

# **Cardiac Emergency Response Plan**

<Name of School, School District, Workplace or Sports Venue/Facility>

The Cardiac Emergency Response Plan (CERP) of (of organization) should include the following:

## **1. Developing a Cardiac Emergency Response Team**

- (a) Who will comprise the Cardiac Emergency Response Team?
  - a. Should include individuals who have current CPR/AED training.
  - b. Should also include someone who can call 9-1-1 and direct EMS to the location of the SCA.
  - c. Designate one person as the Cardiac Emergency Response Team Coordinator.
  - d. Receive and maintain nationally recognized training, which includes a course completion card with an expiration date of not more than 2 years.
  - e. Include as many other people (staff, faculty, coaches, parents, etc.) who can receive additional CPR education and awareness of the plan.

## **2. Activation of Cardiac Emergency Response Team during an identified cardiac emergency**

- (a) Activate the Cardiac Emergency Response Team immediately when a cardiac emergency is suspected.
- (b) The Protocol for responding to a cardiac emergency should be posted and readily accessible to anyone.

## **3. Automated external defibrillators (AEDs) – placement and maintenance**

- (a) Minimum recommended number of AEDs for (insert name of school/school district/workplace/community/sports):
  - (1) *Inside the building* – The number of AEDs shall be sufficient to enable a person to retrieve an AED and deliver it to any location within the building, ideally within 2 minutes of being notified of a possible cardiac emergency.
  - (2) *Outside the building* (e.g., on school grounds, venues, or athletic fields) – The number of AEDs, either stationary or in the possession of an on-site athletic trainer, coach, or other qualified person, shall be sufficient to enable the delivery of an AED to any location outside of the building including any venue, athletic field, or school grounds, ideally within 2 minutes of being notified of a possible cardiac emergency.
  - (3) *Back-up AEDs* – One or more AEDs shall be held in reserve for use as a replacement for any AED which may be out-of-service for maintenance or other issues. The back-up AED(s) should also be available for use when traveling to off-site locations.
- (b) Regularly check and maintain each AED in accordance with the AED’s operating manual and maintain a log of the maintenance activity.
- (c) Designate a person who will be responsible for verifying equipment readiness and for maintaining maintenance activity.

- (d) Additional Resuscitation Equipment: A resuscitation kit shall be connected to the AED carry case. The kit shall contain latex-free gloves, razor, scissors, towel, antiseptic wipes, a CPR barrier mask, and consider an extra set of AED pads.
- (e) AEDs should not be locked in an office or stored in a location that is not easily and quickly accessible at all times.
- (f) AEDs shall be readily accessible for use in responding to a cardiac emergency, during both day and night sports activities, after-school or work activities, in accordance with this CERP. Each AED should have one set of defibrillator electrodes connected to the device and one spare set. All AEDs should have clear AED signage so as to be easily identified. Locations of the AEDs are to be listed in the “Cardiac Emergency Response Team” attachment and in the “Protocol for Posting” attachment.

#### **4. Communication of this Plan throughout the school campus**

- (a) The Cardiac Emergency Response Protocol should be *posted* broadly in places such as (but not limited to):
  - (1) In each classroom, cafeteria, restroom, health room, break room and in all offices.
  - (2) Adjacent to each AED.
  - (3) Adjacent to each public telephone.
  - (4) In the gym, near the swimming pool, and in all other indoor locations where athletic activities take place.
  - (5) At other strategic location such as school campus locations, including outdoor physical education and athletic venues and facilities.
  - (6) Attached to all portable AEDs.
- (b) The Cardiac Emergency Response Protocol should be *distributed* to:
  - (1) All staff and administrators at the start of each school year, with updates distributed as made. In workplace and recreation centers, the CERP should be made available annually and when updates are made.
- (c) A copy of the Cardiac Emergency Response Plan should be provided to any organization using the school/workplace/athletic facility. Consider a modified Cardiac Emergency Response Plan which takes into consideration the nature and extent of the use and shall meet the spirit and intent of this Plan to ensure that preparations are made to enable a quick and effective response to a cardiac emergency on-site after standard business hours.

#### **5. Training in Cardiopulmonary Resuscitation (CPR) and AED Use**

- (a) Staff Training:
  - (1) A sufficient number of staff (in addition to the school nurse or safety coordinator) should be trained in cardiopulmonary resuscitation (CPR) and in the use of an AED. (It is recommended that at a minimum, at least 10% of staff, 50% of coaches, and 50% of physical education staff in schools should have current CPR/AED certification.) Training shall be renewed at least every two years.
  - (2) The school/workplace/sports facility should designate the person responsible for coordinating staff training as well as the medical contact for AEDs, if available.

