

SB2483

Automated External
Defibrillators
EDU, WAM

Date: 02/10/2012

Committee: Senate Education

Department: Education

Person Testifying: Kathryn S. Matayoshi, Superintendent of Education

Title of Bill: SB 2483 RELATING TO EDUCATION. Education; Automated External Defibrillators

Purpose of Bill: Requires every public school, public charter school, private school, and the University of Hawaii to have one or more fully automated external defibrillators (AED) on the site of every sporting event and requires the trainers and teachers at each school to be trained and certified on the use of AED's

Department's Position:

The Department of Education (Department) appreciates the overall concept of this bill as it includes initiatives that we are currently implementing, but we are concerned about the cost and other operational impacts generated by this proposal. The Department currently has automated external defibrillators (AEDs) in 43 high school athletic departments via a grant from the Hawaii Medical Service Association (HMSA) in 2006. There are also schools that may have purchased AEDs or receive AEDs through other grant programs. There are, however, schools without AEDs.

If properly funded, the Department will work to ensure that the AEDs are fully functioning and properly maintained, including periodic replacement of batteries and pads, and that persons are trained on the use and maintenance of AEDs. We believe the requirement that every teacher be trained and certified in the use of AEDs is too far reaching and respectfully request that this requirement be deleted from the bill.



Heart Disease and Stroke. You're the Cure.

Testimony Supporting the Intent of SB 2483, “Relating to Education”

The American Heart Association supports the intent of SB 2483, however it urges caution in mandating the use of automated external defibrillators (AEDs) in schools.

To determine the need for an AED program at any location, the AHA’s Emergency Cardiovascular Care Guidelines 2000 recommended consideration of lay rescuer AED program implementation in locations with at least one of the following characteristics:

1. The frequency of sudden cardiac arrest (SCA) events is such that there is a reasonable probability of AED use within 5 years of rescuer training and AED placement. This probability is calculated on the basis of 1 cardiac arrest known to have occurred at the site within the last 5 years, or the probability can be estimated on the basis of population demographics; or
2. There are children attending school or adults working at the school who are thought to be at high risk for SCA (eg, children with conditions such as congenital heart disease and a history of abnormal heart rhythms, children with long-QT syndrome, children with cardiomyopathy, adults or children who have had heart transplants, adults with a history of heart disease; etc); or
3. An EMS call-to-shock interval of <5 minutes cannot be reliably achieved with conventional EMS services and a collapse-to-shock interval of <5 minutes can be reliably achieved (in >90% of cases) by training and equipping laypersons to function as first responders by recognizing cardiac arrest, phoning 9-1-1 (or other appropriate emergency response number), starting CPR, and attaching/operating an AED.

When funds are limited, but there is a desire to establish some AED school programs, priority should be given to establishing programs in large schools, schools used for community gatherings, schools at the greatest distance from EMS response, and schools attended by the largest number of adolescents and adults (eg, high schools and trade schools).

The 5 components of an AED program are:

1. Medical/healthcare provider oversight
2. Appropriate training of anticipated rescuers in CPR and use of the AED
3. Coordination with the EMS system
4. Appropriate device maintenance
5. An ongoing quality improvement program to monitor training and evaluate response with each use of the device

If an AED program is established at the school, the AED should be placed in a central location that is accessible at all times and ideally no more than a 1- to 1 1/2-minute walk from any location. The device should be secure and located near a telephone (eg, near the school office, library, or gymnasium) so that a rescuer can activate the EMS system and get the AED at the same time. The EMS system should be notified of the establishment of the AED program, and the emergency medical dispatcher should know the specific type of AED at the school and where it is located. Several staff members should be trained in both CPR and use of the AED.

