



Public Access Defibrillation Standard Operating Procedures

Revised: March 2022



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Authorization

The appropriate representatives, whose signatures appear below, put these standard operating procedures into effect. The standard operating procedures will stay binding until revised, with a new signature page, or the program is discontinued, and the standard operating procedures will be considered null and void. Deviation from the standard operating procedures may result in authorization of the program to be rescinded.

The standard operating procedures will be initiated and put into effect on the date below. An annual review and revision will be conducted if necessary. Any changes to those standard operating procedures require prior approval by the parties signing below.

Dr. Jessica Mann, MD, MS

Medical Director

Central Penn College

Milton S. Hershey Medical Center

Director of Public Safety & Health

Date



AED Overview

This document applies to the Central Penn College properties use of the Automatic External Defibrillator (AED) mentioned in Section 4.0.

All use of the AED, training requirements, standard operating procedures reviews, and post event reviews will be under the auspices of the Public Safety & Health Director and Medical Director.

Definitions

This section defines terms related to AED standard operating procedures.

Definitions

- 1) **AED** shall refer to the automatic external defibrillator capable of cardiac rhythm analysis, which will charge and deliver a shock after electronically detecting and assessing ventricular fibrillation or rapid ventricular tachycardia when applied to an unconscious victim with absent respirations and no signs of circulation. The automatic defibrillator requires user interaction to deliver a shock.
- 2) An *Authorized Individual* refers to an individual, who has successfully completed a defibrillator training program, has successfully passed the appropriate competency-based written and skills examinations, and maintains competency by participating in periodic reviews. The Authorized Individuals shall also adhere to standard operating procedures in this manual.
- 3) **AED Service Provider** means any agency, business, organization, or individual who purchases an AED for use in a medical emergency involving an unconscious person who has no signs of circulation. This definition does not apply to individuals who have been prescribed an AED by a physician for use on a specifically identified individual.
- 4) The *Medical Director* develops or approves detailed plans, called protocols or algorithms, to guide individuals providing defibrillation therapy. The protocols must follow state, regional and local standards of medical practice and outline the exact procedures that AED users should follow.

Medical Director

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Program Coordinator

At all times while these standard operating procedures are in effect, the College will maintain a Program Coordinator. This person is responsible for the overall coordination, implementation, and continued operation of the program.

- 1) The Program Coordinator or alternate contact will be available in person or by phone within a reasonable amount of time to answer any questions or concerns of the Authorized Individuals.
- 2) The Program Coordinator or designee shall ensure that all issues related to training, such as scheduling of basic and periodic reviews, maintenance of training standards and Authorized Individual status, and record keeping is managed on a continuing basis.
- 3) The Program coordinator or designee will assure that all equipment stock levels are maintained and/or ordered as stipulated in "Equipment Requirement" and readiness checks and record maintenance are done in accordance with department requirements and manufacture's recommendations.
- 4) If the Program Coordinator or designee needs to have a quality assurance issue addressed, he/she may contact the Public Safety and Health Director or his/her designee.
- 5) The Program Coordinator will have a list of the appropriate telephone numbers in compliance with above paragraphs, numbers 1 and 4 (Appendix A). If any contact information changes, the Program Coordinator will be notified within 72 hours.

Program Coordinator: Shaun Cooney, Public Safety and Health Director

Equipment Requirement

The type and number of AEDs and related equipment will be maintained at each site as outlined below. The Program Coordinator or designee will assure replacements are ordered as soon as possible. Equipment is located as shown in Appendix B.

The following stock levels, and expiration dates will be checked every month and maintained as follows:

Manufacture / Model	Item Description	Quantity
Dhilling HaantStant FDv	SMART Pads II Electrodes	1
Phillips HeartStart FRx	Battery Pack	1
8 Year Warranty	Infant/Child Key	1
2022 - 2030	AED/CPR Responder Pack	1
	Quick Reference Card	1

Readiness will be checked at least monthly and after every use, according to the manufacture's recommended guidelines. Records will be maintained using Appendix C or an approved variation.



Training Requirements

The training requirements for Authorized Individuals are outlined below.

Course lengths for the American Red Cross First Aid/CPR/AED vary depending on course components included. Core courses may last from less than 1 hour to just over 5 hours.

