

CARDIAC EMERGENCY RESPONSE DRILL – DRILL SUMMARY CHECKLIST

**Health Services Department
Lincoln Public Schools**

School Name: _____ Date: _____

Brief description of drill:

Location of Victim: _____

Time Victim went down to found (min/sec): _____ / _____

Time from Victim found to AED pads attached (min/sec): _____ / _____

Goal: Drill AED attached within 3 minutes.

YES	NO	N/A	
			Communication about emergency is clear and with urgency?
			Scene checked for safety?
			Victim checked for responsiveness?
			Someone directed to call 911? Who?
			Staff sent to wait for EMS? Who?
			CPR started and done according to guidelines?
			AED at scene within 3 minutes?
			AED pads applied immediately without any pause in Chest Compressions?
			Team communicated with each other throughout the drill?
			Team role were clear and completed smoothly?

Post-Drill Review:

What did the Cardiac Emergency Team do well?

What could the Cardiac Emergency Team improve?

Suggestions for the improvement?