

**Public Policy Rationale**

The SCA Heroes Act was crafted by Readiness Systems for use by legislators nationwide

AED laws have a profound impact on the number of AEDs placed in public locations and the willingness of volunteer bystanders to help those having cardiac arrest. Today's U.S. AED laws lessen the chances people having SCA will survive. Why? Because the laws burden AED programs with meaningless tasks that serve no purpose other than to increase liability risks, fail to provide comprehensive legal protections to the organizations and people involved in AED programs and direct the placement of AEDs at too few locations. As a result, many organizations choose not to place AEDs and many individuals are reluctant to perform CPR or use AEDs. AED laws can be fixed.

Good laws are based on clear and achievable public policy goals, which can't be said of today's AED laws. Here are the problems AED laws should be designed to address:

- Sudden cardiac arrest is perhaps the biggest public health challenge in the U.S. – affecting over 1,000 people a day – and it is impossible to know who, where or when SCA will strike.
- Most organizations are unwilling to buy and place AEDs because they realistically fear being sued if something goes wrong (or even if it doesn't).
- Because defibrillation must happen quickly, AEDs can cover only a small area – no more than the space of 5 football fields, often less – so lots of AEDs are needed to ensure one is nearby a large percentage of people experiencing SCA.
- There is currently an AED shortage meaning it is unlikely these life-saving devices will be available close to people having SCA.
- Most people lack “formal” CPR/AED training. As a result, they remain fearful of being sued and reluctant or unwilling to try CPR or retrieve or use an AED. (More “formal” training is not the answer.)

How can modernized AED laws help solve these problems? By achieving the following public policy objectives:

- Remove all AED law imposed administrative and operational burdens placed on AED programs
- Provide strong legal protections to all organizations and people involved in AED programs
- Require AEDs in lots of places

The following Sudden Cardiac Arrest Heroes Act (Model AED Law) is crafted to be easy to read and understand and to accomplish the goals described above.

**Sudden Cardiac Arrest Heroes Act  
Model AED Law Designed to Save Lives**

An act to repeal [insert statutory references] and enact new provisions relating to sudden cardiac arrest (SCA) emergencies, the performance of cardiopulmonary resuscitation (CPR) and the placement and use of automated external defibrillators (AEDs).

Section 1. Repeal and replacement of existing AED laws:

[Insert statutory references] are hereby repealed and replaced with the following:

Section 2: Definitions:

(a) "Automated external defibrillator" or "AED" means an automated external defibrillator approved for sale by the U.S. Food and Drug Administration.

(b) "Cardiopulmonary resuscitation" or "CPR" means artificial ventilations or external chest compressions applied to a person perceived to be unresponsive and not breathing.

(c) "Person" means an individual, corporation, partnership, limited liability company, association, trust, unincorporated organization, or other legal entity or organization, or a government or governmental body.

(d) "Public place" means an enclosed indoor or outdoor area capable of holding one hundred (100) or more people and to which the public is invited, or in which the public is permitted, but does not include a private residence.

(e) "Sudden cardiac arrest" or "SCA" means the sudden, abrupt loss of heart function that causes a person to become unresponsive and stop breathing normally.

Section 3. Good Samaritan legal protections:

(a) Absent gross negligence or willful or wanton misconduct, no person is subject to civil liability for damages arising out of any acts or omissions relating to CPR or the purchase, placement, availability or use of an AED.

(b) The immunity described in paragraph (a) of this section applies regardless of where an AED is retrieved from or used.

Section 4: Automated external defibrillators required; persons authorized to perform CPR or retrieve and use automated external defibrillators:

(a) A person who owns, operates or manages a public place shall deploy functional AEDs in sufficient quantities to ensure reasonable availability for use during perceived sudden cardiac arrest emergencies.

(b) Any person is permitted to perform CPR or retrieve or use an AED.

[Note: Parallel administrative actions may also be necessary to repeal existing regulations]

*Developed by Readiness Systems  
The nation's leading AED program readiness and compliance expert*