

Sponsor Statement for SB 325

Civil Liability For Defibrillator Use

An Act relating to civil liability for use of an automated external defibrillator; and providing for an effective date.

Updated: February 20, 2002
Contact: Senator Gene Therriault's office at (907) 465-4797

Senate Bill 325 will help save lives in Alaska by increasing the availability of devices designed to restore a normal heartbeat when a person's heart suddenly stops.

Each year, 250,000 people die in the United States as a result of sudden cardiac arrest. The most important treatment for more than half of these patients is defibrillation, an electrical shock intended to restore a more normal cardiac rhythm. For each minute a person remains in cardiac arrest, their chances of survival decrease by approximately 7% to 10%. Nearly all emergency medical services agencies in Alaska are capable of performing defibrillation. Strategically placed Automated External Defibrillators, known as AEDs, have the potential to save lives by allowing defibrillatory shocks to be delivered prior to the arrival of the ambulance crew.

AEDs have evolved significantly over the past few years and the current generation of devices is safer, easier to use, and more maintenance free than ever before. Businesses and municipalities are interested in making AEDs more accessible in the workplace and in locations where large groups gather so that both trained staff and trained laypersons can access the devices in the event of a sudden cardiac arrest. Notable successes have been achieved with these devices in this setting, and a number of programs have placed these devices where they are accessible to the general public. Examples include O'Hare and Midway airports in Illinois and Dallas/Ft. Worth airport in Texas. The American Heart Association is recommending the training of non-medical lay persons in the use of automated external defibrillator devices.

Currently, AS 09.65.090 provides immunities from civil liability to individuals who use the device. It does not provide any immunities for those making the devices accessible for use. This has limited the expansion of AED access programs due to a perception of excessive liability that is largely due to unfamiliarity with the current state of the technology regarding ease of use and safety. It is literally impossible to shock a person who does not require it with the current devices.

SB 325 corrects this deficiency so that these potentially lifesaving devices are more readily available for use and has provisions that result in the integration of the AEDs into the local emergency response system.

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Specifically, the bill repeals the language regarding AEDs from AS 09.65.090 and moves it to the new 09.65.087. The previously existing requirement that users of the devices be "properly trained" has been deleted in recognition of the ease of use of the new devices and their ability to discern between shockable and nonshockable rhythms and in anticipation of even further advances in this technology.

There are several specific prerequisites to receive immunities from civil liability that are important to note. First, those who acquire or provide the device must notify the local emergency response agency of the location of the device. This is very helpful information for incoming emergency medical services personnel. Second, those who acquire or provide the device are obligated to properly maintain and test it. Third, it requires that a means of notifying the local EMS agency be available when a medical emergency occurs where the device is used. Finally, because trained rescuers can deliver the shocks more quickly than those who are not, those who acquire or provide the device for use by the agency's employees are required to provide appropriate training to those employees and agents who are reasonably expected to use the device.

Senate Bill 325 represents model legislation that takes the best from both Federal and other states' statutes regarding the use of automated external defibrillators and creates an environment that encourages the proliferation of this life saving technology in Alaska.