

## *1<sup>st</sup> Quarter 2010 Legislative Review*

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### ***AED Regulations***

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#### **Illinois**

Illinois expanded the range of its law requiring AEDs at physical fitness facilities. The original law focused on indoor facilities. Senate bill 1371 expands the definition of a physical fitness facility to include public outdoor facilities owned by a municipality, township, or other unit of local government or by a public or private elementary or secondary school, college, university, or technical or trade school. This would include pools, athletic fields, soccer fields, football stadiums, baseball diamonds, volley ball, basketball, and tennis courts, and any other similar facility. The act became effective upon passage.

#### **New York**

The New York Department of Health has adopted a regulation requiring that all ocean surf bathing beaches have an AED on site, a PAD program in place and lifeguards trained in AED use. Life guards in New York are already required to be certified in BLS and the ASHI *CPR Pro for the Professional Rescuer* training program is approved for that training. The new regulation requiring AED placement went into effect December 12, 2009.

#### **Oregon**

Oregon made two changes to its current AED laws. The first change modifies Senate bill 556, passed last year, requiring an AED in any large place of public assembly. Senate bill 1006a modifies that law by defining the 'place of assembly' as being a single building with 50,000 square feet of indoor space where 50 or more people congregate on a normal business day. The bill also clarifies that community colleges must meet this requirement by placing an AED in each building where large gatherings take place. The bill also removes the explicit maintenance, placement, and training requirements of SB 556. SB 1006a took effect upon passage.

Oregon Senate bill 1033a requires all school, public and private to have an AED on site by January 1, 2015. The passage of this bill also means that the Oregon law requiring AEDs in physical fitness facilities will also apply to schools with such facilities on campus, whereas before they were exempt from the requirement. There was no mention of training staff in AED use in the bill.

### ***Licensed Professionals***

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#### **Alaska**

The Alaska Board of Dental Examiners has approved the ASHI ACLS course for continuing education for dental professionals. An official form provided by the Board is available in the Training Center Manager. This form must be copied and signed by both the student and the Instructor and then given to the student in order for him/her to receive credit for the course. The student will be awarded 11 credit hours of CE.

#### **Colorado**

The Board of Dental Examiners in Colorado adopted regulation governing the use of anesthesia. All personnel involved with the use of anesthesia must be certified in BLS. Dentists who use Moderate or Deep sedation also need to be certified in ACLS or PALS, depending on the age of the patient. The rule is effective March 30, 2010.

Also in Colorado, the Colorado Board of Pharmacy has confirmed that the ASHI *CPR Pro for the Professional Rescuer* training program can be used by pharmacists administering

vaccines to meet their BLS training requirement. The confirmation letter from the Colorado Board of Pharmacy is available in the ASHI Training Center Manager.

Finally for Colorado, the Peace Officers Standards and Training Board standardized the training for all peace officers through a new regulation that went into effect March 1, 2010. Now, all peace officers must be certified in first aid and CPR. The regulation placed no restrictions on the type of training used.

### **Florida**

Florida professionals working in respiratory care can now receive continuing education credit for their ACLS or PALS certification. The Florida Board of Respiratory Care adopted new regulations governing continuing education February 2, 2010 which added ACLS and PALS to the list of courses eligible for CE credit with no restriction on the training program taken. The regulation went into effect February 18, 2010

### **Illinois**

The Illinois Board of Education has adopted a regulation requiring anyone seeking an endorsement as a driver education teacher to complete 3 semester hours in injury prevention or safety and three hours in first aid and CPR. The instruction is meant to be part of their college course work. While certification is not explicitly required, there is no restriction on how the training is obtained, as long as it is part of the candidate's college credit. The regulation became effective January 12, 2010.

Also in Illinois, the Carnival-Amusement Safety Board amended their regulation to require that all carnival jump masters have first aid and CPR certification. The regulation states that the training must be American Red Cross or equivalent so both ASHI and MEDIC First Aid programs can be used for this training. The rule was adopted in January but was effective as of December 29, 2009, in preparation for summer carnival season.

### **Michigan**

The Michigan Department of Community Health has adopted a regulation requiring that athletic trainers be certified in emergency cardiac care by an organization that follows AHA or ARC guidelines. They are also required to be certified in first aid. Both ASHI and MEDIC First Aid courses meet the training requirement. The regulation was effective February 4, 2010.

### **Oregon**

The regulations governing continuing education for electricians and plumbers in Oregon have changed. All first aid and CPR courses now have to be pre-approved by the Building Codes Division (BCD) and the both the ASHI and MEDIC First Aid basic first aid and CPR training programs are approved. The BCD has stipulated special reporting requirements. 8 hours of credit can be received for a combined first aid and CPR course or 4 hours of credit for either one or the other. Which ever option is chosen, a special roster has to be completed and submitted to the BCD. The approval letters, roster, specific instructions, and a matrix of the course id numbers are all available as one document in the Training Center Managers for both ASHI and MEDIC First Aid.

### **Pennsylvania**

The Pennsylvania Board of Dentistry has amended their regulations to require that all dental hygienists applying for a sedation permit must have BLS certification. Normally, dental professionals in Pennsylvania only needed basic CPR certification, not professional level training. There was no restriction placed on the BLS training that could be used so the ASHI *CPR Pro for the Professional Rescuer* could be used to meet this training requirement. The regulation went into effect December 12, 2010.

Also in Pennsylvania, as of March 6, 2010, poker players can feel a little safer because all gaming table dealers must be trained in CPR. The Gaming Control Board adopted new rules for Table Games and made CPR training a minimum requirement for all dealers. No restriction was placed on the CPR training that can be used.

### **Rhode Island**

The Rhode Island Department of Mental Health has adopted new regulations with regards to step down units serving persons with psychiatric or substance abuse issues. At least one staffer trained in both first aid and CPR must be present in Behavioral Health Acute Stabilization units at all times. No restriction was placed on the training that can be used to meet the requirement.

### **Utah**

Hunting Guides and Outfitters in Utah must be trained in first aid and CPR. When originally adopted, only training by the American Heart Association or American Red Cross was accepted. However, after HSI protested the training restriction, the Division of Occupational and Professional Licensing agreed that substantially equivalent training can be approved by the Board on a case-by-case basis. The Board will not, however, pre-approve ASHI or MEDIC First Aid courses.