

F. All air ambulance services shall carry advanced life support equipment and medical supplies dependent on the level of licensure of personnel (paramedic level) and as determined by the ambulance service/provider medical director and governing body who have developed policies and procedures to maintain, update, or delete certain advanced life support equipment and medical supplies as medically indicated or contraindicated for their service area and have documentation available to support the determination.

G. All air ambulances shall be staffed to the advanced life support (paramedic) level. The paramedic(s) and each member of the flight team are each responsible to ensure that equipment and supplies are readily available and operable, as appropriate, for each flight service run to meet the needs of the patients served.

H. All air ambulances shall have a thermometer mounted inside the cabin. Cabin temperatures must be in the range of 50-95 degrees Fahrenheit.

1. Mitigation measures must be documented for when the cabin temperatures are outside this range and the outcomes of these mitigation measures must be documented when the temperature falls outside this range.

I. If a service provides inter-hospital air transport, air transport from hospital to another facility, air transport from hospital to home, or similar air transport, the service must certify that a medical director is employed to advise the service on the appropriate staffing, equipment, and supplies to be used for the transport of patients aboard an air ambulance.

J. Provisions in this section shall not be construed to prohibit, limit, or regulate random mercy flights made by a person or corporation in privately or publically owned aircraft who may on occasion transport individuals who may need medical attention during transport, or human organs intended for transplantation including, but not limited to the heart, lungs, kidneys, liver and other soft tissue and bones, on either a not-for-profit basis or gratuitously.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and R.S. 40:1135.1 and R.S. 40:1135.2.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 35:482 (March 2009), amended by the Department of Health, Office of Public Health, Bureau of Emergency Medical Services, LR 49:898 (May 2023).

**§6073. Emergency Aircraft—Rotary-Winged
(Reserved)**

§6075. Emergency Aircraft—Fixed (Reserved)

Chapter 61. Automated External Defibrillators

§6101. Purpose and Definitions

A. Purpose. These rules establish standards for the maintenance of automated external defibrillators for the owner of or the entity responsible for a physical fitness

facility each postsecondary education institution, any postsecondary education institution that sponsors an intercollegiate athletic event, each elementary, middle and high school, and any elementary, middle, or high school that sponsors an interscholastic athletic event that possesses an automated external defibrillator.

B. Definitions. The Louisiana Department of Health, Office of Public Health (LDH-OPH), Bureau of Emergency Medical Services (BEMS), in the exercise of its regulatory authority, defines the following words and terms applicable to this Chapter.

Athletic Department—the division or department of an institution of higher education, including colleges, universities, or community colleges, which schedules and competes in intercollegiate athletics.

Automated External Defibrillator (AED) —a medical device heart monitor and defibrillator that:

a. has received approval of its pre-market notification filed pursuant to 21 U.S.C. 360(k) from the United States Food and Drug Administration;

b. is capable of recognizing the presence or absence of ventricular fibrillation or rapid ventricular tachycardia and is capable of determining whether defibrillation should be performed;

c. upon determining that defibrillation should be performed, the AED automatically charges and requests delivery of an electrical impulse to an individual's heart;

d. is capable of delivering the electrical impulse to an individual's heart; and

e. pediatric AED capabilities are required.

Bureau—unless otherwise specified, the Bureau of Emergency medical Services within the Office of Public Health of the Louisiana Department of Health.

Bureau of Emergency Medical Services (Bureau of EMS, BEMS)—the EMS regulatory agency that licenses EMS practitioners; ambulance services/providers and enforces compliance of legislation that regulates telecommunicators and possessors of AEDs.

Cardiac Emergency Response Plan—a document written by the principal, president, or chancellor, or chief executive of a postsecondary education institution, elementary, middle, or high school, in collaboration with local emergency responders, that establishes the specific steps to reduce death from cardiac arrest at an intercollegiate or interscholastic athletic event.