School Emergency Response Plans

The AHA highly recommends that, regardless of the implementation of an AED program, every school should

establish an Emergency Response Plan. The goal of a school emergency response plan is to ensure an organized, efficient, and effective response to life-threatening emergencies. The Medical Emergency Response Plan for Schools should strengthen each link in the Chain of Survival. It should include focuses on risk reduction, and training and equipment for first aid and CPR. CPR, when administered to a cardiac arrest victim within a short time of the onset of arrest, can improve the chances of survival by two to three times when combined with application of an AED. The AHA recommends that CPR be a high school graduation requirement. In Hawaii, a policy requiring high school CPR training would result in over 50,000 additional people trained in CPR in the state every 4 years. Under new CPR guidelines released by the AHA in 2010, students can be trained in approximately 20 minutes and at an estimated cost of \$1 per student. Survival rates of 50% to 74% have been reported when adult victims of ventricular fibrillation sudden cardiac arrest collapse in front of witnesses and receive immediate bystander CPR plus defibrillation within 3 to 5 minutes of collapse.

The other cautionary note is that mandated programs, especially if unfunded, tend to lack commitment of leadership and become less effective as they are not maintained. Unfunded legislative mandates, particularly those that address the purchase of equipment rather than programs of planned response, will limit effectiveness and place a substantial burden on already taxed school budgets. Unfunded mandates for emergency care in schools are likely to be met with minimal effort that does not include the development of planned and practiced responses and the training and retraining that are most likely to save lives. Policymakers must work with schools to ensure that long-term solutions are enacted to be sure that programs are sustained indefinitely.

State policymakers should support an immediate response to life-threatening medical emergencies with the following priorities for policy and appropriations:

1. Establishing an efficient and effective campus-wide communication system for each school
2. Developing a coordinated and practiced medical emergency response plan with the school nurses, physicians, athletic trainers, and the EMS system, with appropriate evaluation and quality improvement
3. Reducing the risk of life-threatening emergencies by identifying students at risk and ensuring that each has an individual emergency care plan and by reducing the risk of injury and disease triggers at the school
4. Training and equipping teachers, staff, and students to provide CPR and first aid
5. Establishing an AED program in those schools with a documented need.

Because injuries are the most common life-threatening emergencies encountered in children and adolescents in or out of schools, teachers, school nurses and physicians, and athletic trainers should know the general principles of first aid (eg, how to ensure scene safety and assess responsiveness, how to use personal protective equipment when in contact with blood or other body fluids, when and how to phone the EMS system, and when it is acceptable to move a victim). In addition, first aid rescuers must be able to control bleeding, recognize and treat shock, immobilize the spine, warm hypothermia victims, cool heatstroke victims, detect and treat hypoglycemia, support the airway, and provide CPR and use an AED when needed. These skills are taught in 1-day first aid courses that teach first aid, CPR, and AED use.

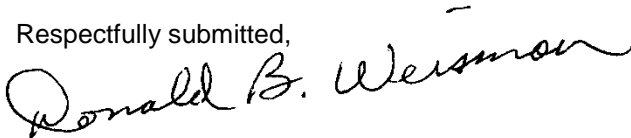
While there may be some value in requiring AEDs to be present at all school sporting events, the reality is the AED is more likely to be used in schools on faculty members. In children and young adults, injuries cause more childhood deaths than all other diseases combined. Unless an injury involves *commotio cordis* (a sudden blow to the chest), injury deaths typically are associated with difficulty breathing or development of shock (low blood pressure) due to blood loss. In such cases, the heart often slows and then stops so that the cardiac arrest is a secondary (rather than a primary or sudden) event. Victims of injuries require early activation of EMS, support of breathing, and control of hemorrhage and are unlikely to need treatment with a defibrillator. There are estimated to be 5 to 10 cases of *commotio cordis* nationwide each year for victims of all ages. There are estimated to be 25 to 50 episodes of sudden cardiac arrest nationwide among all high school athletes per year. However, sudden cardiac arrest is a leading cause of death for adults 35-40 years of age and is the most common cause of death for those over the age of 45. The risk of sudden cardiac arrest in adults is 100 to 200 times the estimated risk in children and adolescents and those under age 35. An estimated 300,000 EMS-treated out of hospital sudden cardiac arrest occur annually in the U.S., and less than one-third of those victims receive bystander CPR.

