



California AED Codes and Regulations

California Civil Code § 1714.21

(a) For purposes of this section, the following definitions shall apply:

(1) "AED" or "defibrillator" means an automated or automatic external defibrillator.

(2) "CPR" means cardiopulmonary resuscitation.

(b) Any person who, in good faith and not for compensation, renders emergency care or treatment by the use of an AED at the scene of an emergency is not liable for any civil damages resulting from any acts or omissions in rendering the emergency care.

(c) A person or entity who provides CPR and AED training to a person who renders emergency care pursuant to subdivision (b) is not liable for any civil damages resulting from any acts or omissions of the person rendering the emergency care.

(d) A person or entity that acquires an AED for emergency use pursuant to this section is not liable for any civil damages resulting from any acts or omissions in the rendering of the emergency care by use of an AED, if that person or entity has complied with subdivision (b) of Section 1797.196 of the Health and Safety Code.

(e) A physician who is involved with the placement of an AED and any person or entity responsible for the site where an AED is located is not liable for any civil damages resulting from any acts or omissions of a person who renders emergency care pursuant to subdivision (b), if that physician, person, or entity has complied with all of the requirements of Section 1797.196 of the Health and Safety Code that apply to that physician, person, or entity.

(f) The protections specified in this section do not apply in the case of personal injury or wrongful death that results from the gross negligence or willful or wanton misconduct of the person who renders emergency care or treatment by the use of an AED.

(g) Nothing in this section shall relieve a manufacturer, designer, developer, distributor, installer, or supplier of an AED or defibrillator of any liability under any applicable statute or rule of law.

California Health & Safety Code § 1797.190

The [Emergency Medical Services] authority may establish minimum standards for the training and use of automatic external defibrillators.

California Health & Safety Code § 1797.196

Section 1797.196 of the Health and Safety Code, as amended by Section 1 of Chapter 85 of the Statutes of 2006, is amended to read:



(a) For purposes of this section, "AED" or "defibrillator" means an automated or automatic external defibrillator.

(b) In order to ensure public safety, **any person or entity that acquires an AED** is not liable for any civil damages resulting from any acts or omissions in the rendering of the emergency care under subdivision (b) of Section 1714.21 of the Civil Code, **if that person or entity does all of the following:**

(1) Complies with all regulations governing the placement of an AED.

(2) Ensures all of the following:

(A) **That the AED is maintained and regularly tested according to the operation and maintenance guidelines set forth by the manufacturer, the American Heart Association, and the American Red Cross, and according to any applicable rules and regulations set forth by the governmental authority under the federal Food and Drug Administration and any other applicable state and federal authority.**

(B) **That the AED is checked for readiness after each use and at least once every 30 days if the AED has not been used in the preceding 30 days. Records of these checks shall be maintained.**

(C) **That any person who renders emergency care or treatment on a person in cardiac arrest by using an AED activates the emergency medical services system as soon as possible, and reports any use of the AED to the licensed physician and to the local EMS agency.**

(D) **For every AED unit acquired up to five units, no less than one employee per AED unit shall complete a training course in cardiopulmonary resuscitation and AED use that complies with the regulations adopted by the Emergency Medical Service Authority and the standards of the American Heart Association or the American Red Cross. After the first five AED units are acquired, for each additional five AED units acquired, one employee shall be trained beginning with the first AED unit acquired. Acquirers of AED units shall have trained employees who should be available to respond to an emergency that may involve the use of an AED unit during normal operating hours.**

(E) **That there is a written plan that describes the procedures to be followed in the event of an emergency that may involve the use of an AED, to ensure compliance with the requirements of this section. The written plan shall include, but not be limited to, immediate notification of 911 and trained office personnel at the start of AED procedures.**

(3) When an AED is placed in a building, building owners shall ensure that tenants annually receive a brochure, approved as to content and style by the American Heart Association or American Red Cross, which describes the proper use of an AED, and also ensure that similar information is posted next to any installed AED.

(4) When an AED is placed in a building, no less than once a year, building owners shall notify their tenants as to the location of AED units in the building.

(5) When an AED is placed in a public or private K-12 school, the principal shall ensure that the school administrators and staff annually receive a brochure, approved as to content and style by the American Heart Association or the American Red Cross, that describes the proper use of an AED. The principal shall also ensure that similar information is posted next to every AED. The principal shall, at least annually, notify school employees as to the location of all AED units on the campus. The principal shall designate the trained employees who shall be available to respond to an emergency that may involve the



use of an AED during normal operating hours. As used in this paragraph, "normal operating hours" means during the hours of classroom instruction and any school-sponsored activity occurring on school grounds.

