

Standard Operating Procedure

Automated External Defibrillators (AEDs)



The University of Texas at Austin
Emergency Management

SOP Number:
OEM_AED_01_Automated_External_Defibrillators

Automated External Defibrillators (AEDs)

PURPOSE

The purpose of this document is to establish the expectations and operating procedures of the Office of Emergency Management (OEM) regarding the maintenance of Automated External Defibrillators (AEDs) across the UT campus.

SCOPE

This document applies to the actions that OEM Management will undertake regarding the maintenance of on-campus AEDs, as well as addresses the implications those actions may have on other departments that own or rely upon AEDs on campus.

DEFINITIONS

AED – Automatic External Defibrillator

OEM – Office of Emergency Management

QR Code – Smartphone-readable image codes storing links.

Celebrated Entrance – Term describing the main entrance of buildings on the UT campus, which contains an AED, bleeding control kits, an emergency call box, and other resources.

PROCEDURE

AED Purchasing Procedure

For buildings on campus where the presence of an AED is deemed necessary, the Office of Emergency Management will fund the procurement of 1 AED to be placed inside of a building's celebrated entrance. This only applies to those buildings that do not already have AEDs present. Based on factors such as building size, foot traffic, and other accommodations, OEM may fund additional devices if necessary.

Additionally, OEM will facilitate the monthly maintenance and parts replacement of up to a total of 1 AED device per every 2 floors of each building. For example, if a building has 6 floors, OEM will facilitate and fund the maintenance of 3 AEDs within that building. Buildings with an odd number of floors will be rounded up (i.e., if a building has 5 floors, OEM will maintain 3 AEDs for that building). These devices will be incorporated into the department's QR code-based monthly monitoring system (see *Recording and Reporting*), and as pads and batteries expire those items will be replaced by OEM staff.

The maintenance and upkeep of additional AEDs purchased in a building beyond the established cut-off of 1 device per every 2 floors will be the responsibility of the purchasing party in accordance with Texas state law. Given that OEM is already responsible for AED maintenance in several buildings with more than 1 device per every 2 floors, devices already maintained by OEM will remain under OEM responsibility under these updated guidelines. For a full list of those legacy buildings still covered, please see **Appendix A**.

Supported AED Models

In addition to the limited number of AED devices serviced per building by OEM, this department will only service devices of the following brand and models:

- I. Philips HeartStart FRx
- II. Philips HeartStart HS1/Onsite

If an AED device is not one of the above models, it is the responsibility of the purchasing party to maintain the device in accordance with Texas state law. Reference images of the FRx and HS1/Onsite devices can be found in **Appendix B**.

If buildings or departments wish to replace current non-supported AEDs with devices that are supported, OEM will maintain those replacement devices if they do not exceed the device servicing limit of 1 AED per every 2 floors.

AED Cabinets, Placement, and Signage

AEDs should be placed in easy to access, public locations with clear signage in the vicinity of the device. The AED that OEM provides for buildings that do not already possess one should be placed in the building's celebrated (main) entrance. For more information regarding AED placement and signage best practices, see **Appendix D**.

While it is not a legal requirement, it is recommended that AEDs be stored inside of an AED cabinet. There are a variety of different cabinet types that can be used to mount AED devices inside of a building. In the event that OEM purchases an AED for a building, the office will also provide a wall-mounted cabinet to store the device. It is the responsibility of the building and its departments to oversee the mounting of the cabinet and its related signage through Facilities Services.

Most AED cabinets come with battery-powered alarms that serve as tampering deterrence to prevent a cabinet being opened unnecessarily. However, these alarms can also be quite distracting or overwhelming in an emergency, as well as a hinderance to those technicians maintaining the devices on a frequent basis. As such, OEM does not maintain any AED cabinet alarms or replace related batteries. The decision to keep the cabinet alarmed should be made by individual buildings and their leadership given the needs of their building and maintained by building staff as necessary.

