

Public Access Defibrillation



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Purpose

The purpose of this guidance is to provide clear and consistent information on the placement, maintenance, and use of Automatic External Defibrillators (AEDs) in Washington. AEDs are life-saving devices designed to assist individuals experiencing sudden cardiac arrest by delivering an electrical shock to restore normal heart rhythm.

The guidance outlines requirements and best practices for AED ownership, training and accessibility to ensure compliance with state regulations and to enhance public safety. It is intended for use by businesses, schools, governmental agencies, and other organizations interested in AED implementation.

Background

Ventricular fibrillation is a potentially fatal form of cardiac arrest. The normal electrical impulses in the ventricles suddenly become chaotic, and contractions in this area of the heart become uncoordinated and ineffective. In this condition, the heart becomes unable to pump blood effectively and may stop abruptly. The condition can lead to unconsciousness in seconds. If untreated, the person usually has convulsions and develops irreversible brain damage after about five minutes because oxygen is no longer reaching the brain. Death soon follows.

Cardiopulmonary resuscitation (CPR) must be started within a few minutes and then followed as soon as possible by cardioversion (an electric shock delivered to the chest). The only definitive treatment for ventricular fibrillation is electrical defibrillation. Pads are placed on the unconscious person's chest, and an electric shock is delivered to the heart. This shock stops the abnormal rhythm and allows a coordinated rhythm and normal pumping action to resume. Successful defibrillation is time dependent. To ensure intact neurologic recovery, early defibrillation should occur within the first two minutes of pulselessness. The chance of successful recovery is diminished by 10 percent each minute that the victim remains in ventricular fibrillation.

Early defibrillation is stressed as the primary treatment modality in advanced cardiac life support training and is being included in basic life support training. This has led to extended use of automated external defibrillators (AEDs), particularly by responders who may not have extensive medical training or training in the use of manual conventional defibrillators. AEDs are being used by prehospital medical

personnel, as well as by nonacute care hospital personnel, and, in some areas of the country, AEDs training is being provided to the lay public. Studies have shown that early defibrillation with AEDs can double. According to the American Heart Association survival rates for patients with ventricular fibrillation compared to when professional personnel are dispatched. Survival rates can be as high as 50% to 75% if defibrillation occurs within the first few minutes.

The ease of use of AEDs is largely due to automation and quick analysis of the heart's rhythm by the defibrillator without requiring the operator to interpret the rhythm. Placement of adhesive defibrillator pads is all that is required of the operator and permits hands-off remote defibrillation. Some AEDs are considered semiautomated (SAEDs). They perform rhythm analysis but then signal the operator to press a button in order to administer the shock, therefore still maintaining some operator control.

Locations for SAEDs include prehospital settings, but could also include public areas such as stadiums, office buildings, ferries, and airplanes.

Under the "good Samaritan" statute, a person who renders emergency medical care without compensation or the expectation of compensation is immune from civil liability unless his or her acts constitute gross negligence or willful or wanton misconduct.

Regulations and Limited Immunities

In March of 1998, in an effort to encourage and support healthcare providers, first responders, and the lay public to train and use defibrillators for persons experiencing cardiac arrest, the Washington State Legislature passed [Substitute House Bill 2998](#), an act relating to limited immunity for use of semiautomatic external defibrillators. This act requires a person or entity that uses a defibrillator to receive reasonable instruction in defibrillator use and CPR. Semiautomatic external defibrillators have been modernized as Automatic External Defibrillators (AED).

A person or entity who acquires an AED, and organizations seeking to start a Public Access Defibrillation (PAD) program must follow the requirements of [RCW 70.54.310](#) which establishes minimum standards for Public Access Defibrillation (P.A.D.) programs. By meeting these standards, people and entities delivering patient care with AEDs are provided with limited immunity from civil liability.

