

SENATE BILL NO. 95

INTRODUCED BY F. SMITH

BY REQUEST OF THE DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES

A BILL FOR AN ACT ENTITLED: "AN ACT REMOVING THE REQUIREMENT FOR A PHYSICIAN DIRECTOR OF AN AUTOMATED EXTERNAL DEFIBRILLATOR PROGRAM; ~~AND~~ AMENDING SECTIONS 50-6-502, 50-6-503, AND 50-6-505, MCA; AND PROVIDING AN EFFECTIVE DATE."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Section 50-6-502, MCA, is amended to read:

"50-6-502. AED program -- requirements for AED use. In order for an entity to use or allow the use of an automated external defibrillator, the entity shall:

(1) establish a program for the use of an AED that includes a written plan that complies with this part and rules adopted by the department pursuant to 50-6-503. The plan must specify:

(a) where the AED will be placed;

(b) the individuals who are authorized to operate the AED;

(c) how AED use will be coordinated with an emergency medical service providing services in the area where the AED is located;

(d) the medical ~~supervision~~ oversight that will be provided;

(e) the maintenance that will be performed on the AED;

(f) records that will be kept by the program;

(g) reports that will be made of AED use; and

~~(h) the name, location, and telephone number of a physician, or other individual designated by the physician, designated to provide medical supervision of the AED program; and~~

~~(i)~~(h) other matters as specified by the department;

(2) adhere to the written plan required by subsection (1);

(3) ensure that before using the AED, an individual authorized to operate the AED receives appropriate training approved by the department in cardiopulmonary resuscitation and the proper use of an AED;

(4) maintain, test, and operate the AED according to the manufacturer's guidelines and maintain written records of all maintenance and testing performed on the AED;

~~(5)~~ ensure that the physician or other individual designated by the physician to supervise the AED program supervises the AED program to ensure compliance with the written plan, this part, and rules adopted by the department pursuant to 50-6-503 and reviews each case in which the AED is used;

~~(6)~~(5) each time an AED is used for an individual in cardiac arrest, require that an emergency medical service is summoned to provide assistance as soon as possible and that the AED use is reported to the supervising physician or the person designated by the physician and to the department as required by the written plan;

~~(7)~~(6) before allowing any use of an AED, provide the following to all licensed emergency medical services and any public safety answering point or emergency dispatch center providing services to the area where the AED is located:

- (a) a copy of the plan prepared pursuant to this section; and
 - (b) written notice, in a format prescribed by department rules, stating:
 - (i) that an AED program is established by the entity;
 - (ii) where the AED is located; and
 - (iii) how the use of the AED is to be coordinated with the local emergency medical service system; and
- ~~(8)~~(7) comply with this part and rules adopted by the department pursuant to 50-6-503."

Section 2. Section 50-6-503, MCA, is amended to read:

"50-6-503. Rulemaking. (1) The department shall adopt rules specifying the following:

- (a) the contents of the written notice required by 50-6-502(7);
 - (b) reporting requirements for each use of an AED;
 - (c) the contents of a plan prepared in accordance with 50-6-502 and requirements applicable to the subject matter of the plan;
 - (d) training requirements in cardiopulmonary resuscitation and AED use for any individual authorized by an AED program plan to use an AED;
 - (e) ~~requirements~~ guidelines for medical ~~supervision~~ oversight of an AED program;
 - (f) minimum requirements for a medical protocol for use of an AED;
 - (g) performance requirements for an AED in order for the AED to be used in an AED program; and
 - (h) a list of the AED training programs approved by the department.
- (2) The department may not adopt rules for any purpose other than those in subsection (1)."

Section 3. Section 50-6-505, MCA, is amended to read:

"50-6-505. Liability limitations. (1) An individual who provides emergency care or treatment by using an AED in compliance with this part and rules adopted by the department pursuant to 50-6-503 and an individual providing cardiopulmonary resuscitation to an individual upon whom an AED is or may be used are immune from civil liability for a personal injury that results from that care or treatment or from civil liability as a result of any act or failure to act in providing or arranging further medical treatment for the individual upon whom the AED was used unless the individual using the AED or the person providing cardiopulmonary resuscitation, as applicable, acts with gross negligence or with willful or with wanton disregard for the care of the person upon whom the AED is or may be used.

(2) The following individuals or entities are immune from civil liability for any personal injury that results from an act or omission that does not amount to willful or wanton misconduct or gross negligence if applicable provisions of this part and rules adopted by the department pursuant to 50-6-503 have been met by the individual or entity:

- (a) ~~the physician supervising a person providing medical oversight of the AED program or the person designated by a physician to supervise the program, either of whom are,~~ as designated in the plan prepared pursuant to 50-6-502;
- (b) the entity responsible for the AED program, as designated in the plan prepared pursuant to 50-6-502;
- (c) an individual providing training to others on the use of an AED."

NEW SECTION. SECTION 4. EFFECTIVE DATE. [THIS ACT] IS EFFECTIVE JULY 1, 2007.

- END -