- (3) Training may be traditional classroom, on-line or blended instruction but should include cognitive learning, hands-on practice, and testing.
- (4) Consult local regulations to ensure your plan meets any additional local requirements.
- (b) Cardiac Emergency Response Drills:
  - Cardiac Emergency Response Drills are an essential component of this Plan. The site should perform a minimum of 2 successful Cardiac Emergency Response Drills each year with the participation of staff, safety officials and other targeted responders. A successful Cardiac Emergency Response Drill is defined as full and successful completion of the Drill in 5 minutes or less.

**6. Local Emergency Medical Services (EMS) integration with the school/workplace/athletic facility plan**

- (a) Provide a copy of this Plan to local emergency response and dispatch agencies (e.g., the 9-1-1 response system), which may include local police and fire departments and local Emergency Medical Services (EMS).
- (b) The development and implementation of the Cardiac Emergency Response Plan shall be coordinated with the local EMS Agency, campus safety officials, on-site first responders, administrators, athletic trainers, school nurses, and other members of the school and/or community medical team.
- (c) Work with local emergency response agencies to 1) coordinate this Plan with the local emergency response system and 2) to inform local emergency response system of the number and location of on-site AEDs.

**7. Annual review and evaluation of the Plan**

Conduct an annual internal review of the Cardiac Emergency Response Plan (CERP) for schools, workplaces, and/or sports facilities (indoor/outdoor). The annual review should focus on ways to improve the response process, to include:

- (a) A *post-event review* following an event. This includes review of existing documentation for any identified cardiac emergency that occurred at the location or at any sanctioned function. There should be a designated person who is responsible for establishing the documentation process. Post-event documentation and action shall include the following:
  - (1) A contact list of individuals to be notified in case of a cardiac emergency.
  - (2) Determine the procedures for the release of information regarding the cardiac emergency.
  - (3) Date, time, and location of the cardiac emergency and the steps taken to respond to the cardiac emergency.
  - (4) The identification of the person(s) who responded to the emergency.
  - (5) The outcome of the cardiac emergency. This shall include but not be limited to a summary of the presumed medical condition of the person who experienced the cardiac emergency to the extent that the information is publicly available. Personal identifiers should not be collected unless the information is publicly available.
  - (6) An evaluation of whether the Plan was sufficient to enable an appropriate response to the specific cardiac emergency. The review shall include recommendations for improvements in the Plan and in its implementation if the Plan was not optimally suited for the specific incident. The

post-event review may include discussions with medical personnel (ideally through the school's medical counsel) to help in the debriefing process and to address any concerns regarding on-site medical management and coordination.

- (7) An evaluation of the debriefing process for responders and post-event support. This shall include the identification of aftercare services including aftercare services and crisis counselors.
- (b) A review of the documentation for all Cardiac Emergency Response Drills performed during the year. Consider pre-established Drill report forms to be completed by all responders.
- (c) A determination, at least annually, as to whether or not additions, changes or modifications to the Plan are needed. Reasons for a change in the Plan may result from a change in established guidelines, an internal review following an actual cardiac emergency, or from changes in facilities, equipment, processes, technology, administration, or personnel.

## 8. Protocol for Cardiac Emergency Responders

### (School, Workplace, or Sports Facility Name) Cardiac Emergency Response Team PROTOCOL

#### For All (School, Workplace, or Sports Facility Name)

Sudden cardiac arrest events can vary greatly. All staff and Cardiac Emergency Response Team (CERT) members must be prepared to perform the duties outlined below. Immediate action is crucial in order to successfully respond to a cardiac emergency. Consideration should be given to obtaining on-site ambulance coverage for high-risk athletic events. One should also identify the closest appropriate medical facility that is equipped in advanced cardiac care.

Follow these steps in responding to a suspected cardiac emergency:

#### **(a) Recognize the following signs of sudden cardiac arrest and take action in the event of one or more of the following:**

- The person is not moving, or is unresponsive, or appears to be unconscious.
- The person is not breathing normally (has irregular breaths, gasping or gurgling, or is not breathing at all).
- The person appears to be having a seizure or is experiencing convulsion-like activity. (Cardiac arrest victims commonly appear to be having convulsions).
- *Note:* If the person received a blunt blow to the chest, this can cause cardiac arrest, a condition called commotio cordis. The person may have the signs of cardiac arrest described above and is treated the same.

