

CENTRAL NEW YORK EMERGENCY MEDICAL SERVICES COUNCIL
Collaborative Agreement
Between Public Access Defibrillation Provider
and Emergency Healthcare Provider
for the provision of Automated External Defibrillation in Central New York

I, _____ (CEO/President/Designee) of _____ (organization name). Public Access Defibrillation (PAD) Provider and I, _____ Emergency Healthcare Provider (Physician or hospital designee), agree to abide by the following terms and conditions set forth by section 3000-B of Article 30 of the Public Health Law of the State of New York for the provision of Automated External Defibrillation (AED) by the PAD Provider.

1. The PAD Provider and trained AED operator(s) shall operate under the appropriate protocols for use of an AED as promulgated for the New York State Department of Health, Central New York Regional Medical Services Council and the Regional Emergency Medical Advisory Committee (REMAC).
2. The PAD Provider shall ensure that all persons designated to operate an AED successfully complete an AED training course which has been approved by the New York State Department of Health or the New York State Emergency Medical Services Council.
3. Prior to operation of an AED, the PAD Provider shall notify the Central New York Regional Emergency Medical Services Council of the existence, location, quantity and type of all mobile and stationary AED(s) on the premises of the PAD provider.
4. The PAD provider shall comply with section 3000-B of the Public Health Law of the State of New York.
5. The PAD provider shall ensure that an ambulance service is immediately called.
6. The PAD provider shall ensure that the Emergency Healthcare Provider is notified within 24 hours of each use of an AED.
7. The PAD provider shall ensure that all AED(s) are maintained and tested according to manufacturer and/or government standards.
8. The responsibilities of the Emergency Healthcare Provider shall include, but not be limited to the following:
 - Participating in the Central New York Regional EMS Council/REMAC Quality Assurance Program via reporting to the Regional EMS Council within 5 business days of each use of an AED. Minimum required information to be reported shall include the name of the PAD provider, date and time of incident, patient age and sex, estimated time from arrest to first AED shock, estimated time of arrest to CPR, number of shocks administered to the patient, name of transporting ambulance service and patient outcome at incident site; and
 - Monitoring the quality of patient care provided by the PAD provider.
9. If the Emergency Healthcare Provider changes, a new Collaborative Agreement shall be filed within five business days. Additionally, if the Emergency Healthcare provider resigns, s/he shall immediately notify the Regional EMS Council in writing and a new updated collaborative agreement filed with CNYEMS.

PAD Provider's (Designee's) Signature

Date

Emergency Healthcare Provider (Designee's) Signature

Date