



Substitute House Bill 1556  
CPR/AED Instruction in High Schools  
2013 Legislative Session Summary  
Medical Emergency Response Guidelines  
(Updated 10/14/2013)

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Guidelines for Medical Emergency Response and Automated External Defibrillator Program Implementation

**MEDICAL EMERGENCY RESPONSE**

- Each school district that operates a high school must develop a medical emergency response plan. The elements of this written plan need to include:
  - Establishing a **rapid communication system** linking all parts of the school campus (including outdoor facilities and practice fields), to the emergency medical services system as well as protocols to clarify when the emergency medical services system and other emergency contact people shall be called.
    - Determine the time required for EMS to respond to any part of the school campus.
    - Establish a method to efficiently direct EMS personnel to any location on the school campus.
    - Identify the key contact people with their current phone numbers and the priority in which each should be contacted, including names of professionals to help with post-emergency support, e.g. principal, school nurse, risk manager, etc.
  - Establish a **medical emergency response plan** for all medical emergencies developed in coordination with appropriate key school personnel and local emergency medical system (EMS), e.g. school nurse, school physician, athletic trainer, etc.
  - Identify a process to **practice implementation** of the medical emergency response plan within the established emergency/disaster drill schedule.
  - Identify a process to implement **safety measures** to prevent injuries in classrooms and on school facilities.
  - Provide **access to trainings** for school employees in cardiopulmonary resuscitation (CPR) and the use of the automated external defibrillator (AED) and first aid.
  - **Implement a public access defibrillator program (PAD)** using an AED.



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**PUBLIC ACCESS DEFIBRILLATOR PROGRAM**

- Develop guidelines for implementing a public access defibrillator program (PAD) using an automated external defibrillator (AED)
  - Each school district that operates a high school must develop policies and procedures to implement a PAD/AED Program. The elements of this program need to include:
    - Medical oversight by a physician licensed in Washington State
    - Identify an individual within the district responsible to coordinate the AED program.
    - Coordinate and collaborate with the local emergency medical services (EMS) system in the planning, placement of the AED, and implementation of the PAD/AED program.
    - Develop a plan to maintain and test the AED following the manufacturer's maintenance guidelines for this medical device.
    - Maintain accurate documents describing maintenance and testing of the AED and equipment, rosters of trained staff, scheduled practice drills and post-event evaluations to support ongoing quality improvement of the program.

**GRANT SEEKING INFORMATION**

Assistance with the purchase of an AED may be available through

- Local community service organizations
- Corporate Foundations
- School or community fundraising activities
- Ryan Shaefer, RN [Project Adam](#) Coordinator for Washington State
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**RELEVANT STATUTES**

[RCW 70.54.310](#) Semiautomatic external defibrillator — Duty of acquirer — Immunity from civil liability.

(1) As used in this section, "defibrillator" means a semiautomatic external defibrillator as prescribed by a physician licensed under chapter 18.71 RCW or an osteopath licensed under chapter 18.57 RCW.

(2) A person or entity who acquires a defibrillator shall ensure that: (a) Expected defibrillator users receive reasonable instruction in defibrillator use and cardiopulmonary resuscitation by a course approved by the department of health;

(b) The defibrillator is maintained and tested by the acquirer according to the manufacturer's operational guidelines;

(c) Upon acquiring a defibrillator, medical direction is enlisted by the acquirer from a licensed physician in the use of the defibrillator and cardiopulmonary resuscitation;

(d) 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

(e) 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.

(3) A person who uses a defibrillator at the scene of an emergency and all other persons and entities providing services under this section are immune from civil liability for any personal injury that results from any act or omission in the use of the defibrillator in an emergency setting.

(4) The immunity from civil liability does not apply if the acts or omissions amount to gross negligence or willful or wanton misconduct.

(5) The requirements of subsection (2) of this section shall not apply to any individual using a defibrillator in an emergency setting if that individual is acting as a good Samaritan under RCW 4.24.300.



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[1998 c 150 § 1.]

[RCW 4.24.300](#) Immunity from liability for certain types of medical care.

(1) Any person, including but not limited to a volunteer provider of emergency or medical services, who without compensation or the expectation of compensation renders emergency care at the scene of an emergency or who participates in transporting, not for compensation, there from an injured person or persons for emergency medical treatment shall not be liable for civil damages resulting from any act or omission in the rendering of such emergency care or in transporting such persons, other than acts or omissions constituting gross negligence or willful or wanton misconduct. Any person rendering emergency care during the course of regular employment and receiving compensation or expecting to receive compensation for rendering such care is excluded from the protection of this subsection.