Conclusion

On any given day, as much as 20% of the combined US adult and child population can be found in schools. Life-threatening emergencies in schools are relatively uncommon, but when they do occur, they require a planned, practiced and efficient response with provision of first aid and possible CPR and use of an AED. To maximize survival from a life-threatening emergency, schools must develop a medical emergency response plan designed to provide appropriate therapy within the first minutes of the emergency,. The medical emergency response plan includes (1) creation of an effective and efficient campus-wide communication system; (2) coordination, practice, and evaluation of a response plan with the school nurse and physician, athletic trainer, and local EMS agency; (3) risk reduction; (4) training in and equipment for CPR and first aide for the school nurse, athletic trainers, and teachers and CPR training for students; and (5) in schools with a documented need, establishment of an AED program.

Mahalo for this opportunity to testify.

Respectfully submitted,

A handwritten signature in black ink that reads "Donald B. Weisman". The signature is written in a cursive style with a horizontal line above the name.

Donald B. Weisman
Hawaii Government Relations/Mission:Lifeline Director



HAWAI'I EDUCATIONAL POLICY CENTER
Informing the Education Community

Written Testimony
presented before the
Senate Committee on Education
Friday, February 10, 2012 at 1:15 p.m. Rm 225
by
Donald B. Young, Director
Hawai'i Educational Policy Center

SB 2483 RELATING TO EDUCATION

Testimony in opposition.

Chair Tokuda, Vice Chair Kidani, and Members of the Committee on Education;

SB 2483 requires every public school, public charter school, private school, and the University of Hawai'i to have one or more fully automated external defibrillators (AED) on the site of every sporting event and requires the trainers and teachers at each school to be trained and certified on the use of AEDs.

While well meaning, this bill has a number of serious problems. Among these are:

1. The cost of the defibrillators and the training may be prohibitive. This should be a separate appropriation for every school in Hawai'i.
2. It is unlikely that even if there were an appropriation for HIDOE schools, there would not be a similar increase in the overall funds for charters.
3. The HSTA collective bargaining agreement explicitly states that teachers are not to be involved in administering certain medications or giving shots to kids. AEDs are similar. Implementing SB 2483 requirements may expose the state to law suits.
4. When the Red Cross trains people in CPR, they do NOT certify that someone is competent, only that they have gone through a course. They do not assert that all course completers are prepared to provide competent CPR. It is one thing to say that the HIDOE shall arrange for defibrillator training once a year, and that a representative of each school should attend. It is another to believe that training results in certification.
5. Charter schools often do not have trained nurses aides. Funding for nurses aides is not provided for charter schools. Therefore, the following language is impractical.

Every trainer and teacher at each charter school is trained and certified at all times in the use of automated external defibrillators.

Thank you for the opportunity to testify on SB 2483.

Erin Conner

From: mailinglist@capitol.hawaii.gov
Sent: Thursday, February 09, 2012 8:33 AM
To: EDU Testimony
Cc: earl.yamaguchi@redcross.org
Subject: Testimony for SB2483 on 2/10/2012 1:15:00 PM
Attachments: AED School Saves.doc

Testimony for EDU 2/10/2012 1:15:00 PM SB2483

Conference room: 225
Testifier position: Support
Testifier will be present: No
Submitted by: Earl Yamaguchi
Organization: American Red Cross
E-mail: earl.yamaguchi@redcross.org
Submitted on: 2/9/2012

Comments:

This is an update on the previous file I submitted last night. I've added an additional testimony to the file that was on MSNBC's Today Show.

Thank you!



Published on *Sudden Cardiac Arrest Foundation* (<http://www.sca-aware.org/>)
[Home](#) > School Nurse Saves Student's Life

School Nurse Saves Student's Life

By *SCAFoundation*

Created 04/01/2010 - 11:00pm

Posted April 1st, 2010 by SCAFoundation

- [School Saves](#) [1]

BISMARCK, IL — Fifteen minutes before dismissal at Bismarck-Henning Junior High School quickly became the longest minutes of Josie Siddens' life.