(c) **Any person or entity that supplies an AED shall do all of the following:**

(1) **Notify an agent of the local EMS agency of the existence, location, and type of AED acquired.**

(2) **Provide to the acquirer of the AED all information governing the use, installation, operation, training, and maintenance of the AED.**

(d) A violation of this provision is not subject to penalties pursuant to Section 1798.206.

(e) The protections specified in this section do not apply in the case of personal injury or wrongful death that results from the gross negligence or willful or wanton misconduct of the person who renders emergency care or treatment by the use of an AED.

(f) Nothing in this section or Section 1714.21 of the Civil Code may be construed to require a building owner or a building manager to acquire and have installed an AED in any building.

California Health & Safety Code § 104113

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. Section 104113 of the Health and Safety Code is amended to read:

104113. (a) **Every health studio, as defined in subdivision (h), shall acquire, maintain, and train personnel in the use of, an automatic external defibrillator pursuant to this section.**

(b) An employee of a health studio who renders emergency care or treatment is not liable for civil damages resulting from the use, attempted use, or nonuse of an automatic external defibrillator, except as provided in subdivision (f).

(c) When an employee uses, does not use, or attempts to use an automatic external defibrillator consistent with the requirements of this section to render emergency care or treatment, the members of the board of directors of the facility shall not be liable for civil damages resulting from an act or omission in rendering the emergency care or treatment, including the use or nonuse of an automatic external defibrillator, except as provided in subdivision (f).

(d) Except as provided in subdivisions (f) and (g), when an employee of a health studio renders emergency care or treatment using an automatic external defibrillator, the owners, managers, employees, or otherwise responsible authorities of the facility shall not be liable for civil damages resulting from an act or omission in the course of rendering that emergency care or treatment, provided that the facility fully complies with subdivision (e).

(e) Notwithstanding Section 1797.196, in order to ensure public safety, **a health studio shall do all of the following:**

(1) Comply with all regulations governing the placement of an automatic external defibrillator.

(2) Ensure all of the following:

(A) **The automatic external defibrillator is maintained and regularly tested according to the operation and maintenance guidelines set forth by the manufacturer, the American Heart Association, or the American Red Cross, and according to any applicable rules and regulations set forth by the governmental authority under the federal Food and Drug Administration and any other applicable state and federal authority.**

(B) The automatic external defibrillator is checked for readiness after each use and at least once every 30 days if the automatic external defibrillator has not been used in the preceding 30 days.

The health studio shall maintain records of these checks.

(C) A person who renders emergency care or treatment to a person in cardiac arrest by using an automatic external defibrillator activates the emergency medical services system as soon as possible, and reports the use of the automatic external defibrillator to the licensed physician and to the local EMS agency.

(D) For every automatic external defibrillator unit acquired, up to five units, no less than one employee per automatic external defibrillator unit shall complete a training course in cardiopulmonary resuscitation and automatic external defibrillator use that complies with the regulations adopted by the Emergency Medical Services Authority and the standards of the American Heart Association or the American Red Cross. After the first five automatic external defibrillator units are acquired, for each additional five automatic external defibrillator units acquired, a minimum of one employee shall be trained beginning with the first additional automatic external defibrillator unit acquired. Acquirers of automatic external defibrillator units shall have trained employees who should be available to respond to an emergency that may involve the use of an automatic external defibrillator unit during staffed operating hours. Acquirers of automatic external defibrillator units may need to train additional employees to ensure that a trained employee is available at all times.

(E) There is a written plan that exists that describes the procedures to be followed in the event of an emergency that may involve the use of an automatic external defibrillator, to ensure compliance with the requirements of this section. The written plan shall include, but not be limited to, immediate notification of 911 and trained office personnel at the start of automatic external defibrillator procedures.

(3) A health studio that allows its members access to its facility during times when it does not have an employee on the premises shall do all of the following:

(A) Require that all employees who work on the health studio's premises complete a training course, within 30 days of beginning employment, in cardiopulmonary resuscitation and automated external defibrillator use, that complies with the regulations adopted by the Emergency Medical Services Authority, and the Standards of the American Heart Association or the American Red Cross.

(B) Ensure that a trained employee is on the health studio's premises for no fewer than 50 hours per week.

(C) Inform a member, at the time the member contracts for the use of the health studio, that a trained employee will not be on the health studio's premises at all times.

(D) (i) On or before January 1, 2012, and before January 1 of each of the following three years, the health studio shall provide a report to the Assembly and Senate Judiciary Committees of the Legislature that contains the following:

(I) The average number of hours per week that the health studio is staffed.

(II) The average number of hours per week that the health studio was staffed prior to the adoption of this section.