Learning objectives

- 1) Describe how to recognize an emergency and gain confidence to act.
- 2) Explain how to lower the risk for infection when giving care.
- 3) Understand legal concepts as they apply to lay responders, such as consent.
- 4) Describe the emergency action steps: CHECK—CALL—CARE.
- 5) Identify when it is necessary to call 9-1-1 or the designated emergency number.
- 6) Explain how to check an injured or ill person who appears to be unresponsive.
- 7) Explain how to check a responsive injured or ill person.
- 8) Demonstrate high-quality CPR and use of an automated external defibrillator (AED) for a person who is in cardiac arrest.
- 9) Demonstrate first aid care for a person who is choking.
- 10) Recognize the signs and symptoms of, and describe appropriate first aid care for, the following sudden illnesses: shock, asthma attack, anaphylaxis, heart attack, opioid overdose, diabetic emergencies, high fever, vomiting, diarrhea, and dehydration.
- 11) Describe methods used to control life-threatening bleeding, including the application of direct pressure and the application of a commercial tourniquet.
- 12) Demonstrate the application of direct pressure to control life-threatening bleeding.
- 13) Explain when a commercial tourniquet should be used and describe the basic principles of using a tourniquet.
- 14) Recognize the signs and symptoms of, and describe appropriate first aid care for, the following injuries and environmental illnesses: burns; head, neck, and spinal injuries (including concussion); heat stroke; hypothermia; poison exposure.

Certification requirements

- 1) Attend and participate in all class sessions and successfully complete the online session (blended learning courses only).
- 2) Actively participate in all course activities, including assuming various roles during skill practices and assessment.
- 3) Demonstrate competency in all required skills.
- 4) Successfully complete all assessment scenarios.



AED Protocols

To be eligible to use an AED on an appropriate victim, Authorized Individuals will:

- Meet the training requirements set forth in these standard operating procedures.
- Pass competency-based written and skills recognition examinations
- Comply with the requirements set forth in these standard operating procedures. Failure to comply with these requirements shall result in the suspension of the individual's authorization.

The authorization period for a trained responder will stay in effect if he/she adheres to the program guidelines.

Authorization shall be rescinded in the event of termination of the individual's association with Central Penn College.

AED Legal Analysis of Pennsylvania¹

Physician Required:NoRegistration Required:noTraining Required:YesPrescription Required:no

Section 8331.2 – Title 42 – Judiciary and Judicial Procedure²

Good Samaritan protection is extended to any person who in good faith acquires and maintains an AED or uses an AED in an emergency unless acts or omissions intentionally designed to harm, or any grossly negligent acts or omissions result in harm to the individual receiving the AED treatment.

An AED acquirer must (1) ensure that expected AED users receive training; (2) maintain and test the AED according to the manufacturer's operational guidelines; (3) instruct AED users to immediately contact EMS in an emergency; and (4) provide EMS personnel with information as requested.

Regular Session 2011 - 2012 Senate Bill 3513

An Act amending Title 42 (Judiciary and Judicial Procedure) of the Pennsylvania Consolidated Statutes, in particular rights and immunities, further providing for Good Samaritan civil immunity for use of automated external defibrillator and for nonmedical Good Samaritan civil immunity.

 $\frac{https://www.legis.state.pa.us/cfdocs/legis/li/consCheck.cfm?txtType=HTM\&ttl=42\&div=00.\&chpt=083.\&sctn=031.\\ \&subsctn=002.$

¹ https://www.aedsuperstore.com/aedlaws/state/pa

https://www.legis.state.pa.us/cfdocs/billinfo/billinfo.cfm?syear=2011&sind=0&body=S&type=B&BN=0351



Internal Emergency Response System

Checking an Injured or III Person

- 1) Check the scene for safety, form an initial impression, obtain consent, and use PPE.
- 2) If the person appears unresponsive, check for responsiveness, breathing, life-threatening bleeding or other life-threatening conditions using shout-tap-shout. Check for no more than 10 seconds.
- 3) If the person:
 - a) If the person does not respond, responds but is not fully awake, is not breathing or is only hasping, or has life-threatening bleeding or another obvious life-threatening condition, call 9-1-1 and get equipment, or tell someone to do so. Then, give care based on the condition found and your level of training and continue your check to determine if additional care is needed. For a person who is unresponsive and not breathing, start CPR and use an AED immediately.
 - b) If the person is responsive or responds to stimulation and is fully awake and does not appear to have a life-threatening condition:
- 4) After completing the check step, call 9-1-1 and get equipment, or tell someone to do so (if needed). Then, give care based on the condition found and your level of training.

