



Creating a Cardiac Emergency Action Plan

(Cardiac arrest **requires immediate action**. The following example outlines components of preparation and emergency response)

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Important: The information provided in this document outlines components included in a Cardiac Arrest Emergency Action Plan and is for informational purposes only. It should not substitute for professional advice. Always consult your local regulations and authorities when creating a Cardiac Emergency Action Plan.

Cardiac Arrest Emergency Action Plan Example

This Cardiac Arrest Emergency Action Plan is adopted by
effective

A cardiac emergency requires immediate action. Cardiac emergencies may arise as a result of a Sudden Cardiac Arrest (SCA) or a heart attack, but can have other causes. SCA is the sudden loss of all heart activity due to an irregular heart rhythm. Without immediate treatment, it can lead to death.

Signs of Sudden Cardiac Arrest can include one or more of the following:

- Not moving, unresponsive or unconscious
- Not breathing normally (i.e., may have irregular breathing, gasping or gurgling or may not be breathing at all)

The Cardiac Emergency Response Plan of _____ should be as follows:

1. Cardiac Emergency Response Team (CERT)

- a. The Cardiac Emergency Response Team should be comprised of those individuals who have current CPR/AED certification.
- b. All members of the Cardiac Emergency Response Team should receive and maintain nationally recognized training, which includes a certification card with an expiration date of not more than 2 years.
- c. As many other staff members as reasonably practicable should receive training.

The members of our organization who are part of the Cardiac Emergency Response Team are listed in the following table:

Cardiac Emergency Response Team

Name	CPR/AED Certification Date

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

a. The members of the Cardiac Emergency Response Team should be notified immediately when a cardiac emergency is suspected. They will be notified by (choose one):

(If Other)

b. The steps for responding to a cardiac emergency are described below.

i. Recognize sudden cardiac arrest

- Unconscious and unresponsive
- Not breathing or not breathing normally

ii. Call 9-1-1

1. Provide organization address
2. Explain patient condition
3. Listen to the dispatcher
4. Answer questions
5. Notify other members of Cardiac Emergency Response Team

iii. Send someone to get the AED

- The closest member of the CERT should grab the AED
- Leave the cabinet door open, if alarmed, the alarm typically signals the AED was taken for use
- Bring AED supplies such as scissors, razor, towel, wipes, and gloves, if available.

iv. If enough people, send someone outside to wave down the ambulance.

v. Start CPR

- 100-120 compressions per minute
- 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 1/3rd the depth of the chest for children under 8 years old).
- Follow the 9-1-1 dispatcher's instructions, if provided

vi. Use the AED as soon as it arrives

1. Turn it on
2. Place the pads as shown in the diagram on the pads
3. Follow the AED audio and visual (if available) instructions

Note: The AED will only deliver shocks if needed; if no shock is needed, no shock will be delivered

vii. Transition care to EMS:

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

viii. Other Action to be taken by 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.
- 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.).

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

a. Minimum recommended number of AEDs for

Inside office buildings – The number of AEDs should be sufficient to enable employees to retrieve an AED and deliver it to any location within the building within 3 minutes of being notified of a possible cardiac emergency.

i. Number of AEDS located at _____ :

b. _____ will regularly check and maintain each AED in accordance with the AED's user manual. (See AED Maintenance Team table below for person(s) responsible for checking AEDs)

i. AEDs will be checked monthly.

- ii. The person checking the AEDs should answer the following questions:
 - Is the Active Status Indicator light on your AED flashing green?
 - Are the AED pads plugged in and ready for use?
 - Does the AED appear to be undamaged and ready for use?
 - Is the AED free of chirping and warning notifications?
 - Are the AED pads within their usable date?
 - Is the AED battery within its usable date?
- iii. If the person checking the AEDS answers no to any of these questions, they should call the AED manufacturer or distributor that sold the AED immediately.
- iv. The person checking the AED should sign and date the AED check tag which will be attached to each AED cabinet and/or carry case.

AED Maintenance Team

Name	AED Location

- c. Additional Resuscitation Equipment: A resuscitation kit should be connected to the AED carry case. The kit should contain latex-free gloves, razor, scissors, towel, antiseptic wipes and a CPR barrier mask.
- d. AEDs should **not be locked** in an office or stored in a location that is not easily and quickly accessible at all times.
- e. AEDs should be readily accessible for use in responding to a cardiac emergency, during both office hours and after office hours, in accordance with this Plan. 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.

4. Communication of this Plan

- a. The Cardiac Emergency Response Protocol should be distributed to:
 - ii. All employees at the start of each year, with updates distributed as made.
 - iii. Local emergency medical services

Person Responsible for Distribution:

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

- a. Employee Training:
 - i. A sufficient number of staff should be trained in cardiopulmonary resuscitation (CPR) and in the use of an AED to enable _____ to carry out this plan. Training should be renewed at least every two years. _____ should designate the person responsible for coordinating staff training.

CPR/AED Certification Training Coordinator:

- ii. Training should be provided by an instructor currently certified by a nationally-recognized organization to conform to current guidelines for teaching First Aid, CPR and/or Emergency Cardiac Care (ECC).
- iii. Training may be traditional classroom, on-line or blended instruction but should include cognitive learning, hands-on practice and testing.

6. Annual review and evaluation of the Plan

_____ should conduct an annual internal review of the company's plan.

The annual review should focus on ways to improve the company's response process, to include:

A post-event review following an event. This includes review of existing company-based documentation for any identified cardiac emergency that occurred on company grounds. _____ should designate the person who will be responsible for

establishing the documentation process. Post-event documentation and action should include the following:

- a. A contact list of individuals to be notified in case of a cardiac emergency.
- b. Determine the procedures for the release of information regarding the cardiac emergency.
- c. Date, time and location of the cardiac emergency and the steps taken to respond to the cardiac emergency.
- d. The identification of the person(s) who responded to the emergency.

- e. The outcome of the cardiac emergency. This should 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.
- f. An evaluation of whether the plan was sufficient to enable an appropriate response to the specific cardiac emergency. The review should 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 to help in the debriefing process and to address any concerns regarding on-site medical management and coordination.
- g. An evaluation of the debriefing process for responders and post-event support.
- h. 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, or personnel.

Building Location Information

Organization Name:

Organization Address:

AED Location