Siddens, the nurse for the school district, was returning to her office March 25 when a student came running up, telling her 12-year-old Ashton Norwell was screaming in the gymnasium.

Norwell was being led to Siddens' office because he felt sick when he began to cry out in pain. But by the time Siddens — who was only seconds from the gymnasium — arrived, the boy was unresponsive and not breathing.

From there, Siddens went into action, moving the boy to the gym floor with the help of a gym teacher while Principal Rusty Campbell called 911. Another gym teacher stepped into the hallway to retrieve an automated external defibrillator hanging on the wall.

Talking about the scene Thursday, Siddens admitted a lot of it was a blur.

"I was looking at (the scene) saying 'This is not happening here,'" said Siddens, a part-time emergency room nurse at Provena United Samaritans Medical Center. "From there it was just gut reaction."

Siddens said she used the defibrillator immediately and then began CPR. She repeated the process, but was getting no response from Ashton, who had turned blue.

"I was scared the entire time, but from the second shock on I was saying 'C'mon, buddy. C'mon, Ashton,'" Siddens recounted.

Suddenly, following the third shock from the defibrillator, Ashton drew a quick gasp of air. Oxygen provided by Bismarck Community Ambulance helped bring him around and by the time Medix Ambulance personnel arrived, the lifeless boy was cracking jokes at his school nurse.

“There’s never been a better sound in my life than hearing him talk to me,” she said. “It was just fantastic.”

It may have only been a few minutes, but the scene was emotionally draining for Siddens.

“I’m fine during the emergency, I can handle myself well during the emergency,” she said. “But immediately after the emergency, not so well. Lots of people held me up after that.”

The school was aware Ashton had dealt with heart problems since he was an infant. But nothing like this had ever taken place before.

As a full-time school nurse, Siddens was thinking ahead during the incident. She requested Medix ambulance for medication in case Ashton couldn’t be revived with the defibrillator.

Officials at Bismarck-Henning Junior High said the scene a week ago underscores the importance of school nurses.

“Her knowledge in being a trained nurse played a huge role in it,” Campbell said. “There’s a tremendous amount of training time in preparing herself for this kind of thing.

“This is all the more reason to keep nursing on staff,” he added. “You hope you never have this situation, but if you do you want people who know how to do things.”

According to a statement issued in October by the National Association of School Nurses, more than 50 percent of public schools in the United States do not have a full time registered nurse. Wide disparities exist from state to state, between urban and rural schools and within school districts.

National Association of School Nurses figures from 2009 rank Illinois in the bottom 10 of states with a ratio of one school nurse per 2,023 students. Indiana is ranked 20th in the U.S. with one school nurse for every 909 students.

Siddens said she knows a lot of other school nurses who have gotten pink slips. She doesn’t see how a district can go without a school nurse.

"I hate for something like this to awaken everybody, but these things can happen," she said. "You need people trained for that in the building. And not just trained, but that can react."

SOURCE: The Commercial News, Danville IL

- [School Saves](#)

Source URL: <http://www.sca-aware.org/schools/school-saves/school-nurse-saves-students-life>

Links:

[1] <http://www.sca-aware.org/schools/school-saves>



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[Home](#) > High School Student Saved by AED

High School Student Saved by AED

By *SCAFoundation*

Created 01/04/2012 - 12:00am

Posted January 4th, 2012 by SCAFoundation

- [School News](#) [1]

RICHLAND, WA -- Jeremy Brewer doesn't remember much about the day he collapsed, only that it started out just like any other. "We were walking down the street," he says. "Having fun, making jokes. And we came down by the gym, and when we walked up the steps, I collapsed."

It was lunchtime at the school. Students were milling around everywhere. But it was Jeremy's two friends who knew immediately something wasn't right. "My friend Kale ran and got help, and my friend Joe stayed with me," Brewer recalls. But his memory ends there.

It's officials at the school who fill in gaps from there, saying the next two minutes after he collapsed literally saved his life. It was the football coach, who grabbed the

defibrillator off the wall in the gym and rushed to Jeremy's side--a device the school had just acquired in September.