Bleeding Control Kits

OEM will provide 2 Bleeding Control Kits with the AEDs that it purchases for buildings. Additional Bleeding Control Kits desired by a building or department will need to be purchased internally. It is important to note that many of the Bleeding Control Kits on campus have expiration dates. This date references the expiration of the hemostatic bandages within the kit, the rest of the kit remains useable past said expiration date.

RECORDING AND REPORTING

OEM QR Code Program

All AEDs maintained by OEM will have an associated QR code either on or inside the device's cabinet that links to a Smartsheet form. See **Appendix E** for reference images as to where QR codes may be located on the cabinets. This form asks the following 3 questions:

- I. First and Last Name
 - a. *Refers to the individual completing the form.*
- II. Dept/Org Name
 - a. *Refers to the association of the individual completing the form.*
- III. Status of AED
 - a. *Subtext states the following:*
 - i. *"Battery in place, appears to be in working condition, and no visible damage."*
 - b. *Yes or no can be selected based on whether the above criteria are met.*
- IV. If no, why?
 - a. *Subtext states the following:*
 - i. *"i.e., light is not blinking."*
 - b. *This is an open text field that only appears should the Status of AED question be marked as "No". This space is to denote any issues with the device's status of operation.*

Each QR code is associated with the specific AED it is placed by, so there is no need for those individuals completing the survey to identify their location. All information from these checks feeds into a central system maintained by OEM to monitor and service AEDs across campus as necessary. These checks are required to be completed monthly, in accordance with Texas state law regarding AEDs. For more information regarding AED-related law in the state of Texas, refer to **Appendix C**.

OEM is partnering with building managers across campus to complete these monthly checks. Given building manager's frequent proximity to their respective AEDs, it is significantly more efficient for them to perform these monthly checks than to have an OEM team member inspect the entirety of campus every month. It is important to note, however, that OEM's partnership with the building managers is not a mandatory one; participation in these monthly checks is voluntary for building managers. Any AEDs maintained by OEM that are not inspected by their respective building managers will be inspected by a member of the OEM staff or their designees.

For questions regarding how to operate AED devices, please see **Appendix F** for more resources.

Non-OEM Maintained AEDs

It is the expectation of OEM, this university, and the state of Texas, that any AEDs purchased by buildings or departments that are not managed by OEM need to be monitored and maintained in accordance with state law by the purchasing party. These standards may be upheld in whatever fashion most fitting for the building or department, but they must remain in compliance with state law for the safety of the university community.

DocuSigned by:

Derek Trabou

D9FEE6A3DDC64A1...

2024-05-23 | 10:11:13 CDT

Director, Office of Emergency Management

Date

APPENDIX A

LEGACY BUILDINGS WITH OEM-MAINTAINED AEDs

Some exceptions may apply, please contact emergencymanagement@austin.utexas.edu for inquiries

BEL: L. Theo Bellmont Hall
DEV: Development Office Building
EME: Electromechanical Engineering Research Center
HDB: Health Discovery Building
HLB: Health Learning Building
HTB: Health Transformation Building
JES: Beauford H. Jester Center
JON: Jesse H. Jones Hall
KIN: Kinsolving Residence Hall
MNC: Moncrief Neuhaus Athletic Center
NEZ: North End Zone Building
TCB: J. Neils Thompson Commons
UNB: Union Building
UPB: University Police Building

APPENDIX B

SUPPORTED AED MODEL REFERENCE IMAGES

Figure 1: Philips HeartStart FRx AED Reference



Figure 2: Philips HeartStart HS1/Onsite AED Reference



APPENDIX C

TEXAS LEGAL CODE REGARDING AEDs

***Texas Health and Safety Code -- § 779.001. HEALTH & SAFETY Definition.**

In this chapter, "automated external defibrillator" means a heart monitor and defibrillator that:

