



**House  
Legislative  
Analysis  
Section**

House Office Building, 9 South  
Lansing, Michigan 48909  
Phone: 517/373-6466

**MEDICAL FIRST RESPONDERS:  
CLARIFY DEFINITION**

**House Bill 4659 (Substitute H-1)  
First Analysis (10-22-03)**

**Sponsor: Rep. Craig DeRoche  
Committee: Health Policy**

***THE APPARENT PROBLEM:***

An automated external defibrillator (AED) is a device that analyzes a heart attack victim’s heart rhythm and automatically delivers the appropriate electric shock necessary to restore a regular rhythm. With an AED, a medical procedure once in the purview of trained medical professionals and certain emergency personnel such as paramedics can now be performed by the average person. Public Act 173 of 1999 expanded the Good Samaritan Law to limit the civil liability of persons who used an AED to render emergency service to another person. The intent of the legislation was to encourage the widespread availability of AEDs in places where large numbers of people congregated, such as malls, stadiums, airports, and fitness clubs, and also in police cars.

Perhaps the most statistically-supported beneficial effect has been the placement of AEDs in police cars. In treating cardiac arrest, minutes matter. With each passing minute, a victim’s chance of survival decreases by about 10 percent; therefore, a victim has just a 25 percent of survival after five minutes. In addition, due to lack of oxygen, brain damage can also occur within minutes. Studies have shown that law enforcement officers are able to respond to an emergency call in less time than a medical first responder such as an ambulance or other advanced life support service (on average, studies have shown a police-first response time to ventricular fibrillation cases – one form of cardiac arrest – of 4.2 minutes vs. 6.3 minutes for EMS-first cases). Statistics have shown that patients treated by police had a survival-to-hospital-discharge rate of 20 percent compared to 2.9 percent of those treated first by EMS.

Though governmental immunity laws and Good Samaritan laws have eliminated the concern that law enforcement officers using AEDs could be held civilly liable, a concern lingers over whether law enforcement officers who carry an AED in their patrol cars meet the criteria for being medical first responders. If so, law enforcement officers would have to be trained and licensed as medical first

responders, and the agencies they work for would have to be licensed as medical first response services. Obviously, this would prove a disincentive for law enforcement agencies to equip all patrol cars with AEDs. Therefore, legislation is being offered to clarify that placement of an AED in a patrol car does not in and of itself make the law enforcement officer a medical first responder.

***THE CONTENT OF THE BILL:***

The Public Health Code defines a “medical first responder” as an individual who has met certain educational requirements and who is licensed to provide medical first response life support as part of a medical first response service. The term also includes the driver of an ambulance that provides basic life support services only.

The bill would amend the code to clarify that a police officer would not be a medical first responder solely because his or her police vehicle was equipped with an automated external defibrillator.

MCL 333.20906

***FISCAL IMPLICATIONS:***

According to the House Fiscal Agency, the bill would not have a fiscal impact on the state or on local governmental units. (10-13-03)

***ARGUMENTS:***

***For:***

The concern over whether placement of AEDs in patrol cars would raise law enforcement officers and agencies to the level of medical first responders and medical first response services surfaced during the debate on the legislation that expanded the Good Samaritan Law to encompass persons who used an AED to render emergency care to another person. At

**House Bill 4659 (10-22-03)**

that time, some argued that the concern was unfounded.

Police officers and fire fighters are trained in basic first aid and CPR. Many squad cars carry oxygen and first aid kits to assist in medical emergencies. Assisting in medical emergencies must not be confused with rendering the statutory level of care that would make an agency a medical first response service or an individual officer a medical first responder. The new generation of AEDs is so simple to use, that use of one would be on a level similar to administering CPR. Just as training in CPR and being sent to assist in cardiac arrest cases has not made police and fire fighters medical first response services, neither should the routine placement of AEDs in squad cars and fire engines.

Further, in a letter sent in December 1998 by the director of the Emergency Medical Services Division of the Department of Consumer and Industry Services to medical control authorities (which supervise emergency medical services within an emergency medical services system, typically a county), the director addressed the question of whether the use of AEDs by law enforcement agencies and personnel made them medical first responders. The director wrote that the Public Health Code's definition of medical first response service "excludes a law enforcement agency from having to meet the medical first response service requirements *if it does not hold itself out as providing this level of care.*" The director further wrote that "[t]ypically, a law enforcement officer is not dispatched to provide life support at the level of care of a medical first responder and is therefore not required by Part 209 to be trained and qualified as a medical first responder." In light of the information regarding the quicker response time of police officers and other first responders as compared with medical first responders, it is imperative that police officers be equipped with AEDs, especially in rural areas. The bill would assist in this endeavor by settling any lingering doubts as to the status of a police officer being a medical first responder.

***Against:***

The term "police officer" generally refers to employees of city agencies. Perhaps the bill should be amended to instead use the term "law enforcement officer", which would also encompass county sheriff's offices. Some statutory definitions of "law enforcement officer" also include college and university public safety officers and conservation officers employed by the Department of Natural Resources. This would be fitting, as college

activities can draw large and diverse crowds, which increase the risk for incidents of sudden cardiac arrest, and conservation officers may be called on to assist hunters and hikers experiencing heart attacks. Though current law does not prevent these officers from equipping their patrol cars with AEDs, including them in the terminology could act as encouragement to do so.

***POSITIONS:***

Representatives from the following organizations and agencies indicated support for the bill:

The Michigan Township Association.

The Fraternal Order of Police.

The Michigan Association of Police Organizations.

The Department of Community Health.

The American Red Cross.

Analyst: S. Stutzky

■ This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.