911 Dispatcher Information

- 1) The current medical status of the patient. For example, are they breathing? Are their symptoms worsening?
- 2) Any ongoing medical issues that you're aware of, like breathing problems or heart issues? Are they taking any medication?
- 3) Any changes to the patient's condition while you're on the call.
- 4) Your exact location, with any landmarks that may help us find you faster.

Giving CPR

- 1) Place the person on their back on a firm, flat, surface.
- 2) Give 30 chest compressions
- 3) Give 2 breaths
- 4) Continue giving sets of 30 chest compressions and 2 breaths. Use an AED as soon as one is available.

Using an AED

- 1) As soon as an AED is available, turn it on and follow the voice prompts.
- 2) Choose the appropriate pads.
- 3) Remove clothing and attach pads correctly.
- 4) Plug the pad connector cable into the AED, if necessary.
- 5) Prepare to let the AED analyze the heart's rhythm.



- 6) Deliver a shock if the AED determines one is needed.
- 7) After the AED delivers the shock, or if no shock is advised, immediately start CPR, beginning with compressions.

When EMS Arrives

- 1) Authorized Individual working on the victim should document and communicate important information to the EMS provider such as:
 - a. Victim's name
 - b. Time victim was found
 - c. Initial and current condition of the victim
- 2) Assist as requested by EMS personnel

Post-use Procedures:

- Complete documentation of the sudden cardiac arrest event no more than 24 hours following the event
- 2) Give all documentation to the Public Safety & Health Director as soon as possible and no later than 5 days from the date of the event
- 3) Program Coordinator or designee will download evet data from AED. If the Program Coordinator or designee is unable to download the event data, he/she will contact a local emergency response agency to assist with downloading. **Do not remove battery.**
- 4) Bring AED to the Public Safety and Health Director after use for service to be rendered and downloading of event related information to be completed.
- 5) Program Coordinator or designee should conduct emergency incident debriefing as needed and verify that the appropriate incident report has been completed

Equipment Maintenance

All equipment and accessories necessary for support of medical emergency response shall be maintained in a state of readiness. Specific maintenance requirements include:

- The Public Safety and Health Director shall be informed of changes in availability of emergency medical response equipment.
- If equipment is withdrawn from service, the Public Safety and Health Director shall be informed and then notified when equipment is returned to service.
- The Public Safety and Health Director or designee shall be responsible for informing response teams of changes to availability of emergency medical equipment.
- The Program Coordinator or designee shall be responsible for having regular equipment maintenance performed. All maintenance tasks shall be performed according to equipment maintenance procedures as outlined in these standard operating procedures.
- Following use of emergency response equipment, all equipment shall be cleaned and decontaminated as required. If contamination includes bodily fluids, the equipment shall be disinfected according to the standard operating procedures.



Annual System Assessment

Once each calendar year, the Program Coordinator or designee shall conduct and document a system readiness review. This review shall include review of the following elements:

- 1) Training records
- 2) Equipment operations and maintenance records

Monthly System Check

Once each calendar month, the Program Coordinator or designee shall conduct and document a system check. These records shall be retained according to the schedule established for the environmental health and safety function. This check shall include review of the following elements:

- 1) The AED should be checked that it is physically in the proper location
- 2) Check the outside of the defibrillator for any cracks or other signs of damage
- 3) The AED should be clean, undamaged, and free of excessive wear
- 4) The AED pads should be checked
 - The package should be sealed until ready for use, and it should be within its expiration date. If the pad package is open or the expiration date has passed, it should be replaced immediately
 - b. Check cables to ensure they are free of cracks, cuts and that there are no exposed or broken wires
- 5) The battery should be checked
 - a. Turn the AED on and off and verify that the unit indicates ready for use
 - For most AEDs, there is an indicator light or symbol that indicates if the battery is okay or
 if it needs service. If the battery is low, you should receive both visual and audible
 warnings (many generate a "beep" like a smoke detector with a low battery)
 - c. The battery should be within its expiration date. If the battery's expiration date has passed, it should be replaced immediately.
- 6) Most AEDs have a small pouch or packet of supplies you might need when using the AED. This pouch may include a face mask for rescue breathing, a small towel, scissors, protective gloves, and a razor. Be sure this kit is ready for action.