Cardiac Emergency Response Team—a group of a minimum of two, but preferably four, individuals credentialed in pediatric, child, and adult CPR and use of an AED.

Cardiopulmonary Resuscitation (CPR)—the process of providing oxygen while circulating blood to a patient in cardiopulmonary arrest usually, but not exclusively, in a

combination of mouth-to-mouth breaths with external chest compressions.

Certification—adult and pediatric expected CPR providers and expected AED users who have been certified after successful completion of an adult and pediatric CPR and AED course recognized by a nationally recognized organization or association such as the American Heart Association (AHA), the American Red Cross (ARC), the National Safety Council and the Emergency Medical Physicians of America, or the equivalent cardiopulmonary resuscitation certification that has been approved by the Louisiana Department of Health.

Credentialed—adult and pediatric expected CPR providers and expected AED users who have completed an adult and pediatric CPR and AED course recognized by a nationally recognized organization or association such as the American Heart Association (AHA), the American Red Cross (ARC), the National Safety Council and the Health and Safety Institute (HSI), or the equivalent cardiopulmonary resuscitation credential that has been approved by the Louisiana Department of Health.

Emergency Care—the occurrence of a sudden, serious and unexpected sickness or injury that would lead a reasonable person, possessing an average knowledge of medicine and health, to believe that the sick or injured person requires urgent or unscheduled medical care.

Expected AED Users—any person designated by the possessor to render emergency care.

High School—an education facility that typically comprises of grades nine through twelve.

Information Management System—an electronic system used to collect, analyze, and process data that is entered and/or uploaded into the system

Intercollegiate Athletic Events—athletic or sporting competitions between or among postsecondary education institutions, hosted or sponsored by one or more participating institutions.

Interscholastic Athletic Event—athletic or sporting competitions or activities between or among different elementary, middle, or high schools, hosted or sponsored by one or more participating schools.

Middle School—an education facility that typically includes grades seven and eight but may also include grades six and nine; also referred to as Junior High School.

Physical Fitness Facility—a facility for profit or nonprofit with a membership of over 50 persons that offers physical fitness services. This includes but is not limited to clubs, studios, health spas, weight control centers, clinics, figure salons, tanning centers, athletic or sport clubs, and YWCA and YMCA organizations.

Physical Fitness Services—services for the development of physical fitness through exercise or weight control.

Physical Fitness Center—any person or organization which, for profit or nonprofit, offers physical fitness services, whether at multiple outlets or single outlet. Any subsidiary of a center offering such services shall be deemed part of said center.

Possessor—any person, service, business, industry, physical fitness facility, entity, postsecondary education institution participating in intercollegiate sport, or security vehicle possessing an AED.

Postsecondary Education Institution—an institution that offers education following successful completion of high school or equivalent (e.g. GED); such institutions provide a higher level of education, and include universities, colleges, and trade, technical, and professional schools.

Premises—the physical facility, its contents, and the contiguous land or property under the control of a person or entity, and may mean a room, shop, building, field, or other definite area.

Sudden Cardiac Arrest—a medical emergency where a person is unconscious, not breathing and has no pulse.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:258(B) and R.S. 40:1137.3(F).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Public Health, Bureau of Emergency Medical Services, LR 38:2928 (November 2012), amended by the Department of Health, Office of Public Health, Bureau of Emergency Medical Services, LR 47:742 (June 2021), LR 50:688 (May 2024).

§6103. General Provisions

A. General requirements of a Possessor

1. A possessor's responsibility and requirements are as follows.

a. The AED must be maintained and tested according to the manufacturer's guidelines; in accordance with state and federal rules and policies, including review of product warranty expirations for AED machine, pads and batteries.

b. Expected AED users must receive appropriate training in CPR and in the use of an AED by the American Heart Association, American Red Cross, the Health and Safety Institute, or the equivalent cardiopulmonary resuscitation credential that has been approved by LDH.

c. The local provider of emergency medical services (EMS) (such as a 911 service, local ambulance service, or fire department) must be activated by the possessor as soon as possible when an individual renders emergency care to an individual in cardiac arrest by using CPR or an AED. It is the responsibility of the individual rendering the emergency care to activate the local EMS provider.

d. The possessor must comply with all applicable requirements of R.S. 40:1137.3.