"When he went down, people were notified within seconds," says Richland High School Principal Tim Praino. "The first responders were giving CPR within that first minute, and the AED was used a minute later. The timing was just remarkable."

Of course, it all came as a surprise to Jeremy's parents, John and Kathy Brewer, who were notified of what happened with a phone call from the school. John Brewer remembers the conversation exactly. "He basically said my son had collapsed and they had just got his heart started up, and I'm like, what?!" And when the Brewers arrived at the hospital, they learned the ordeal was far from over. "They said they had to send him to Seattle," recalls Kathy Brewer. "It scared us to death." It's still unclear exactly what caused Jeremy's heart to stop. He'll continue testing at Seattle Children's Hospital. But the teen's father says, all he knows, is that his son was in exactly the right place at the right time when it happened.

"Teachers, staff, and students at the school really went above and beyond to save Jeremy's life." Believe it or not, Jeremy only missed two class periods through all of this, because it happened right before the holiday break. And this week, when it was time to get back to school, Jeremy was right back in class, ready to move on.

SOURCE: KEPRTV

- [School News](#)

Source URL: <http://www.sca-aware.org/schools/school-news/high-school-student-saved-by-aed>

Links:

[1] <http://www.sca-aware.org/schools/school-news>



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Family Wants AEDs at All Schools

By *SCAFoundation*
Created 02/01/2012 - 12:00am
Posted February 1st, 2012 by SCAFoundation

- School News [1]

SAN DIEGO--A piece of equipment saved the life of an El Cajon high school student, and now his family is pushing for all schools to have an automated external defibrillator (AED) on campus.

Last September, Jacob Huerta was in his English class at Granite Hills High School when he suffered a cardiac arrest. He was only 15 years old.

"The nurse came with an AED and the next time I woke up, I was in the hospital," said Jacob, who also suffers from seizures.

After the incident on campus, he was in the hospital for a month. Doctors eventually implanted a defibrillator/pacemaker to regulate his heart, something very unusual for someone so young.

"It's always frightening ... to know you're going to go to the hospital, and not know the conclusion when you get there," said Jacob's father, Richard Huerta.

Every school in the Grossmont Union High School District has an AED on campus, but it is not required by California law.

Richard Huerta does not want to think what could have happened if an AED was not nearby.

"Jacob probably wouldn't be sitting here right now," he said.

Project Heart Beat, a local nonprofit organization, has been working with the Huertas and is encouraging every school to have an AED. The equipment is now cutting-edge, giving the user step-by-step instructions.

"A person's chance of survival has greatly increased sometimes up to 75 percent. Unfortunately, when there's no AED available, you're down to about 2 percent," said paramedic Dan Beebe, Project Heart Beat's training center coordinator.

The principal of Granite Hills High said the school has only used the AED once -- on Jacob -- since the school bought them several years ago.

The Huertas said once is enough to make it worth it.

According to Beebe, an AED costs around \$2,000.

Find out more about San Diego Project Heart Beat by going to <http://www.sdprojectheartbeat.com/> [2].

SOURCE: San Diego Union Tribune

- [School News](#)

Source URL: <http://www.sca-aware.org/schools/school-news/family-wants-aeds-at-all-schools>

Links:

[1] <http://www.sca-aware.org/schools/school-news>

[2] <http://www.sdprojectheartbeat.com>



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[Home](#) > Montana High School Student Brought Back to Life by Staff

Montana High School Student Brought Back to Life by Staff

By *SCAFoundation*

Created 01/05/2012 - 12:00am

Posted January 5th, 2012 by SCAFoundation

- [School News](#) [1]

COLUMBIA FALLS, Mont.- A Columbia Falls High School student collapsed after his heart failed earlier this week, but some quick action brought him back to life.

The 16-year-old student is now recovering in the Intensive Care Unit at Kalispell Regional Medical Center after collapsing during gym class at around 8:30 a.m. Wednesday.

School staff began performing CPR to save his life and then several people, including the athletic trainer and nurse, began using a defibrillator to shock the student and get him breathing.