(III) The total number of reported cardiac incidents that have occurred during unstaffed hours, and whether any of these incidents resulted in death.

(ii) The franchisor for a chain of franchised health studios shall collect and report the information pursuant to this subparagraph on behalf of its franchised health studios operated in this state.

(E) Deny access to the health studio when an employee is not present if the health studio operates in a space that is larger than 6,000 square feet.

(f) Subdivisions (b), (c), and (d) do not apply in the case of personal injury or wrongful death that results from gross negligence or willful or wanton misconduct on the part of the person who uses, attempts to use, or maliciously fails to use an automatic external defibrillator to render emergency care or treatment.

(g) A health studio that allows its members access to its facilities during operating hours when employees trained in the use of automatic external defibrillators are not on the facility premises, waives the provisions of subdivision (d) and the affirmative defense of primary assumption of the risk, whether express or implied, as to a claim arising out of the absence of trained staff.

(h) For purposes of this section, "health studio" means a facility permitting the use of its facilities and equipment or access to its facilities and equipment, to individuals or groups for physical exercise, body building, reducing, figure development, fitness training, or any other similar purpose, on a membership basis.

"Health studio" does not include a hotel or similar business that offers fitness facilities to its registered guests for a fee or as part of the hotel charges.

California Civil Code § 1538.55

(a) The licensee of an Adult Residential Facility for Persons with Special Health Care Needs (ARFPSHN), licensed pursuant to Article 9 (commencing with Section 1567.50), shall report to the department's Community Care Licensing Division, within the department's next working day and to the regional center with whom the ARFPSHN contracts, and the State Department of Developmental Services, within 24 hours upon the occurrence of any of the following events:

- (1) The death of any client from any cause.
- (2) The use of an automated external defibrillator.
- (3) Any injury to any client that requires medical treatment.
- (4) Any unusual incident that threatens the physical or emotional health or safety of any client.
- (5) Any suspected physical or psychological abuse of any client.
- (6) Epidemic outbreaks.
- (7) Poisonings.
- (8) Catastrophes.
- (9) Fires or explosions that occur in or on the premises.

(b) The licensee additionally shall submit a written report to the department's Community Care Licensing Division, the regional center with whom the ARFPSHN contracts, and the State Department of Developmental Services within seven days following any event set forth in subdivision (a), and shall include the following:

- (1) Client's name, age, sex, and date of admission.
- (2) The date and nature of event.
- (3) The attending physician's name, findings, and treatment, if any.
- (4) The disposition of the case.

(c) The department's Community Care Licensing Division shall notify the State Department of Developmental Services upon its findings of any deficiencies or of possible actions to exclude, pursuant to Section 1558, any individual from an ARFPSHN.

California Code of Regulations Title 22, §§ 100031-100043

ARTICLE 1. DEFINITIONS

100031. AED Service Provider.

"AED Service Provider" means any agency, business, organization or individual who purchases an AED for use in a medical emergency involving an unconscious, person who has no signs of circulation. This definition does not apply to individuals who have been prescribed an AED by a physician for use on a specifically identified individual.

100032. Authorized Individual.

"Authorized individual" means any person, not otherwise licensed or certified to use the automated external defibrillator, who has met the training standards of this chapter, and who has been issued a prescription for use of an automated external defibrillator on a patient not specifically identified at the time the physician's prescription is given.

100033. Automated External Defibrillator.

"Automated external defibrillator" or "AED" means an external defibrillator that after user activation is capable of cardiac rhythm analysis and will charge and deliver a shock, either automatically or by user interaction, after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia.

100034. Cardiopulmonary Resuscitation.

"Cardiopulmonary resuscitation" or "CPR" means a basic emergency procedure for life support, consisting of artificial respiration, manual external cardiac massage, and maneuvers for relief of foreign body airway obstruction.

100035. Internal Emergency Response System.

"Internal Emergency Response System" means a plan of action which utilizes responders within a facility to activate the "9-1-1" emergency system, and which provides for the access, coordination, and management of immediate medical care to seriously ill or injured individuals.

100036. Prescribing Physician.

"Prescribing physician" means a physician and surgeon, licensed in California, who issues a written order for the use of the automated external defibrillator to authorized individual(s).

ARTICLE 2. GENERAL TRAINING PROVISIONS

100037. Application and Scope.

(a) Any physician and surgeon licensed in California may authorize an individual to apply and operate an AED on an unconscious person who has no signs of circulation only if that authorized individual has been successfully trained according to the standards prescribed by this chapter.

(b) The training standards prescribed by this chapter shall not apply to licensed, certified or other

prehospital emergency medical care personnel as defined by section 1797.189 of the Health and Safety Code.