(2) Any licensed health care provider regulated by a disciplining authority under RCW 18.130.040 in the state of Washington who, without compensation or the expectation of compensation, provides health care services at a community health care setting is not liable for civil damages resulting from any act or omission in the rendering of such care, other than acts or omissions constituting gross negligence or willful or wanton misconduct.

(3) For purposes of subsection (2) of this section, "community health care setting" means an entity that provides health care services and:

(a) Is a clinic operated by a public entity or private tax exempt corporation, except a clinic that is owned, operated, or controlled by a hospital licensed under chapter 70.41 RCW unless the hospital-based clinic either:

(i) Maintains and holds itself out to the public as having established hours on a regular basis for providing free health care services to members of the public to the extent that care is provided without compensation or expectation of compensation during those established hours; or

(ii) Is participating, through a written agreement, in a community-based program to provide access to health care services for uninsured persons, to the extent that:



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(A) Care is provided without compensation or expectation of compensation to individuals who have been referred for care through that community-based program; and

(B) The health care provider's participation in the community-based program is conditioned upon his or her agreement to provide health services without expectation of compensation;

(b) Is a for-profit corporation that maintains and holds itself out to the public as having established hours on a regular basis for providing free health care services to members of the public to the extent that care is provided without compensation or expectation of compensation during those established hours; or

(c) Is a for-profit corporation that is participating, through a written agreement, in a community-based program to provide access to health care services for uninsured persons, to the extent that:

(i) Care is provided without compensation or expectation of compensation to individuals who have been referred for care through that community-based program; and

(ii) The health care provider's participation in the community-based program is conditioned upon his or her agreement to provide health services without expectation of compensation.

[2004 c 87 § 1; 2003 c 256 § 1; 1985 c 443 § 19; 1975 c 58 § 1.]

NOTES:

Severability -- Effective date -- 1985 c 443: See notes following RCW 7.69.010.

Citizen's immunity if aiding police officer: RCW 9.01.055.

Infectious disease testing availability: RCW 70.05.180.



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**RESOURCES and REFERENCES**

[American Heart Association](#), accessed on August 29, 2013.  
Lindsay Hovind Governments Relations Director  
[Lindsay.hovind@heart.org](mailto:Lindsay.hovind@heart.org)

[American Heart Association Implementing an AED Plan](#), accessed on September 6, 2013.

[American Red Cross](#), accessed on August 29, 2013.

Cave, D.M., Aufderheide, T.P., Beeson, J., Ellison, A., Gregory, A., Hazinski, M.F., Hiratzka, L.F., Lurie, K.G., Morrison, L.J., Mosesso, V.N., Nadkarni, V., Potts, J., Samson, R.A., Sayre, M.R, and Schexnayder, S.M. Importance and Implementation of Training in Cardiopulmonary Resuscitation and Automated External Defibrillation in Schools: A Science Advisory from the American Health Association. *Circulation*, 2011. <http://circ.ahajournals.org/content/123/6/691.full.pdf> , accessed on September 6, 2013.

Drezner, J.A., Rao, A.L, Heistand, J, Bloomingdale, M.K., and Harmon, K.G. Effectiveness of Emergency Response Planning for Sudden Cardiac Arrest in United States High Schools with Automated External Defibrillators. *Circulation*, 2009. <http://circ.ahajournals.org/cgi/content/full/CIRCULATIONAHA.109.855890/DC1> accessed on August 30, 2013.

Hazinski, M.F., Markenson, D., Neish, S, Gerardi, M., Hootman, J., Nichol, G., Taras., Hickey, R., O'Connor, R., Potts, J., van der Jagt, E., Berger, St., Schexnayder, S., Garson, A., Doherty, A., and Smith, S. Response to Cardiac Arrest and Selected Life-Threatening Medical Emergencies: The Medical Emergency Response Plan for Schools, A Statement for Healthcare Providers, Policymakers, School Administrators, and Community Leaders. *Circulation*, 2004. <http://circ.ahajournals.org/content/109/2/278.full.pdf+html> , accessed on August 30, 2013.

Massachusetts Department of Elementary and Secondary Education Medical Emergency Response Plans for Schools: Frequently Asked Questions, Template, and a Model for the Plan  
<http://www.doe.mass.edu/ssce/2012-0816MERP.pdf>, accessed September 10, 2013.

[Nick of Time Foundation](#)

[Project Adam](#)



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[Washington Association of School Business Officials Risk Management Committee: Guidelines for Implementing an AED Program 2010](#), accessed September 6, 2013.

[Washington State Public Access Defibrillation Guide](#), accessed September 6 2013.