Three Rivers EMS was on the scene within four minutes and by the time emergency responders got to the student he had a pulse and was breathing on his own.

The student was then taken by ambulance to Kalispell Regional Medical Center and placed in ICU.

Kalispell public schools got more than \$4,000 from the Plum Creek Foundation and Flathead Electric back in 2009 to buy automated external defibrillators.

The issue got some major attention when a Bigfork High School senior died after going into cardiac arrest during football practice in August of 2007.

One of his friends raised enough money to get two defibrillators and training on the device for Bigfork High School.

SOURCE: KPAX.com

- [School News](#)

Source URL: <http://www.sca-aware.org/schools/school-news/montana-high-school-student-brought-back-to-life-by-staff>

Links:

[1] <http://www.sca-aware.org/schools/school-news>



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[Home](#) > An Abrupt End to the Ball Game

An Abrupt End to the Ball Game

By *SCAFoundation*

Created 02/18/2009 - 5:56pm

Posted February 18th, 2009 by SCAFoundation

- School Saves [1]

Scotty was on 2nd base, Chuck was pitching, it was 2nd innings of the last game of the season.

“Chuck looks around at the field, makes sure everybody is ready. He turns around to throw the next pitch and falls straight onto his back,” Scotty recalled. Chuck didn’t move and hadn’t called out. He just went down. Everyone ran over to him, and Scotty saw he wasn’t breathing properly. Scotty Jones knew CPR, he’d been trained every year at school. **The Westminster Schools**, where he works as a music teacher, has a policy of annual CPR training and refresher courses.*

A fellow ran out of the scorekeeper’s box with an AED in his hands. When he got to Chuck’s side, he asked “Does anyone know how to use this thing?” Scotty did. He ripped open Chuck’s shirt and applied the pads. He couldn’t believe there was something wrong with CHucks; heart. He suspected a seizure. The device announced “shock advised”. Scotty pushed the button and then watched in horror as Chuck stopped breathing altogether.

Scotty began CPR immediately, following the training he knew so well.

“You know you can do it,” Scotty said confidently. “You’ve been trained to do this, and if not you, then who?” Scotty asked himself. He was also thinking that the ambulance better get there quickly. “I knew you just keep going till the paramedics get there. You just don’t stop!” Scotty said. “This went on for a while and then the machine went ‘Stand by, analyzing’ and everyone’s watching. It says ‘shock advised’ again, so I hit the button again,” Scotty said. He also resumed mouth-to-mouth and then noticed a fire truck pulling up next to the field.

Just as the paramedics got to him, Chuck began breathing on his own. “He wanted to get up, ‘let’s finish the game’ type thing,” Scotty said. Chuck was disoriented but obviously okay. He was taken to the hospital and the team was left wondering. Chuck was a father of four, he was the coach of the team. Scotty knew Suzy and the kids. It had all happened so fast.

“At the hospital was the first time I heard the term Sudden Cardiac Death,” Scotty said. “The doctor said his arteries were fine, it was the electrical part that just stopped.” If it wasn’t for the CPR and the AED, the doctor told Chuck, he would not have made it.

“He’s a big construction guy, always playing [sports],” Scotty said, “but this was serious.”

The good news is that Chuck returned to the ball game—the following year! He also had an ICD implanted in his chest to protect him from any future episodes of sudden cardiac arrest.

*Dr Sam Schatten founded the **CLEAR Coalition**, whose mission is to promote CPR/AED training to teenagers and adults through high schools, churches, synagogues, businesses and local health fairs as well as to encourage widespread AED program implementation throughout Georgia. The CLEAR Coalition was instrumental in convincing Governor Sonny Perdue to bring Georgia to the top of the list for States supporting AED access and CPR training in public high schools, by signing HB1031 into law.