Cleaning AED Unit

- The outside of the AED can be cleaned with a soft cloth dampened in soapy water, chlorine bleach (2 TBS per quart or liter of water), ammonia-based cleaners, or 70% isopropyl (rubbing alcohol). It is recommended that the carry case be cleaned with a soft cloth dampened in soapy water.
- Do not use strong solvents such as acetone or acetone-based cleaners, abrasive materials, or enzymatic cleaners to clean the AED and accessories.
- 3) Do not immerse the AED in fluids. Do not sterilize the AED or its accessories.



Quality Assurance

After AED use, the following quality assurance procedures will be utilized:

- The Program Coordinator or designee shall be notified within 24 hours. Quality assurance shall be maintained by way of retrospective evaluation of the medical care rendered by the Authorized Individuals on scene and during transfer of the victim to the appropriate transporting agency personnel.
- 2) If grief counseling is deemed necessary for employees, referrals may be made to professional grief counseling organizations by contacting the Human Resources Department.
- 3) In addition to information obtained from the AED, documentation of the incident shall be completed as follows:
 - a. Documentation shall be initiated whether defibrillator shocks are delivered.
 - b. The following information shall be provided if known:
 - i. Refer to AED Post Incident report, Appendix D
- 4) The AED Post Incident Report is to be sent to the Public Safety and Health Director.
- 5) The Public Safety and Health Director or designee reads the AED Post Incident Report and interviews the Authorized Individuals involved in the emergency to ensure that:
 - a. The Authorized Individuals quickly and effectively set up the necessary equipment
 - b. When indicated, the initial defibrillator shock(s) were delivered within an appropriate amount of time given the circumstances.
 - c. Adequate basic life support measures were maintained.
 - d. Following each shock or set of shocks, as appropriate, the person was assessed accurately and treated appropriately.
 - e. The defibrillator was activated safely and correctly.
 - f. The care provided followed the internal emergency response guidelines set forth in Section 6.0 of this document.
- 6) The Medical Director will review the AED event record and communicate directly with the Public Safety and Health Director.
- 7) The Public Safety and Health Director or designee will determine the occurrence and the range of action to be taken in response to identified problems or deficiencies, if any, as well as actions to be commended and will then notify the Program Coordinator or designee.
- 8) A copy of the AED Post Incident Report is to be sent to the Medical Director for inclusion into their records.

Following the post incident review, a copy of all written documentation concerning the incident will be sent to the Public Safety and Health Director or designee and maintained on site for a period of not less than seven years from the incident date.



Appendix A – Contact Phone List

For information and assistance regarding the AED program, the individuals listed below may be contacted. Every effort should be made to first contact the Program Coordinator or alternate contact. If any contact information changes, the Program Coordinator should be notified within 72 hours.

Name	Position	Primary Phone	Alternate Phone
Dr. Jessica Mann, MD, MS Jmann3@pennstatehealth.psu.edu	Medical Director	717-531-0003 Ext 285068	N/A
Shaun Cooney	Program Coordinator	717-805-6927	717-728-2274



Appendix B – Equipment Location

Equipment information is shown below.

Additional information may be acquired by reviewing the AED inspection records stored at the Public Safety and Health Office.

