

BY: Judicial Proceedings Committee

AMENDMENTS TO HOUSE BILL 1117

(Third Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 5, strike “, notwithstanding certain other provisions of law,”; in line 16, after “individual” insert “or facility”; and strike beginning with “providing” in line 16 down through “defibrillation” in line 17 and substitute “certain acts or omissions”.

On pages 1 and 2, strike in their entirety the lines beginning with line 19 on page 1 through line 11 on page 2, inclusive.

On page 2, in line 14, strike “13–517(j)(3)” and substitute “13–517”.

AMENDMENT NO. 2

On pages 2 through 4, strike in their entirety the lines beginning with line 19 on page 2 through line 29 on page 4, inclusive, and substitute:

“Article – Education

13–517.

(a) (1) In this section the following words have the meanings indicated.

(2) “Automated external defibrillator (AED)” means a medical heart monitor and defibrillator device that:

(i) Is cleared for market by the federal Food and Drug Administration;

(Over)

(ii) Recognizes the presence or absence of ventricular fibrillation or rapid ventricular tachycardia;

(iii) Determines, without intervention by an operator, whether defibrillation should be performed;

(iv) On determining that defibrillation should be performed, automatically charges; and

(v) 1. Requires operator intervention to deliver the electrical impulse; or

2. Automatically continues with delivery of electrical impulse.

(3) “Certificate” means a certificate issued by the EMS Board to a registered facility.

(4) “Facility” means an agency, association, corporation, firm, partnership, or other entity.

(5) “Jurisdictional emergency medical services operational program” means the institution, agency, corporation, or other entity that has been approved by the EMS Board to provide oversight of emergency medical services for each of the local government and State and federal emergency medical services programs.

(6) “Program” means the Public Access Automated External Defibrillator Program.

(7) “Regional administrator” means the individual employed by the Institute as regional administrator in each EMS region.

(8) “Regional council” means an EMS advisory body as created by the Code of Maryland Regulations 30.05.

(9) “Regional council AED committee” means a committee appointed by the regional council consisting of:

- (i) The regional medical director;
- (ii) The regional administrator; and
- (iii) Three or more individuals with knowledge of and expertise in AEDs.

(10) “Registered facility” means an organization, business association, agency, or other entity that meets the requirements of the EMS Board for registering with the Program.

(b) (1) There is a Public Access Automated External Defibrillator Program.

(2) The purpose of the Program is to coordinate an effective statewide public access defibrillation program.

(3) The Program shall be administered by the EMS Board.

(c) The EMS Board may:

- (1) Adopt regulations for the administration of the Program;
- (2) Issue and renew certificates to facilities that meet the requirements of this section;

(3) Deny, suspend, revoke, or refuse to renew the certificate of a registered facility for failure to meet the requirements of this section;

(4) Approve educational and training programs required under this section that:

(i) Are conducted by any private or public entity;

(ii) Include training in cardiopulmonary resuscitation and automated external defibrillation; and

(iii) May include courses from nationally recognized entities such as the American Heart Association, the American Red Cross, and the National Safety Council;

(5) Approve the protocol for the use of an AED; and

(6) Delegate to the Institute any portion of its authority under this section.

(d) (1) Each facility that desires to make automated external defibrillation available shall possess a valid certificate from the EMS Board.

(2) This subsection does not apply to:

(i) A jurisdictional emergency medical services operational program;

(ii) A licensed commercial ambulance service;

(iii) A health care facility as defined in § 19–114 of the Health – General Article; or

(iv) A place of business for health care practitioners who are licensed as dentists under Title 4 of the Health Occupations Article or as physicians under Title 14 of the Health Occupations Article and are authorized to use an AED in accordance with that license.

(e) To qualify for a certificate a facility shall:

(1) Comply with the written protocol approved by the EMS Board for the use of an AED which includes notification of the emergency medical services system through the use of the 911 universal emergency access number as soon as possible on the use of an AED;

(2) Have established automated external defibrillator maintenance, placement, operation, reporting, and quality improvement procedures as required by the EMS Board;

(3) Maintain each AED and all related equipment and supplies in accordance with the standards established by the device manufacturer and the federal Food and Drug Administration; and

(4) Ensure that each individual who is expected to operate an AED for the registered facility has successfully completed an educational training course and refresher training as required by the EMS Board.