#### **(b) Facilitate immediate access to professional medical help:**

- Call 9-1-1 as soon as you suspect a sudden cardiac arrest. Provide the school address, cross streets, and patient condition. Remain on the phone with 9-1-1. (Bring your mobile phone to the patient's side, if possible.) Give the exact location and provide the recommended route for ambulances to enter and exit. Facilitate access to the victim for arriving Emergency Medical Service (EMS) personnel.
- Immediately contact the members of the Cardiac Emergency Response Team (CERT).
  - Give the exact location of the emergency. ("Mr. /Ms. \_\_\_ Classroom, Room # \_\_\_, gym, football field, cafeteria, etc."). Be sure to let EMS know which door to enter. Assign someone to go to that door to wait for and flag down EMS responders and escort them to the exact location of the patient.
- If you are a CERT member, proceed immediately to the scene of the cardiac emergency.
  - The closest team member should retrieve the automated external defibrillator (AED) in route to the scene and leave the AED cabinet door open; the alarm typically signals the AED was taken for use.
  - Acquire AED supplies such as latex-free gloves, razor, scissors, towel, antiseptic wipes, a barrier mask and consider an extra set of AED pads.

**(c) Start CPR**

- Begin continuous chest compressions and have someone retrieve the AED.
- Here is how:
  - Press hard and fast in center of chest. Goal is 100 compressions per minute. (Faster than once per second, but slower than twice per second.)
  - Use 2 hands: The heel of one hand and the other hand on top (or one hand for children under 8 years old), pushing to a depth of 2 inches (or 1/3<sup>rd</sup> the depth of the chest for children under 8 years old).
  - Follow the 9-1-1 dispatcher's instructions, if provided.

**(d) Use the nearest AED:**

- When the AED is brought to the patient's side, press the power-on button, and attach the pads to the patient as shown in the diagram on the pads. Then follow the AED's audio and visual instructions. If the person needs to be shocked to restore a normal heart rhythm, the AED will deliver one or more shocks.
  - *Note:* The AED will only deliver shocks if needed; if no shock is needed, no shock will be delivered.
- Continue CPR until the patient is responsive or a professional responder arrives and takes over.

**(e) Transition care to EMS:**

- Transition care to EMS upon arrival so that they can provide advanced life support.

**(f) Action to be taken by Office / Administrative Staff:**

- Confirm the exact location and the condition of the patient.
- Activate the Cardiac Emergency Response Team and give the exact location if not already done.
- Confirm that the Cardiac Emergency Response Team has responded.
- Confirm that 9-1-1 was called. If not, call 9-1-1 immediately.
- Assign a staff member to direct EMS to the scene.
- Perform "Crowd Control" – directing others away from the scene.
- Notify other staff: school nurse, athletic trainer, athletic director, safety director, safety manager, and or sports facilities manager, etc.
- Ensure that medical coverage continues to be provided at the athletic event if on-site medical staff accompanies the victim to the hospital.
- Consider delaying dismissal, recess, or other changes to facilitate CPR and EMS functions.
- Designate people to cover the duties of the CPR responders.
- Copy the patient's emergency information for EMS.
- Notify the patient's emergency contact (parent/guardian, spouse, etc.).
- Notify faculty and students, staff, employees, and sports attendees when to return to the normal schedule.
- Contact school district administration, human resources and/or sports facility management.

**Building Location Information**

**Name & Address** \_\_\_\_\_

**Emergency Phone#** *Insert #s for operating -hours & after-hours, may be office during operating hours* \_\_\_\_\_

**Cross Streets**  
\_\_\_\_\_

**AED Location** \_\_\_\_\_ **AED Location** \_\_\_\_\_

**AED Location** \_\_\_\_\_ **AED Location** \_\_\_\_\_

**AED Location** \_\_\_\_\_ **AED Location** \_\_\_\_\_

(School, Workplace, or Sports Facility Name)  
**CARDIAC EMERGENCY RESPONSE TEAM PROTOCOL**

**Simplified Adult BLS**



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**IMPORTANT:** This is a draft document intended for use in formulating a plan for adoption by a school/school district. Medical and legal counsel for the school/school district should review this Plan before implementation. It is the responsibility of the school/school district to ensure that the Cardiac Emergency Response Plan as adopted is consistent with local, state, and federal law.