- (1) has received approval from the United States Food and Drug Administration of its premarket notification filed under 21 U.S.C. § 360(k), as amended;*
- (2) is capable of recognizing the presence or absence of ventricular fibrillation or rapid ventricular tachycardia and is capable of determining, without interpretation of cardiac rhythm by an operator, whether defibrillation should be performed; and*
- (3) on determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.*

***Texas Health and Safety Code -- § 779.003. HEALTH & SAFETY Acquisition, Maintenance, and Inspection of Automated External Defibrillator.**

A person or entity that owns or leases an automated external defibrillator shall:

- (1) maintain and test the automated external defibrillator according to the manufacturer's guidelines; and*
- (2) conduct a monthly inspection to verify the automated external defibrillator:
 - (A) is placed at its designated location;*
 - (B) reasonably appears to be ready for use; and*
 - (C) does not reasonably appear to be damaged in a manner that could prevent operation.**

***Texas Health and Safety Code -- § 779.004. HEALTH & SAFETY Using an Automated External Defibrillator.**

A person or entity that provides emergency care to a person in cardiac arrest by using an automated external defibrillator shall promptly notify the local emergency medical services provider.

***Texas Health and Safety Code -- § 779.005. HEALTH & SAFETY Notifying Local Emergency Medical Services Provider.**

When a person or entity acquires an automated external defibrillator, the person or entity shall notify the local emergency medical services provider of the existence, location, and type of automated external defibrillator.

***Texas Health and Safety Code -- § 779.006. HEALTH & SAFETY Liability Exemption.**

(a) Unless the conduct is wilfully or wantonly negligent, a physician who prescribes or is otherwise involved in the acquisition of an automated external defibrillator and any person or entity that provides training in the use of an automated external defibrillator are not liable for civil damages related to:

(1) the prescription, acquisition, or training in the use of the automated external defibrillator; or

(2) any use or attempted use of or the failure to use the automated external defibrillator.

(b) Any person or entity that acquires an automated external defibrillator and any person or entity that owns, occupies, manages, or is otherwise responsible for the designated location where the automated external defibrillator is placed are not liable for civil damages related to the use or attempted use of or the failure to use the automated external defibrillator unless the conduct is wilfully or wantonly negligent.

(c) The immunity provided by this section is in addition to any other immunity or limitations of liability provided by other law.

(d) The immunity described by this section applies regardless of whether the person who uses, attempts to use, or fails to use the automated external defibrillator received training in the use of an automated external defibrillator.

***Texas Health and Safety Code -- § 779.007. HEALTH & SAFETY Possession of Automated External Defibrillators.**

Each person or entity, other than a licensed practitioner, that acquires an automated external defibrillator that has not been approved by the United States Food and Drug Administration for over-the-counter sale shall ensure that:

(1) the automated external defibrillator has been delivered to that person or entity by a licensed practitioner in the course of his professional practice or upon a prescription or other order lawfully issued in the course of his professional practice; or

(2) if the automated external defibrillator is acquired for the purpose of sale or lease, the person or entity shall be in conformance with the applicable requirements found in Section 483.041, Health and Safety Code.

***Texas Civil Practice and Remedies Code -- § 74.151. CIV. PRAC. & REM. Liability for Emergency Care.**

(a) A person who in good faith administers emergency care is not liable in civil damages for an act performed during the emergency unless the act is wilfully or wantonly negligent, including a person who:

(1) administers emergency care using an automated external defibrillator; or

(2) administers emergency care as a volunteer who is a first responder as the term is defined under Section 421.095, Government Code.

(b) This section does not apply to care administered:

(1) for or in expectation of remuneration, provided that being legally entitled to receive remuneration for the emergency care rendered shall not determine whether or not the care was administered for or in anticipation of remuneration; or

(2) by a person who was at the scene of the emergency because he or a person he represents as an agent was soliciting business or seeking to perform a service for remuneration.

(c), (d) Deleted by Acts 2003, 78th Leg., ch. 204, § 10.01.