Central Penn College

Building	Location	Model	Serial Number
Bollinger Hall	1 st Floor Public Safety & Health Office	Phillips HeartStart FRx	B22B-02800
Bollinger Hall	1 st Floor Mailroom Area	Phillips HeartStart FRx	B22B-02777
Bart A. Milano Hall	East Wing Financial Aid Area	Phillips HeartStart FRx	B22B-02963
Leadership Library	Outside of Reading Room	Phillips HeartStart FRx	B22B-02896
Advanced Technology Education Center	2 nd Floor Reception Area	Phillips HeartStart FRx	B22B-02730
Advanced Technology Education Center	1 st Floor Student Mailbox Area	Phillips HeartStart FRx	B22B-02881
Health Science Building	Main Entrance Lobby Area	Phillips HeartStart FRx	B22B-02831
Suite 127	1 st Floor Inside Residence	Phillips HeartStart FRx	B22B-03097
Suite 145	1 st Floor Inside Residence	Phillips HeartStart FRx	B22B-02885
Gale #1 Apartment	1 st Floor Inside Residence	Phillips HeartStart FRx	B22B-02869
Anne/Todd #1 Apartment	1 st Floor Inside Residence	Phillips HeartStart FRx	B22B-02823
730 Valley Road ⁴	ON HOLD	Phillips HeartStart FRx	B22B-02767
The Underground	Main Entrance Lobby Area	Phillips HeartStart FRx	B22B-02816
Boyer House	Main Entrance Lobby Area	Phillips HeartStart FRx	B22B-02719

⁴ Building refurbishment.



Appendix C – AED Post-Incident Report Form

Central Penn College Automated External Defibrillator (AED) Post-Incident Report Form

Use this form to report any event, incident or situation that resulted in the use or attempted use of an AED. The responder at the scene shall ensure its completion and forwarding within 24 hours of the event to the Public Safety and Health Director.

Facility or Building:		
Location of Event:		
Date of Event:		t:
Name and Contact Information of victim, if known:		
Did the victim collapse (become unresponsive):	Yes	No
Was someone present to see the person collapse?	Yes	No
If yes, provide name:		
If yes, was the person a trained AED employee?	Yes	No
Did the victim have a pulse?	Yes	No
How was the pulse checked?		
Was the victim breathing?	Yes	No
How was the breathing checked?		
Were Public Safety Officers notified?	Yes	No
Were Public Safety Officers at the scene?	Yes	No
Were emergency services contacted?	Yes	No
If yes, who was contacted?		
Was CPR started?	Yes	No
Who started CPR?	Bystander	Trained AED Employee



Briefly describe the event, incident, or situation that resulted in the AED being brought to this victim:

Was the AED applied to the victim?	Yes	No
If yes, describe what actions the AED advised:		
Status of victim at the time EMS personnel arrived:		
Did the victim have a pulse?	Yes	No
How was the pulse checked?		
Was the victim breathing?	Yes	No
How was the breathing checked?		
Name of person operating AED:		
Has the AED unit been cleaned and put back to a	state of read	iness according to manufacturer's
recommendations?	Yes	No
Signature of responder completing this form and date:		
Name and Contact Information of other responders:		

Return this form to: Public Safety and Health Department

Initial report may be emailed to Shaun Cooney at

<u>ShaunCooney@CentralPenn.edu</u> with a signed copy submitted on the next

business day.



Appendix D – Campus Addresses

Boyer House
500 Valley Rd. Summerdale, PA
Advanced Technology Education
Center
600 Valley Rd. Summerdale, PA
Health Science Building
728 Valley Rd. Summerdale, PA
Storage Building
730 Valley Rd. Summerdale, PA
Charles T. Jones Library
97 College Rd. Summerdale, PA
Milano Hall (East)
101 College Rd. Summerdale, PA
Milano Hall (West)
105 College Rd. Summerdale, PA
Bollinger Hall
103 College Rd. Summerdale, PA
The Underground
105 College Rd. Summerdale, PA
Gale 1
91 College Hill Rd. Summerdale, PA
Gale 2
91 College Hill Rd. Summerdale, PA
Gale 3
91 College Hill Rd. Summerdale, PA
Gale 4
91 College Hill Rd. Summerdale, PA
Gale 5
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Gale 6
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Gale 7
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Gale 8
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Anne 1
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Mindy Suite 127 135 College Hill Rd. Summerdale, PA
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Mindy Suite 143
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Jeremy Suite 163
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Crockett Suite 183
185 College Hill Rd. Summerdale, PA

Crockett Suite 185
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Crockett Suite 187
185 College Hill Rd. Summerdale, PA
Crockett Suite 189
185 College Hill Rd. Summerdale, PA
Dirk Suite 191
191 College Hill Rd. Summerdale, PA
Dirk Suite 193
191 College Hill Rd. Summerdale, PA





Public Access Defibrillation Standard Operating Procedures