

OFFICE OF THE SECRETARY OF DEFENSE WASHINGTON, DC 20301



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MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS DIRECTORS OF DEFENSE AGENCIES DIRECTORS OF DOD FIELD ACTIVITIES

SUBJECT: Guidelines for Public Access Defibrillation Programs in DoD Facilities

REFERENCES: (a) Section 7 of Public Law 106-129

- (b) "Guidelines for Public Access Defibrillation Programs in Federal Facilities," 66 Federal Register 28495 28511 (May 23, 2001)
- (c) DoD Instruction 6055.6, "DoD Fire and Emergency Services Program," October 10, 2000

Pursuant to reference (a), the Department of Health and Human Services and the General Services Administration issued reference (b). Reference (b) sets forth guidelines for all federal agencies in designing public access defibrillation (PAD) programs in federal facilities, including considerations for the potential placement of automated external defibrillators (AEDs) in federal buildings. Both the statute and regulatory guidelines specifically include applicability to buildings on military installations. Under reference (c), DoD components are responsible for implementation of effective emergency medical services (EMS) programs, primary policy oversight for which rests with the Deputy Under Secretary of Defense (Installations and Environment), with support from the Assistant Secretary of Defense (Health Affairs).

This memorandum is to reinforce the initiatives taken to date to consider, consistent with reference (b), the appropriate use of AEDs in DoD buildings. Consideration of PAD programs should take into account, among other things, the emergency medical system response capabilities, the demographics of the personnel who work in the building, the number and type of visitors, and the nature of the activities of personnel in the building. A careful assessment of pertinent factors, properly documented, is an appropriate response to the guidelines, together with follow through on the results of the assessment. Administration of PAD programs includes responsibilities for oversight, training of personnel, and maintenance of equipment.

As part of their EMS programs, DoD components should undertake such assessments for DoD buildings, document decisions made, and take appropriate actions to implement those decisions. Our points of contact are Lt Col Art Kaminski, 703-604-1621, for Installations and Environment, and Lynn Pahland, 703-681-1703 for Health Affairs.

Raymond F. DuBois

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