2. Any manufacturer, wholesale supplier, or retailer of an AED must notify purchasers of AED's intended for use in the state of Louisiana of the requirements of R.S. 40:1137.3.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1137.3(F).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Public Health, Bureau of Emergency Medical Services, LR 38:2929 (November 2012), amended by the Department of Health, Office of Public Health, Bureau of Emergency Medical Services, LR 47:742 (June 2021), LR 50:689 (May 2024).

§6105. Regulations and Reports

A. General Plan and Usage Review

1. All entities that are required by La. R.S. 40:1137.3 or this Chapter to possess an AED must have a written CPR/AED guideline or plan for use during a sudden cardiac arrest (SCA).

B. Additional Requirements for a Physical Fitness Facility or Physical Fitness Center

1. After every event in which an AED is used, it is the responsibility of the physical fitness facility or physical fitness center to immediately replenish the AED supplies that were used and prepare the device to be ready for the next event.

2. The owner of or the entity responsible for either a physical fitness facility or a physical fitness center, must keep an AED on its premises, and must conduct routine testing and maintenance as prescribed by the manufacturer.

C. Additional Requirements for Postsecondary Education Institutions, Effective upon the Beginning of the 2024-2025 School Year

1. A Cardiac Emergency Response plan must be written and identify the members of the Cardiac Emergency Response Team. At a minimum, the plan must include:

- a. establishing a cardiac emergency response team;
- b. activating the team in response to a sudden cardiac arrest;
- c. implementing AED placement and routine maintenance within the institution;
- d. maintaining ongoing staff training in CPR and AED use;
- e. practicing using drills;
- f. integrating local EMS with the plan; and
- g. annually reviewing and evaluating the plan.

2. After every event in which an AED is used, it is the responsibility of the postsecondary education institution to immediately replenish the AED supplies that were used and prepare the device to be ready for the next event.

3. Each postsecondary education institution shall register the institution in the Bureau of EMS Information Management System.

a. This registration shall include, but is not limited to, the following information, and is subject to the following requirements:

- i. name and title of the individual(s) responsible for the maintenance and testing of the AED(s);
- ii. name and title of the individual(s) trained to utilize the AED(s);
- iii. location of all AED(s);
- iv. serial number/identification number of all AED(s);
- v. schedules and timeframes for required maintenance;
- vi. name of agency issuing training credential, name of individuals completing the credentialing training, date of recommended renewal of training;
- vii. name of the individual providing medical oversight;
- viii. initial registration shall occur within 60 days of the effective date of this Subsection, and any change in or addition to required information shall be uploaded to the Bureau of EMS Information Management System within 30 days from the date of occurrence;

ix. each postsecondary education institution shall have an AED on its premises in an easily accessible location, which location shall be within the athletic department if it has such a department; and

x. any postsecondary education institution that sponsors or hosts an intercollegiate athletic event shall have an AED and a trained AED user who is also trained in first-aid CPR at the event.

D. Additional Requirements for postsecondary education institutions effective until the beginning of the 2024-2025 school year.

1. Any institution of higher education that competes in intercollegiate athletics must have an AED on its premises in its athletic department, with posters approved by AHA/ARC on how to safely perform CPR and use the AED. The AED must be placed in open view within 2 feet of a telephone to readily enable a call to 911 from within the athletic department. It must also be placed in an area with easy access to coaches and athletic personnel where athletes are training and/or competing.

E. Additional Requirements for elementary, middle, and high schools, effective upon the beginning of the 2024-2025 school year.