(e) Except as provided by this subsection, this section does not apply to a person whose negligent act or omission was a producing cause of the emergency for which care is being administered.

This subsection does not apply to liability of a school district or district school officer or employee arising from an act or omission under a program or policy or procedure adopted under Subchapter 0-1, Chapter 161, Health and Safety Code, other than liability arising from wilful or intentional misconduct.

***Texas Administrative Code -- § 554.1935**

(b) A facility must have at least one automated external defibrillator available for use onsite at all times. The facility must place the automated external defibrillator in a location that is easily accessible for staff persons who are trained to operate it.

(c) A facility must ensure at least one staff person who has completed and maintains training in cardiopulmonary resuscitation (CPR) and automated external defibrillator operation in accordance with the guidelines established by the defibrillator's manufacturer and as approved by the American Heart Association, the American Red Cross, or other nationally recognized associations is onsite at all times.

(d) A facility must ensure that a licensed physician provides medical consultation or general oversight of the staff training to ensure the facility complies with subsection (c) of this section.

(e) A facility must maintain and test the automated external defibrillator according to the manufacturer's guidelines and keep records of the maintenance and testing.

(f) A facility must conduct a monthly inspection to verify the automated external defibrillator:

(1) is placed at its designated location;

(2) reasonably appears to be ready for use; and

(3) does not reasonably appear to be damaged in a manner that could prevent operation.

(g) A facility must ensure the use of an automated external defibrillator is consistent with a resident's advance directive executed or issued under Texas Health and Safety Code, Chapter 166, Subchapter C.

(h) The facility must notify the local emergency medical services provider by calling 9-1-1, per standard CPR procedures, while using an automated external defibrillator on a resident.

(i) Within 24 hours after acquiring an automated external defibrillator, a facility must notify the local emergency medical services provider of:

(1) the existence of the automated external defibrillator;

(2) the location of the automated external defibrillator in the facility; and

(3) the type of automated external defibrillator.

(j) If a facility has an automated external defibrillator on the effective date of this rule, the facility must provide the notification described in subsection (i) of this section within seven days after the effective date.

APPENDIX D

AED PLACEMENT AND SIGNAGE BEST PRACTICES

- I. Place your AED in a visible area that is either central to your building or highly trafficked.
- II. The American Heart Association recommends that it take no more than 3-5 minutes for an individual to retrieve an AED, bring it to a patient, and administer a shock.
- III. AED cabinets should be mounted no more than 48 inches above the floor to ensure both visibility and accessibility.
- IV. Place a 3-D wall sign (triangular signs that protrude from the wall) above your AED cabinet to enhance device visibility.
 - a. Additional signage may be placed down adjacent hallways or around corners to denote that an AED is in the vicinity.
 - b. Window signage or decals at entrances and exits helps to notify people that an AED is available in the building.
- V. AEDs should NOT be placed in drawers, closets, or difficult to access locations as that defeats the purpose of this being a quick, life-saving device.

APPENDIX E

QR CODE PLACEMENT REFERENCE IMAGES

Figure 1: QR code placed on cabinet door.



Figure 2: QR code placed inside cabinet.



APPENDIX F

AED TRAINING AND INFORMATION

Link 1: Philips HeartStart FRx AED Demo Video

<https://www.youtube.com/watch?v=cjLp3fbekXE>

Link 2: Philips HeartStart HS1/OnSite AED Demo Video

<https://www.youtube.com/watch?v=460wVyKYZF0>

Link 3: UT Office of Emergency Management Training Request Form

<https://app.smartsheet.com/b/form/60990d8f20f74a4cbc3e0664d5cb0017>

If you have any questions regarding AEDs on campus, potential training opportunities, or other emergency management related concerns, please reach out to emergencymanagement@austin.utexas.edu or visit emergencymanagement.utexas.edu for more information.

REVISIONS

Date	Revision	Name
1/8/2024	Document created	Joshua Wood
5/23/2024	Document revised	Joshua Wood