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Department of Transportation

## **AUTOMATED EXTERNAL DEFIBRILLATOR**

### **AUTHORITY:**

Sections 20.23(4)(a) and 334.048(3), Florida Statutes (F.S.)

### **REFERENCES:**

Section 365.172, F.S.  
Section 401.2915, F.S.  
Section 768.1325, F.S.  
Rule 64J-1.023, Florida Administrative Code (F.A.C.)  
Rule 64J-2.018, F.A.C.

### **STATEMENT OF POLICY:**

To establish procedures and guidelines for the voluntary implementation of an Automated External Defibrillator (AED) program within the Florida Department of Transportation (Department) in accordance with Florida law and regulations promulgated by the Florida Department of Health.

### **SCOPE:**

The potential users of this procedure are all Department employees.

### **DEFINITIONS:**

**AED Coordinator:** A person designated to implement the AED program for a facility or facilities who is appropriately trained and certified in the use and care of the AED(s).

**ANSWERING POINT:** The public safety agency that receives incoming 911 calls and dispatches appropriate public safety agencies to respond to the calls as set forth in **Section 365.172(3)(y), F.S.**

**Automated External Defibrillator (AED):** A fully automated device designed to deliver an electric shock in an attempt to restore normal heart rhythm to persons who have suffered sudden cardiac arrest.

**Employee:** Any person employed by the Florida Department of Transportation.

**Sudden Cardiac Arrest:** When the electrical impulses of the human heart malfunction causing ventricular fibrillation, an erratic and ineffective rhythm, characterized by the absence of a pulse, and respirations.

## 1. GENERAL

Florida law does not require an AED program for state owned or leased facilities. The Secretary (for the Central Office), District Secretaries, and the Executive Director of the Florida Turnpike Enterprise, or designee, decide whether to establish an AED program for his or her respective area. If a program is established, this procedure shall be followed.

## 2. RESPONSIBILITIES

The AED Coordinator will:

- (A) Be designated by the Secretary, applicable District Secretary, or Executive Director of the Florida Turnpike Enterprise, or designee, to oversee the AED program for a facility or facilities and coordinate the use of AEDs by trained employees.
- (B) Obtain a prescription for each AED from the Medical Director of the Florida Department of Health, Bureau of Emergency Medical Services.
- (C) Inform local health service agencies of the location and type of each AED in any Department facility. Refer to **Section 401.2915(2)(b), F.S.**
- (D) Ensure that employees who volunteer to use the AEDs are trained pursuant to **Section 401.2915(2)(a), F.S.** See **Section 5.**
- (E) Maintain a record of all employees trained in the use of AEDs and on the specific AED model they are qualified to use.
- (F) Periodically review the placement and access for AEDs and the certification status of trained employees, and make suggestions for improvements to the Secretary, District Secretary, or Executive Director of the Florida Turnpike Enterprise or designee. For suggested placement of AEDs, refer to **Rule 64J-1.023(3)(f), F.A.C.**

### 3. IMPLEMENTATION

**3.1** *Section 64J-1.023(3)(g), F.A.C.*, recommends that each AED should have an accompanying kit that contains the following:

- (A) Simplified directions for CPR and use of the AED,
- (B) Non-latex protective gloves,
- (C) Appropriate sizes of CPR face masks with detachable mouthpieces, plastic or silicone face shields, one-way valves, or other types of barrier device that can be used in mouth-to-mouth resuscitation,
- (D) One pair of medium sized bandages,
- (E) Spare battery and electrode pads,
- (F) Two biohazard or medical waste plastic bags,
- (G) Pad of paper and pen for writing,
- (H) Absorbent towel, and
- (I) Flat nosed scissors for removal of clothing.

### 3.2 Documentation of AED Use

- (A) After any incident in which the AED is attached to an individual with a perceived medical emergency, regardless of whether a shock is delivered, the trained employee who used or attempted to use the AED will complete the ***AED Use Report, Form No. 500-000-21 (Appendix A)***.
- (B) The original report will be maintained in the AED Coordinator's ***AED Use Report*** file.
- (C) The internally recorded information from the AED will be forwarded by the AED Coordinator, or designee, to the Medical Director, Florida Department of Health, Bureau of Emergency Medical Services, who will forward the information to the applicable local emergency medical services medical director. This information should be forwarded within 48 hours of the AED event.

