
CPR-Cardio Pulmonary Resuscitation
SCA-Sudden Cardiac Arrest

V. Oklahoma AED Law
A) 76 O.S. §-5A-Emergency Care or Treatment by Use of Automated External Defibrillator-Immunity from Civil Liability
B) Campus AED building locations and specific placement will be provided to local emergency responders

VI. AED Committee
An AED Committee shall be responsible for developing and maintaining the AED Policy, serving as the approving authority for petitions by departments requesting to purchase AEDs, and facilitating inquiries and render decisions in regards to the University’s AED policy. The AED Committee is comprised of members representing the Risk Management Department, Fitness & Recreation, Health Services, and the Environmental Health & Safety Office.

VII. AED Purchasing Authorization & Protocols
The use of the building, building size, the number of occupied levels and general layout of the building should all be used as determining factors for AED spacing and quantity.

A) Departments and/or groups desiring to purchase an AED must petition the AED Committee. Departments shall complete, petition Form A, and e-mail the completed form to the AED Committee requesting a meeting for review and approval.

B) Petitioning departments pursuing AEDs shall be financially responsible for purchasing and maintaining AEDs and ensuring that any designated staff are properly trained in CPR and the use of AEDs. This to include the purchase cost of the AEDs, the replacement of integral components such as batteries, electrodes and any other necessary accessory items, and all associated training costs for designated employees.

Exception- Any other approved funding means as determined by University Administration.

C) As a condition of approval, petitioning departments pursuing AEDs shall designate a Site/Area Coordinator in their petitioning report to the AED Committee.

D) Once approved, Physio-Control AEDs are the recommended brand for new purchases due to their compatibility with the brand used by local emergency responders (Fire & EMS). This also applies to the phasing out and replacement of any existing AED brand.

E) Existing AED brands, currently in place, may continue to be used provided that their CPR prompts are in accordance with the American Heart Association’s current criteria and if they are maintained in accordance with their manufacturer’s recommendations.

VIII. Site/Area Coordinators
A) The Site/Area Coordinator or designee will have the following areas of responsibility:
   1. AED site location
   2. Inspections and maintenance
      a.) The Site Coordinator is responsible for inspecting AEDs on a regular basis in accordance with the manufacturer’s recommendations. Batteries are to be replaced as necessary. Pads are to be replaced after use and/or as
required by expiration dates. An inspection record and AED maintenance history shall be documented and retained (see inspection Form B).
b.) If an AED, has a dead battery or other impairment and is not completely functional then it shall be removed and taken off line until it is fully operational.

3. Designating users, ensuring that the designated users are properly trained and certified in an AHA or the ARC, and maintain proficiency and retraining in CPR and AED usage.
a.) Fitness and Recreation has an established CPR, First Aid & AED training program with certified Instructors. They are recognized as the University resource that should be utilized for training and certification.

4. Reporting to Risk Management
a.) Site/Area Coordinators shall provide an annual report to the Risk Management Department depicting AED makes & models, total count, building locations, locations within buildings, maintenance checks, and designated staff training records (see report Form C).
b.) Existing departments which have AEDs installed in or within their affiliated buildings, outside locations, mobile vehicles and associated events under their purview shall identify and establish a Site/Area Coordinator who will meet the responsibilities of that position.

IX Installing AEDs

AEDs shall be located in areas to be approved by the Committee. AEDs shall be placed in protected cabinets and clearly marked “AED”.

X Use of AEDs

Since a standard AED prompt command is to continue CPR, it is therefore essential that the user be qualified to administer CPR. Any emergency use of an AED shall be reported to the AED Committee by the Site/Area Coordinator or a designee.

XI Medical Oversight

The AED Committee will oversee AED protocols in regards to the use of AED’s, review and advise in regards to training and proficiency for designated users and review all situations in which a University AED was used in an emergency.