

108TH CONGRESS  
2D SESSION

# S. CON. RES. 143

Recognizing community organization of public access defibrillation programs.

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IN THE SENATE OF THE UNITED STATES

OCTOBER 8, 2004

Mr. DEWINE (for himself, Mrs. MURRAY, Mr. FRIST, and Ms. COLLINS) submitted the following concurrent resolution; which was referred to the Committee on Health, Education, Labor, and Pensions

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## CONCURRENT RESOLUTION

Recognizing community organization of public access  
defibrillation programs.

Whereas coronary heart disease is the single leading cause of death in the United States;

Whereas every two minutes, an individual suffers from cardiac arrest in the United States, and 250,000 Americans die each year from cardiac arrest out of hospital;

Whereas the chance of survival for a victim of cardiac arrest diminishes by ten percent each minute following sudden cardiac arrest;

Whereas 80 percent of cardiac arrests are caused by ventricular fibrillation, for which defibrillation is the only effective treatment;

Whereas 60 percent of all cardiac arrests occur outside the hospital, and the average national survival rate for an out-of-hospital victim of cardiac arrest is only five percent;

Whereas automated external defibrillators (AEDs) make it possible for trained non-medical rescuers to deliver potentially life-saving defibrillation to victims of cardiac arrest;

Whereas public access defibrillation (PAD) programs train non-medical individuals to use AEDs;

Whereas communities that have established and implemented PAD programs that make use of AEDs have achieved average survival rates as high as 50 percent for those individuals who have suffered an out-of-hospital cardiac arrest;

Whereas successful PAD programs ensure that cardiac arrest victims have access to early 911 notification, early cardiopulmonary resuscitation, early defibrillation, and advanced care;

Whereas schools, sports arenas, large hotels, concert halls, high-rise buildings, gated communities, buildings subject to high-security, and similar facilities can benefit greatly from the use of AEDs as part of a PAD program, since it often takes additional and therefore critical time for emergency medical personnel to respond to victims of cardiac arrest in these areas;

Whereas widespread use of defibrillators could save as many as 50,000 lives nationally each year;

Whereas the Aviation Medical Assistance Act of 1998 (Public Law 105–170; 49 U.S.C. 44701 note) authorized AEDs to be carried and used aboard commercial airliners;

Whereas the Cardiac Arrest Survival Act of 2000 (Public Law 106–505; 42 U.S.C. 238p–238q) provided for the placement of AEDs in Federal office buildings;

Whereas the Rural Access to Emergency Devices Act (Public Law 106–505, 42 U.S.C. 254c note) increased access to AEDs in rural communities;

Whereas the Community Access to Emergency Defibrillation Act of 2001 (Public Law 107–188; 42 U.S.C. 244–245) authorized the development and implementation of PAD projects; and

Whereas the Automatic Defibrillation in Adam’s Memory Act authorizes the use of grant funds to establish an information clearinghouse to provide information to increase public access to defibrillation in schools: Now, therefore, be it

1       *Resolved by the Senate (the House of Representatives*  
2       *concurring), That Congress—*

3               (1) recognizes the growing number of commu-  
4       nity activists, organizations, and municipal govern-  
5       ments leading the national effort to establish public  
6       access defibrillation (PAD) programs; and

7               (2) encourages the continued development and  
8       implementation of PAD programs in schools, sports  
9       arenas, NASCAR race tracks, large hotels, concert  
10      halls, public housing, high-rise buildings, gated com-  
11      munities, buildings subject to high-security, and

- 1 similar facilities to increase the survival rate for vic-
- 2 tims of cardiac arrest.