### 3.3 AED Inspections

The AED Coordinator will conduct an inspection not less than once every three months of all AED units and record the test results on the **AED Log, Form No. 500-000-22 (Appendix B)**.

### 3.4 Records

The AED Coordinator will maintain the following information in accordance with applicable retention schedules:

- (A) Records of all employees who are voluntarily CPR and AED trained and are authorized to use the AED,
- (B) Date of initial CPR certification and AED trainings for each authorized AED user and dates of formal refresher training,
- (C) Current status of training of the AED users, including CPR certification expiration dates,
- (D) Dates of AED review and proficiency demonstrations,
- (E) Locations of all AEDs subject to his or her inspection,
- (F) AED Use Reports, and
- (G) AED Log Forms.

### 3.5 Deployment of AED

AED placement shall only be considered in state owned or leased facilities where there is a trained employee pursuant to **Section 401.2915(2)(a), F.S.**, and **Rule 64J-1.023, F.A.C.**, within the facility and available at all times during Department business hours. Under no circumstances will an AED be used or maintained by any person who is not CPR certified and AED trained.

### 3.6 Objection to Use of an AED

**3.6.1** A “Do Not Resuscitates Order (DNRO) is a specific document obtainable from the Florida Department of Health to be executed by an individual and his or her physician. This document when properly prepared and executed authorizes emergency medical technicians and paramedics to withhold or withdraw CPR and other life saving techniques including the use of an AED. Pursuant to **Rule 64J-2.018, F.A.C.** a properly prepared and executed DNRO does not apply to employees who volunteer to be CPR and AED trained. Employees interested in obtaining more information on the acquisition and use of a DNRO should visit the Florida Department of Health (DH) website.

**3.6.2** A copy of properly completed and executed patient identified “device” (***DH Form 1896***) or a signed statement that an employee or visitor to a Department facility has made an informed conscious decision to decline the use of an AED, shall be recognized as an “objection of the victim” to the use of an AED as contemplated by ***Section 768.1325, F.S.***, and no steps to use or attempt to use an AED shall be initiated.

**3.6.3** A Department employee who has made an informed and conscious decision to object to the use of an AED on himself or herself shall keep a copy of a completed ***DH Form 1896*** or other signed statement clearly objecting to the use of an AED in the holder used to display his or her Department identification badge and wear it in plain view at all times during work hours. Authorized and trained employees shall check an employee’s identification badge holder for such information prior to initiating use of an AED on an employee experiencing a perceived medical emergency.

#### **4. LIABILITY**

***Section 768.1325, F.S., Cardiac Arrest Survival Act***, and ***Section 768.13, F.S., Florida Good Samaritan Act***, provide that a reasonable person reacting to a perceived medical emergency requiring an immediate medical response regarding the heart or other cardio pulmonary functioning without objection of the assisted individual is immune from civil liability.

#### **5. TRAINING**

**5.1** ***Section 401.2915(2)(a), F.S.***, and ***Rule 64J-1.023, F.A.C.***, require initial and refresher training on the general use of AEDs, CPR, and use of the particular model of AED available in a facility for all volunteers who will be using an AED.

**5.2** Training is not a one-time event, and formal refresher training should be conducted at least every two years, depending on certification expiration, and should include demonstrated proficiency in the use of the AED. For additional information regarding training, refer to ***Section 401.2915, F.S.***, and ***Rule 64J-1.023(3)(c)5, F.A.C.***

**5.3** Only employees who have successfully completed a CPR and AED course and formal refresher training, as applicable, will be permitted to use an AED.

#### **6. FORMS**

These required forms can be found in the Department’s Forms Library:

500-000-21 Automated External Defibrillator Use Report

500-000-22 Automated External Defibrillator Log

**APPENDIX A  
FDOT FORM 500-000-21**

**AUTOMATED EXTERNAL DEFIBRILLATOR  
USE REPORT**

DATE OF INCIDENT: \_\_\_\_\_ TIME OF INCIDENT: \_\_\_\_\_

FDOT FACILITY NAME/ADDRESS: \_\_\_\_\_

AED USER'S NAME: \_\_\_\_\_

AED USER'S TELEPHONE NUMBER: \_\_\_\_\_

ASSISTED INDIVIDUAL'S NAME: \_\_\_\_\_

SPECIFIC LOCATION OF INCIDENT: \_\_\_\_\_

\_\_\_\_\_

COMMENTS (OPTIONAL): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

USER'S SIGNATURE: \_\_\_\_\_

\_\_\_\_\_

