



Dear Colleague

ROLL OUT OF DEFIBRILLATORS TO INDEPENDENT DENTAL PRACTICES PROVIDING NHS GENERAL DENTAL SERVICES - FREQUENTLY ASKED QUESTIONS (FAQs)

Summary

1. [NHS PCA\(D\)\(2014\)6](#) advised NHS Boards of the arrangements for the roll out of AEDs (defibrillators) to independent dental practices in Scotland providing NHS GDS and advised that further guidance in the form of a FAQs document would be issued in August.

Action

2. NHS Boards are asked note the attached FAQs and to **urgently** issue the FAQs document to all dentists on their dental list.

Yours sincerely

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Chief Dental Officer

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Addresses

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Automatic External Defibrillators (AEDs) in Dental Practice FAQs

General

1. *Why must I have an AED (defibrillator)?*

All dental professionals should consider the use of a defibrillator to be an integral component of basic life support. Guidance on emergency drugs and equipment in primary dental care, which will mandate the inclusion of a defibrillator in NHS dental practices in Scotland, will follow.

2. *Who owns the defibrillator?*

The defibrillator will be owned by the practice.

3. *Who is responsible for the maintenance of the defibrillator?*

The practice will have responsibility for the on-going care and maintenance of the device. Pads need replaced in line with the expiry date which is clearly marked on them or after use. A defibrillator battery can deliver up to 300 shocks or last 4 years, whichever is soonest, before requiring replacement.

4. *Who will be responsible for paying for new batteries and pads if the defibrillator is used?*

The practice will also be responsible for this.

Training

5. *Will training be provided on the use of the defibrillator?*

All dental practice teams are required to regularly update their basic life-support skills. They are well placed to use these skills in using a defibrillator if called upon, in the dental practice, or elsewhere if required. Modern defibrillators are designed with minimal or no training needed.

The contractor supplying defibrillators as part of this exercise has arranged for awareness seminars during October. There will be a series of seminars at each event lasting approximately one hour. Dental practices will have the opportunity to nominate a member of staff to attend a seminar.

The intention is that the seminars will be held in Aberdeen, Dumfries, Livingston, Glasgow, Inverness and Perth. For more information and to express an interest in attending one of these sessions please contact James Lang from Laerdal directly by e-mail on james.lang@laerdal.co.uk. Also these sessions are designed for the Phillips HeartStart HS1 model of AEDs only.

An online resource tool will also be made available. The web address will be notified to practices once the tool is available.

Protocols – Community use

6. *What does mapping on to the Scottish Ambulance Service (SAS) control system mean?*

It is a condition of this scheme, either through receiving a defibrillator or receiving some recompense, that practices will be mapped on to the SAS control system and that they will display the recognised defibrillator sign in the practice window. This will allow the Scottish Ambulance Service to identify the availability of the defibrillator in the event of a cardiac arrest call in the local area.

7. *How do I notify SAS of any changes to my mapping information?*

Should the arrangements within your practice change, you will be required to notify SAS. Regional contacts numbers for SAS will follow.

8. *How will an emergency be dealt with?*

Once the practice defibrillator is mapped to the Scottish Ambulance Service (SAS), this means that in the event of an emergency, the practice will receive a call from SAS to attend an emergency within their locality.

The expectation is that a dental professional will attend the emergency until the emergency services arrive.

9. *What should I do after the emergency services arrive?*

The dental professional is acting in a first-responder capacity. Once the emergency services arrive the dental professional may step down. The SAS will not require the use of the defibrillator. Ambulances are equipped with their own, more advanced, defibrillators.

10. *Can members of the public use the defibrillator?*

It is possible that a member of the public may present at the practice requesting assistance in dealing with a perceived emergency in the practice locality.

In this eventuality we would expect the dental professional to attend the incident. Dental professionals are required to keep their resuscitation skills up to date, so it would be more appropriate for a dentist or member of staff to attend the scene of a possible emergency.

It should be stressed that an AED can be used safely even without training and its use should not be limited to those who have undergone training.

11. *Must a dental professional leave a patient that they are treating to attend an emergency?*

The GDC standards documents states that a dental professional must “ensure that your conduct, both at work and in your personal life, justifies patients’ trust in you and the public’s trust in the dental profession.” In the rare event of a cardiac arrest, it would be expected that a dental professional would seek to help save someone’s life.

Using Defibrillators – Good Practice

12. *What additional items does the practice need to keep with the defibrillator?*

The practice will also need to provide scissors, a razor and swabs in order to gain access to and prepare the patient's chest for the defibrillator pads if required.

13. *Can I accidentally shock myself or a bystander when using a defibrillator?*

A defibrillator will give a clear command for people to stand clear of the patient prior to administering a shock in order to minimise the risk of shocking bystanders.

14. *Can you use a defibrillator if the patient is wet?*

You should dry the patient's chest so that the adhesive defibrillator pads will stick and take particular care to ensure that no one is touching the victim when a shock is delivered.

15. *Can a defibrillator be used on someone with a pacemaker?*

In a cardiac arrest situation where a patient needs external defibrillation, effective measures to try to restore life take priority over concerns regarding any implanted device such as a pacemaker. Current resuscitation guidelines should be followed.

16. *Can a defibrillator be used on someone receiving supplementary oxygen?*

If supplemental oxygen is being delivered by a face mask, remove the face mask and place it at least one metre away before delivering a shock. Do not allow this to delay shock delivery.

17. *How should the defibrillator be stored?*

The defibrillator should be stored in a safe place, preferably alongside other emergency equipment.

Use of Defibrillators on Children

18. *Can a defibrillator be used on a child aged between 1 and 8 years old?*

Special paediatric pads, that attenuate the current delivered during defibrillation, should be used in children aged between 1 and 8 years. Standard adult-sized pads should be used if paediatric pads are unavailable. Standard defibrillator pads are suitable for use in children older than 8 years.

19. *Can a defibrillator be used on a child under the age of 1 year old?*

The use of a defibrillator is not recommended in children aged less than 1 year.

Indemnity

20. *Will my indemnity provider cover me and my staff if we use the defibrillator?*

We have been in contact with two large indemnity organisations in Scotland and they have suggested that dental professionals who are indemnified will be covered for attending an incident outwith the practice and using the defibrillator. Dental professionals should confirm this position with their own indemnity provider.

Further Information

21. *Where can I find further information about the use of defibrillators?*

Further information can be found at:

<https://www.resus.org.uk/pages/aed.pdf>.