



Public Access Defibrillation (PAD) Program Start-Up Checklist

☐ **Identify a New York State licensed physician** or New York State based hospital knowledgeable and experienced in emergency cardiac care to serve as Emergency Health Care Provider (EHCP) to participate in a collaborative agreement.

☐ **Select an AED** that is in compliance with the Article 30, section 3000-B (1)(A) (text reprinted below). The AED must be programmed to the current Emergency Cardiovascular Care (ECC) Guidelines, capable of defibrillating both adult and pediatric patients.

"Automated external defibrillator" means a medical device, approved by the United States Food and Drug Administration, that:

- i. is capable of recognizing the presence or absence, in a patient, of ventricular fibrillation and rapid ventricular tachycardia;*
- ii. is capable of determining, without intervention by an operator, whether defibrillation should be performed on the patient;*
- iii. upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to the patient's heart; and*
- iv. then, upon action by an operator, delivers an appropriate electrical impulse to the patient's heart to perform defibrillation.*

☐ **Select and use an approved PAD training course** for AED users. At present, the 12 approved programs are as follows:

American Heart Association	Emergency University
American Red Cross	Medic First Aid International
American Safety & Health Institute	National Safety Council
Emergency Care and Safety Institute	REMSCO of NYC, Inc.
Emergency First Response	State University of NY
Emergency Services Institute	Wilderness Medical Associates
EMS Safety Service, Inc.	

☐ **Develop a written collaborative agreement** with the EHCP. The sample agreement may be used as-is or may be tailored to your needs. The sample agreement in an editable MS Word format may be found at SREMS.com. If you choose to create your own document, it must include:

- A. Written practice protocols for the use of the AED;*
- B. Written policies and procedures which include;*
 - 1. Training requirements for AED users;*
 - 2. A process for the immediate notification of EMS by calling of 911;*
 - 3. A process for identification of the location of the AED units;*
 - 4. A process for routine inspection of the AED unit(s) as well as regular maintenance and which meet or exceed manufacturers recommendations;*
 - 5. Incident documentation requirements, and*
 - 6. Participation in a regionally approved quality improvement program.*

☐ **Provide written notice to the 911 center** in your county of the availability of AED service at the organization's location.

Send a copy of your Notice of Intent to Provide PAD to:

If your business/organization is located in Broome county

Broome County Emergency Dispatch/911 Center
153 Lt. VanWinkle Drive
Binghamton, NY 13905
Fax 607-778-1150

If your business/organization is located in Chenango county

Chenango County 911 Center
179 County Road 46
Norwich, NY 13815
Fax 607-337-1865

If your business/organization is located in Tioga county

Tioga County Sheriff 911 Dispatch Center
103 Corporate Drive
Owego, NY 13827
Fax 607-687-6755

☐ **Send a copy** of the Notice of Intent to Provide PAD (DOH 4135) and signed Collaborative Agreement to Susquehanna Regional EMS Council by mail to 311 Exchange Avenue, 2nd Floor Unit 2, Endicott, NY 13760 or by fax to 607-397-2728.