(f) A registered facility shall report the use of an AED to the Institute for review by the regional council AED committee.

(g) A facility that desires to establish or renew a certificate shall:

(1) Submit an application on the form that the EMS Board requires;
and

(Over)

(2) Meet the requirements under this section.

(h) (1) The EMS Board shall issue a new or a renewed certificate to a facility that meets the requirements of this section.

(2) Each certificate shall include:

(i) The type of certificate;

(ii) The full name and address of the facility;

(iii) A unique identification number; and

(iv) The dates of issuance and expiration of the certificate.

(3) A certificate is valid for 3 years.

(i) The EMS Board may issue a cease and desist order or obtain injunctive relief if a facility makes automated external defibrillation available in violation of this section.

(j) (1) [In addition to any other immunities available under statutory or common law, a registered facility is not civilly liable for any act or omission in the provision of automated external defibrillation if the registered facility:

(i) Has satisfied the requirements for making automated external defibrillation available under this section; and

(ii) Possesses a valid certificate at the time of the act or omission.] THE FOLLOWING INDIVIDUALS AND FACILITIES ARE IMMUNE FROM CIVIL LIABILITY FOR DAMAGES RELATING TO THE USE, POSSESSION, OR

PURCHASE OF AN AED OR ARISING OUT OF ANY ACT OR OMISSION IN
PREPARING FOR OR RESPONDING TO A SUSPECTED SUDDEN CARDIAC ARREST
EMERGENCY:

(I) AN INDIVIDUAL OR FACILITY THAT ACQUIRES AN AED,
IF THE AED IS MAINTAINED AND TESTED IN ACCORDANCE WITH THE
STANDARDS ESTABLISHED BY THE MANUFACTURER OF THE AED;

(II) AN INDIVIDUAL OR FACILITY THAT OWNS, MANAGES, OR
IS OTHERWISE RESPONSIBLE FOR THE PREMISES ON WHICH AN AED IS
LOCATED, IF THE AED IS MAINTAINED AND TESTED IN ACCORDANCE WITH THE
STANDARDS ESTABLISHED BY THE MANUFACTURER OF THE AED;

(III) AN INDIVIDUAL WHO RETRIEVES AN AED IN RESPONSE
TO A PERCEIVED SUDDEN CARDIAC ARREST EMERGENCY AT A FACILITY; OR

(IV) AN INDIVIDUAL WHO USES, ATTEMPTS TO USE, OR FAILS
TO USE AN AED IN RESPONSE TO A PERCEIVED SUDDEN CARDIAC ARREST
EMERGENCY AT A FACILITY.

(2) In addition to any other immunities available under statutory or
common law, a member of the regional council AED committee is not civilly liable for
any act or omission in the provision of automated external defibrillation.

(3) In addition to any other immunities available under statutory or
common law, an individual is not civilly liable for any act or omission if:

(i) The individual is acting in good faith while rendering
automated external defibrillation to a person who is a victim or reasonably believed by
the individual to be a victim of a sudden cardiac arrest; AND

(Over)

(ii) [The assistance or aid is provided in a reasonably prudent manner; and

(iii)] The automated external defibrillation is provided without fee or other compensation.

(4) The immunities in this subsection are not available if the conduct of the [registered] facility or an individual amounts to gross negligence, willful or wanton misconduct, or intentionally tortious conduct.

(5) This subsection does not affect, and may not be construed as affecting, any immunities from civil or criminal liability or defenses established by any other provision of the Code or by common law to which a [registered] facility, a member of the regional council AED committee, or an individual may be entitled.

(k) (1) A registered facility aggrieved by a decision of the Institute acting under the delegated authority of the EMS Board under this section shall be afforded an opportunity for a hearing before the EMS Board.

(2) A registered facility aggrieved by a decision of the EMS Board under this section shall be afforded an opportunity for a hearing in accordance with Title 10, Subtitle 2 of the State Government Article.”.