- School Saves

Source URL: <http://www.sca-aware.org/schools/school-saves/an-abrupt-end-to-the-ball-game>

Links:

[1] <http://www.sca-aware.org/schools/school-saves>

Quick-thinking teachers revive girl, 12, after collapse

She could be dead or brain-damaged if not for speedy use of defibrillator

By Michael Inbar

TODAY.com contributor

updated 10/10/2011 9:53:01 AM ET

A Dallas-area seventh-grader survived a literally heart-stopping crisis virtually unscathed thanks to two quick-thinking, well-trained schoolteachers.

Kristen Goodgion and Brent Reese, teachers at Maus Middle School in Frisco, Texas, rushed within seconds to the aid of 12-year-old Kylee Shea after she crumpled in a school hallway Sept. 26. While Reese performed CPR, Goodgion fetched the school's automatic external defibrillator (AED). They used the machine's paddles to kick-start Kylee's heart in a dramatic rescue caught on the school's surveillance cameras.

Doctors estimate that without the rapid response of Goodgion and Reese and the use of the AED, Kylee would have had just a 3 percent chance of surviving her episode of heart arrhythmia, and only a 1 percent chance of surviving without brain damage.

Goodgion and Reese are now being hailed as heroes. Appearing on TODAY with Kylee and her family Monday, Goodgion told Matt Lauer she knows firsthand the benefits of the school having its teachers trained in CPR and use of the AED.

“(It’s) extremely important,” she said. “We get trained every two years, and that literally is what we fell back on. It kept us calm; we had something to (fall) back on, to know what to do.”

‘It told us to shock’

Kylee had no prior history of heart trouble, but was walking to class when she felt short of breath. “I sat down, then I fell over, and I don’t remember anything after that,” she told NBC’s Lilia Luciano.

Goodgion, nearby, was alerted by alarmed students. Within seconds, Kylee began convulsing and turning blue. “Right away, I knew I had to go get help,” Goodgion told NBC News.

Reese arrived on the scene just moments later. He told Lauer while Kylee’s heart had stopped, his was racing.

“When I saw Kylee on the floor, just a million things are going through (my) head,” he said. “You just kind of go into shell shock, and you kind of just reboot and we went back to the training.”

As the video vividly shows, Goodgion arrived at Kylee’s side with the AED. While the teachers were trained in its use, actually deploying the paddles on a living subject was a new experience. They hooked the AED up to Kylee and it began reading her vital signs.



TODAY

Surveillance video shows teacher Brent Reese working to revive 12-year-old Kylee Shea, collapsed on the the floor. Kristen Goodgion stands at right.

“It told us to shock, and we both looked at each other in shock, like, ‘This is really what we need to do right now?’ ” Goodgion recalled.

Reese was only too aware that if Kylee’s heart was actually still beating, the shock paddles could do just the opposite of their intent — kill her.

“In the video, I reach out to touch the (shock) button, and I pull back just a little bit, thinking those exact thoughts,” he told Lauer.

Nonetheless, the pair shocked Kylee’s heart. After a second attempt, the procedure appeared to work, with the AED reading “no shock required.”

“She started groaning and we’re still thinking, ‘Did we do this right?’ ” Goodgion said. “(But) it worked.”

A 12-year-old with a pacemaker

Emergency personnel arrived and Kylee was airlifted to a local hospital. Doctors determined the 12-year-old had an undetected heart condition, and she was implanted with a pacemaker. She showed Lauer the scar from the procedure on TODAY.

Doctors told the family that if Goodgion and Reese hadn’t been trained and reacted as quickly as they did, Kylee would likely have been lost. And it was no less fortunate that the the state of Texas mandates that AEDs be placed in all state schools.

Grateful mom Sheryl Shea told Lauer she believes that rule should be universal.

“I think it should be a nationwide mandate,” she said. “I think every state should be required to have these in schools and public places.”

Goodgion and Reese say they now feel a special bond with Kylee — Reese jokes that Kylee, as she grows older, won’t be allowed to date without his permission.

Lauer suggested that every school should be required to have Reese and Goodgion as well as an AED.

Kylee’s dad, Mike Shea, reached across to pat the hands of his daughter’s saviors. “They’re stuck with us, (but) thank you!”