

## Public Law 25-113

### MINA'BENTE SINGKO NA LIHESLATURAN GUÅHAN 1999 (FIRST) Regular Session

#### Bill No. 220 (COR)

As amended on the Floor.

Introduced by:

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#### AN ACT TO ADD CHAPTER 96 TO DIVISION 4, PART 2 OF TITLE 10 OF THE GUAM CODE ANNOTATED, RELATIVE TO PROVIDING FOR PUBLIC ACCESS TO AUTOMATED EXTERNAL DEFIBRILLATORS.

#### BE IT ENACTED BY THE PEOPLE OF GUAM:

**Section 1.** Chapter 96 is hereby *added* to Division 4, Part 2 of Title 10 of the Guam Code Annotated to read as follows:

#### “CHAPTER 96.

#### THE PUBLIC ACCESS TO AUTOMATED EXTERNAL DEFIBRILLATION ACT OF 2000.

**Section 96101. Short Title.** This Act may be cited as ‘*The Public Access to Automated External Defibrillation Act of 2000.*’

**Section 96102. Legislative Intent.** *I Liheslaturan Guåhan* finds that early defibrillation can sustain the life of, and temporarily stabilize, a person in cardiac arrest, and that early defibrillation operates as an extension of a physician in sustaining the life of and stabilizing a person in cardiac arrest, thus helping to preserve the Guam family.

It is the intent of *I Liheslaturan Guåhan* that the public have access to automated external defibrillators for the purpose of saving the lives of persons in cardiac arrest.

**Section 96103. Definitions.** For purposes of this Act:

- (a) ‘*Automated external defibrillator*’ (‘AED’) means a device which:
- (1) is used to administer an electric shock through the chest wall to the heart;
  - (2) has built-in computers within the device to assess the patient’s heart rhythm, judge whether defibrillation is needed and then administers the shock;

- (3) has audible and/or visual prompts to guide the user through the process;
- (4) has received approval of its pre-market modification, filed pursuant to 21 U.S.C. §360(k), from the United States Food and Drug Administration;
- (5) is capable of recognizing the presence or absence of ventricular fibrillation and rapid ventricular tachycardia, and is capable of determining, without intervention by an operator, whether defibrillation should be performed;
- (6) upon determining that defibrillation should be performed, either automatically charges and delivers an electrical impulse to an individual's heart, or charges and delivers an electrical impulse at the command of the operator; *and*
- (7) in the case of a defibrillator that may be operated in either an automatic or a manual mode, is set to operate in the automatic mode.

(b) '*Cardiac arrest*' means a condition, often sudden, that is due to abnormal heart rhythms called arrhythmias. It is generally the result of some underlying form of heart disease.

(c) '*CPR*' means a combination of rescue breathing and chest compressions/external cardiac massage used to sustain a person's life until advanced assistance arrives.

(d) '*Defibrillation*' means administering an electrical impulse to an individual's heart in order to stop ventricular fibrillation or rapid ventricular tachycardia.

(e) '*Emergency medical services system*' means the transportation and medical care provided the critically ill or injured *prior to* arrival at a medical facility by a certified emergency medical technician, or other health care provider, and continuation of the initial emergency care within a medical facility, *subject to* the approval of the medical staff and governing board of that facility.

(f) '*Medical authority*' means a health services organization or medical organization, with physician medical direction.

(g) '*Physician*' means a Guam-licensed Doctor of Medicine ('M.D.') or Doctor of Osteopathy ('D.O.').

(h) '*Person*' means any individual, partnership, association, corporation or any organized group of persons whether incorporated or not.

(i) '*Ventricular fibrillation*' means the most common arrhythmia that causes cardiac arrest. It is a condition in which the heart's electrical impulses suddenly become chaotic, often without warning, causing the heart's pumping action to stop abruptly.

**Section 96104. Access by Public to Defibrillators.** (a) In order to ensure the public health and safety, a person or entity who acquires an AED shall ensure that:

- (1) expected AED users complete a knowledge and skills course in CPR and AED use based upon current American Heart Association scientific guidelines, standards and recommendations for providing CPR, and the use of AEDs as published in the American Heart Association, the American Red Cross, or equivalent course materials;
- (2) the defibrillator is maintained and tested according to the manufacturer's operational guidelines and instructions;
- (3) there is the involvement of a physician or medical authority to the site's AED program to ensure compliance with requirements for training, notification and maintenance;
- (4) 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 clinical use of the AED to the physician or medical authority, as well as to emergency medical services providers.

(b) Any person or entity who acquires an AED shall notify an agent of emergency communications, 911, or vehicle dispatch center of the existence, location and type of AED.

**Section 96105. AED Use and Tort Immunity.** (a) Any person or entity who in good faith and without compensation renders emergency care or treatment by the use of an automated external defibrillator is immune from civil liability for any personal injury as a result of the care or treatment, or as a result of any act or failure to act in providing or arranging further medical treatment, if the person acts as an ordinary, reasonably prudent person would have acted under the same or similar circumstances.

(b) The immunity from civil liability for any personal injury under Subsection (a) of this Section includes: (i) the physician or medical authority who is involved with AED site placement, (ii) the person or entity who provides the CPR and AED training, and (iii) the person or entity responsible for the site where the AED is located.

(c) The immunity from civil liability under Subsection (a) of this Section does *not* apply if the personal injury results from the gross negligence, or willful or wanton misconduct of the person rendering the emergency care.”