ARTICLE 3. AED TRAINING PROGRAM REQUIREMENTS

100038. Required Hours and Topics.

(a) The AED training component shall comply with the American Heart Association or American Red Cross standards. The course shall consist of not less than four hours, which shall include the following topics and skills:

- (1) basic CPR skills
 - (2) proper use, maintenance and periodic inspection of the AED;
 - (3) the importance of:
 - (A) CPR,
 - (B) defibrillation,
 - (C) advanced life support,
 - (D) adequate airway care, and
 - (E) internal emergency response system, if applicable;
 - (4) overview of the local EMS system, including 9-1-1 access, and interaction with EMS personnel;
 - (5) assessment of an unconscious patient, to include evaluation of airway, breathing and circulation, to determine if cardiac arrest has occurred and the appropriateness of applying and activating an AED;
 - (6) information relating to defibrillator safety precautions to enable the individual to administer shock without jeopardizing the safety of the patient or the authorized individual or other nearby persons to include, but not be limited to;
 - (A) age and weight restrictions for use of the AED,
 - (B) presence of water or liquid on or around the victim,
 - (C) presence of transdermal medications, and
 - (D) implantable pacemakers or automatic implantable cardioverter- defibrillators;
 - (7) recognition that an electrical shock has been delivered to the patient and that the defibrillator is no longer charged;
 - (8) rapid, accurate assessment of the patient's post-shock status to determine if further activation of the AED is necessary; and,
 - (9) authorized individual's responsibility for continuation of care, such as the repeated shocks if necessary, and/or accompaniment to the hospital, if indicated, or until the arrival of more medically qualified personnel.
- (b) The required hours for an AED training program can be reduced by no more than two hours for students who can show they have been certified in a basic CPR course in the past year and demonstrate to a qualified CPR instructor that they are proficient in the current techniques of CPR.

100039. Medical Director Requirements.

Any AED training course for non-licensed or non-certified personnel shall have a physician medical director who:

- (a) Meets the qualifications of a prescribing physician.
- (b) Shall approve a process to ensure instructors are properly qualified to the AED instructor standards established by the American Heart Association or the American Red Cross and ensure that instructors are trained to the course content.
- (c) Shall ensure that all courses meet the requirements of this chapter.
- (d) May also serve as the "prescribing physician."

100040. Testing.

In order for an individual to be authorized to use the AED, the individual shall pass a written and skills

examination, which tests the ability to assess and manage the specified conditions prescribed in section 100038.

100041. Written Validation.

The prescribing physician shall issue to the authorized individual a written validation or other documented proof of the authorized individual's ability to use an AED. The requirements for a "Written Validation" and "Prescription for Use" can both be satisfied by the issuance of a written certification card from an AED training program. The prescribing physician's signature shall be on file with the AED training program authorizing the issuance of the written certification card upon successful completion of the required training.

ARTICLE 4. OPERATIONAL AED SERVICE PROVIDER/VENDOR REQUIREMENTS

100042. Operational Requirements.

(a) An AED Service Provider shall ensure their internal AED programs include all of the following:

- (1) **Development of an Internal Emergency Response System** which complies with the regulations contained in this Chapter.
- (2) **Notification of the local EMS agency of the existence, location and type of AED at the time it is acquired.**
- (3) That all applicable local EMS policies and procedures are followed.
- (4) **That expected AED users complete a training course in CPR and AED use that complies with requirements of this chapter and the standards of the American Heart Association or the American Red Cross.**
- (5) **That the defibrillator is maintained and regularly tested according to the operation and maintenance guidelines set forth by the manufacturer**, and according to any applicable rules and regulations set forth by the governmental authority under the federal Food and Drug Administration and any other applicable state and federal authority.
- (6) **That the defibrillator is checked for readiness after each use and at least once every 30 days if the AED has not been used in the previous 30 days. Records of these periodic checks shall be maintained.**
- (7) That a mechanism exists to ensure that any person, either an employee or agent of the AED service provider, or member of the general public who renders emergency care or treatment on a person in cardiac arrest by using the service provider's AED activates the emergency medical services system as soon as possible, and reports any use of the AED to the local EMS agency.
- (8) That there is involvement of a California licensed physician and surgeon in developing an Internal Emergency Response System and to ensure compliance with these regulations and requirements for training, notification and maintenance.
- (9) That a mechanism exist that will assure the continued competency of the authorized individuals in the AED Service Provider's employ to include periodic training and skills proficiency demonstrations.

100043. AED Vendor Requirements

Any AED vendor who sells an AED to an AED Service Provider shall notify the AED Service Provider, at the time of purchase, both orally and in writing of the AED Service Provider's responsibility to comply with the regulations contained in the Chapter.