The use of a medical therapy device by individuals who are not licensed or certified health care providers has resulted in concerns about legal liability. These concerns are addressed in [RCW 70.54.310](#). The law provides that if standards in these guidelines are met, the acquiring entity, individual using the AED and the physician medical director receive limited immunity from civil liability. This immunity is similar to that provided by the “Good Samaritan” law of the State of Washington. “Good Samaritan” laws are intended to protect individuals who try to help people at the time of an emergency. “Good Samaritan” immunity does not cover acts of gross negligence or willful or wanton misconduct. The intent of RCW 70.54.310 is to establish standards for acquisition, training, maintenance, physician medical direction, and coordination with local emergency medical services. These standards help to ensure that a person using an AED is properly prepared with good working medical equipment, who are willing and able to operate a defibrillator in a safe and effective manner and in coordination with the local emergency response system.

[RCW 70.54.310](#) - **Semiautomatic external defibrillator—Duty of acquirer—Immunity from civil liability** imposes duties on any entity that acquires an AED to ensure that certain training, maintenance and testing, and medical direction requirements are met and requires notifying local emergency medical services (“EMS”) of the existence and location of the device and calling 911 after the use of such equipment. This law also provides limited immunity for civil liability for personal injuries arising from acts or omissions by those who use a defibrillator in an emergency setting. Certain requirements, outlined in the statute, must be met for immunity to apply.

[RCW 4.24.300](#): **Immunity from liability for certain types of medical care. (Good Samaritan Act)** provides limited immunity for volunteers rendering emergency first aid.

Neither [RCW 70.54.310](#) nor [RCW 4.24.300](#) provide for immunity for gross negligence or willful or wanton misconduct, and the Good Samaritan Act does not apply to those who are paid or expect to be paid for providing medical services.

Washington law does not provide immunity for failure to comply with the legal requirements imposed on owners of AED equipment. Therefore, it is important to know and understand applicable regulations and comply with each requirement of the law.

AED Acquisition

AEDs are classified as medical devices by the Food and Drug Administration (FDA), which historically required a physician's prescription for purchase. In Washington, AEDs must be prescribed by a physician or osteopath licensed by the State of Washington. With AEDs being more accessible many manufacturers/vendors can assist with the prescription requirement. Other options include contacting your local county public access AED program for assistance or the [DOH page for local community resources](#).

Medical Direction

AEDs are lifesaving devices intended solely for responding to individuals experiencing sudden cardiac arrest. Medical direction for these devices includes they should only be used in emergencies where a person is unresponsive, not breathing normally, and requires immediate defibrillation to restore heart rhythm. To ensure effectiveness AEDs must be used according to manufacturer guidelines and in compliance with state regulations. Proper training and awareness are essential to maximizing the benefits of AEDs in life-threatening situations.

Training and Department Approved CPR/AED Courses

Organizations and individuals who obtain and use AEDs must successfully complete a training course that includes instruction on how to perform CPR and use an AED. The department recognizes the following organizations as providing evidence-based education in performing CPR and AED use.

- [American Heart Association \(AHA\)](#)
- [Health Safety Institute \(HSI\)](#)
- [National Institutes of Health \(NIH\)](#)
- [American Red Cross](#)

AED Maintenance and Testing

As provided in part of [RCW 70.54.310\(b\)](#), *"...A person or entity who acquires a defibrillator shall ensure that the defibrillator is maintained and tested by the acquirer according to manufacturer's operational guidelines."*

Collaboration with Emergency Medical Services (EMS)

Collaboration with includes two components as provided in [RCW 70.54.310](#). *“...The person or entity who acquires a defibrillator shall notify the local emergency medical services organization about the existence and the location of the defibrillator; and “...The defibrillator user shall call 911 or its local equivalent as soon as possible after the emergency use of the defibrillator and shall assure that appropriate follow-up data is made available as requested by emergency medical service or other health care providers...”*

Notifying local EMS of AED locations helps to direct and bystanders to the nearest AED during a cardiac arrest, which saves valuable time and coordination during an emergency. When an AED is used, EMS can review event data from the device, which may help guide treatment and provide other valuable insights.

Resources

- [Your On-site AED Program: An Implementation Guide](#)
- [Public Access Defibrillation \(PAD\) State Law Fact Sheet | Cardiovascular Disease Data, Tools, and Evaluation Resources | CDC](#)
- [AED and PAD Program Q&A](#)
- [AED Basics, What You Should Know](#)