1. A Cardiac Emergency Response plan must be written and identify the members of the Cardiac Emergency Response Team. At a minimum, the plan must include:

- a. establishing a cardiac emergency response team;
- b. activating the team in response to a sudden cardiac arrest;

c. implementing AED placement and routine maintenance within the institution;

d. maintaining ongoing staff training in CPR and AED use;

e. practicing using drills;

f. integrating local EMS with the plan; and

g. annually reviewing and evaluating the plan.

2. After every event in which an AED is used, it is the responsibility of the educational facility to immediately replenish the AED supplies that were used and prepared the device to be ready for the next event.

3. Each elementary, middle, and high school shall register the education facility in the Bureau of EMS Information Management System

a. This registration shall include, but is not limited to, the following information, and is subject to the following and requirements:

i. name and title of the individual(s) responsible for the maintenance and testing of the AED(s);

ii. name and title of the individual(s) who have completed the training to utilize the AED(s);

iii. location of all AED(s);

iv. serial number/identification number of all AED(s);

v. schedules and timeframes for required maintenance;

vi. name of agency issuing training credentials, name of individuals completing the credentialing training, date of recommended renewal of training;

vii. initial registration shall occur within 60 days of the effective date of this Subsection, and any change in or addition to required information shall be uploaded to the Bureau of EMS Information Management System within 30 days from the date of occurrence;

viii. each elementary, middle, and high school shall have an AED on its premises in an easily accessible location; and

ix. any elementary, middle, or high school that sponsors or hosts an interscholastic athletic event shall have an AED and a trained AED user who is also trained in first-aid CPR at the event.

F. Additional Requirements for Elementary, Middle, and High Schools, Effective until the Beginning of the 2024-2025 School Year

1. Each high school must have an AED on its premises, if funding is available, subject to appropriation.

G. Compliance and Enforcement

1. The BEMS shall inspect the premises in response to a complaint filed therewith that alleges a violation of R.S.

40:1137.3(D), R.S. 1137.3(E)(1)(a), or R.S. 40:1137.3(E)(2)(a) and specifies the name, address, and telephone number of the alleged violator. The BEMS may inspect facilities or premises at other times to ensure compliance therewith.

2. Violations of R.S. 40:1137.3(D), R.S. 40:1137.3(E)(1)(a), or R.S. 40:1137.3(E)(2)(a), may result in the assessment by BEMS of monetary penalties, on a per violation basis, as follows.

a. Voluntary Compliance Effort

i. The BEMS or its designee shall issue a written administrative warning without monetary penalty upon determining that an initial violation exists. The written notification of violation shall grant a 30-day grace period from the date the warning is received by the recipient.

b. Monetary penalties:

i. BEMS may impose monetary penalties in the amount of \$150 per violation per month upon determination that one or more violations continue to exist after the 30-day grace period has expired. A violation that exists for any portion of a month shall constitute an entire month;

ii. BEMS may impose monetary penalties in the amount of \$200 per violation per month upon determination that one or more violations continue to exist for more than six months following the expiration of the 30-day grace period. A violation that exists for any portion of a month shall constitute an entire month;

iii. if it determines that a violation has continued for more than six months following the expiration of the 30-day grace period, the BEMS or its designee may report said violation to the Louisiana attorney general's office or other governing authorities requesting issuance of further warning and/or the institution of judicial enforcement procedures; and

iv. the monetary civil penalties authorized by this Section shall be imposed by issuance to an alleged violator ("respondent") of a written notice of penalty imposition. Said notice shall include language advising the Respondent of the right to an administrative hearing concerning same, which right shall expire unless the respondent files, in the manner specified therein, a written request for an administrative hearing with BEMS within 20 calendar days of receipt of the notice. If such a written request is timely filed, then it shall be forwarded by BEMS to the Louisiana Division of Administrative Law.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1137.3(F).

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Office of Public Health, Bureau of Emergency Medical Services, LR 38:2930 (November 2012), amended by the Department of Health, Office of Public Health, Bureau of Emergency Medical Services, LR 47:743 (June 2021), LR 50:689 (May 2024).