



ENVIRONMENTAL HEALTH AND SAFETY

AUTOMATED EXTERNAL DEFIBRILLATOR (AED) MANAGEMENT PROGRAM

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Reviewed and Revised May 2026

Status

Contact(s)	Implementation Date	Comments
Gerald Petre, EHS	June 2018	Manual created.
Gerald Petre and Sharlie Doty, EHS	June 2019	Minor grammatical and punctuation revisions.
Alex Christy and Gerald Petre, EHS	May 2025	Reformatted to fit branding standards. Added ZOLL AED3 to authorized AED section.
Gerald Petre and Cheryl Tillman, EHS	May 2026	Changed document revised dates and current dates on the appendix documents.

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A: PURPOSE

Oklahoma State University is committed to the safety of all students, faculty, staff, and visitors to campus. The purpose of the Automated External Defibrillator (AED) management program is to ensure that all AEDs on campus are maintained properly and are readily available to deliver potentially lifesaving defibrillation to victims of Sudden Cardiac Arrest (SCA). AEDs are intended to provide a bridge during the critical minutes between the onset of SCA and the arrival of Emergency Medical Services (EMS) personnel.

DEFINITIONS

- **Automated External Defibrillator:** an FDA approved medical device that is capable of recognizing the presence or absence of ventricular fibrillation or rapid ventricular tachycardia and is capable of determining, without intervention by an operator, whether defibrillation should be performed; and upon determining that defibrillation should be performed, automatically charges and requests delivery of an electrical impulse to an individual's heart.
- **AED owner:** any University department acquiring or possessing an AED.
- **Cardiopulmonary Resuscitation (CPR):** is a procedure to support and maintain breathing and circulation for a person who has stopped breathing (respiratory arrest) and/or whose heart has stopped (cardiac arrest).
- **Emergency Medical Services (EMS):** is typically an ambulance service that provides acute medical care and transports patients to a medical facility for more advanced treatment.
- **Sudden Cardiac Arrest (SCA):** is a condition in which the heart suddenly and unexpectedly stops beating, stopping blood flowing to the brain and other vital organs. SCA usually causes death if not treated within minutes.

B: SCOPE & APPLICABILITY

This AED Management Program was created by the Environmental Health and Safety Department (EHS), to identify all available AEDs on campus and to ensure they are properly maintained. All University departments are expected to comply with requirements contained herein.

Any University department possessing AED(s) that are unwilling or unable to comply with the requirements of this program, including financial support requirements, may be required to remove their AED from use. University departments wishing to dispose of defective or obsolete AEDs shall dispose through proper channels as e-waste.

C: DUTIES & RESPONSIBILITIES

AED COORDINATOR

A Fire and Life Safety Specialist in Environmental Health and Safety (EHS) shall serve as the University AED Coordinator. The AED Coordinator shall be responsible for all the following tasks:

- Provide guidance, monitoring, and periodic reevaluation for this program.
- Provide oversight and technical assistance to all departments possessing AEDs.
- Maintain an inventory of University-owned AEDs and their locations.
- Inform emergency services of the location of all University-owned AEDs.
- Conduct and document semi-annual and annual inspections to verify that departments comply with this program.

- Act as a liaison between AED owners and manufacturers to assist with AED maintenance and compliance issues.
- Maintain inspection records and AED tracking database.

AED OWNER

The Dean or Department Head is responsible for the following:

- Designate a departmental AED point of contact that would be responsible for maintaining the AED.
- Ensure operation and maintenance of each AED in complete accordance with regulatory requirements, manufacturers' recommendations and this program.
- Ensure payment of all costs for purchase, installation, and maintenance associated with the AED.

DEPARTMENTAL AED POINT OF CONTACT

Duties of the departmental AED point of contact shall include the following:

- Place the AED in a conspicuous and unobstructed location that is conducive to rapid access by responders.
- Notify employees of AED locations.
- Ensure that inspections and maintenance of AED(s) is conducted in a timely manner in accordance with manufacturer recommendations and this program.
- Maintain an AED Monthly Self-Readiness Check Sheet for each AED, tracking the date each AED is checked and the initials of the person who performs the status check.
- Purchase and replace batteries, pads, and other supplies as needed.
- Label each AED as University property and include the department to which it belongs.

Register the existence and location of any new or existing AEDs with the AED Coordinator utilizing the Campus AED Inventory Registration form. Send the completed form to the AED Coordinator through campus mail or by email to fls@okstate.edu.

D: AUTHORIZED AED

EHS recommends the acquisition and use of the **Zoll AED Plus or ZOLL AED3**. These units and their pads are compatible with the equipment used by all emergency responders in the Stillwater.

E: IN CASE OF AN EMERGENCY

When personnel on campus are notified of a medical emergency, they should call the appropriate emergency number to report the emergency:

- 911 from an on campus phone
- 744-6523 from a cell phone, or use the Rave Guardian app.

The caller should provide authorities with the following information:

- Type of emergency
- Physical street address of facility
- Location of emergency
- Phone number they are calling from
- Further information as requested

Someone should meet and direct emergency responders to the incident location.

F: RETURNING AEDS TO SERVICE AFTER USE

The following activities will need to be completed to return the unit to service:

- Check and replenish supplies as appropriate.
- Clean and disinfect the device.
- Check the device and housing for cracks or other damage.
- Return the AED to its designated location with appropriate supplies.

APPENDIX A: CAMPUS AED REGISTRATION FORM

AED INVENTORY REGISTRATION

MODEL #:	SERIAL #:
MANUFACTURER:	LOCATION:
PAD EXPIRATION:	DEPARTMENT POINT OF CONTACT:

Completion and submission of this form helps us track the availability and readiness of AEDs on campus.

Send the completed form to Environmental Health and Safety:

University Health Services
1202 W. Farm Road, Suite 002
Stillwater, OK 74078

Send the completed form via email:

fls@okstate.edu

Current as of May 2026

APPENDIX B: AED MONTHLY CHECK SHEET

AED MONTHLY CHECKLIST

MODEL #:			SERIAL #:			
MANUFACTURER:			LOCATION:			
MONTH	DATE	CONDITION	*BATTERY	PADS EXPIRATION	**PADS SEALED	INITIALS
Jan.						
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sep.						
Oct.						
Nov.						
Dec.						

***Does the AED display a green checkmark, indicating that the unit is ready for use?**

****Ensure the packaging has no damage and confirm expiration date.**

INITIALS	PRINTED NAME	SIGNATURE

This form should be kept with the AED.

Current as of May 2026