

**SENATE . . . . . No. 1489****The Commonwealth of Massachusetts**

PRESENTED BY:

***Michael O. Moore***

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to improving outcomes for sudden cardiac arrest.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Michael O. Moore</i>	<i>Second Worcester</i>	
<i>Jack Patrick Lewis</i>	<i>7th Middlesex</i>	<i>2/24/2021</i>
<i>Angelo J. Puppolo, Jr.</i>	<i>12th Hampden</i>	<i>2/24/2021</i>
<i>Joan B. Lovely</i>	<i>Second Essex</i>	<i>2/24/2021</i>
<i>Carmine Lawrence Gentile</i>	<i>13th Middlesex</i>	<i>2/25/2021</i>
<i>Michael D. Brady</i>	<i>Second Plymouth and Bristol</i>	<i>3/3/2021</i>
<i>Adam J. Scanlon</i>	<i>14th Bristol</i>	<i>3/3/2021</i>
<i>Patrick M. O'Connor</i>	<i>Plymouth and Norfolk</i>	<i>3/8/2021</i>
<i>Sal N. DiDomenico</i>	<i>Middlesex and Suffolk</i>	<i>3/8/2021</i>
<i>Walter F. Timilty</i>	<i>Norfolk, Bristol and Plymouth</i>	<i>3/11/2021</i>
<i>Mary S. Keefe</i>	<i>15th Worcester</i>	<i>3/22/2021</i>
<i>Joanne M. Comerford</i>	<i>Hampshire, Franklin and Worcester</i>	<i>4/15/2021</i>
<i>Bruce E. Tarr</i>	<i>First Essex and Middlesex</i>	<i>6/9/2021</i>
<i>Kimberly N. Ferguson</i>	<i>1st Worcester</i>	<i>6/28/2021</i>
<i>Harriette L. Chandler</i>	<i>First Worcester</i>	<i>6/28/2021</i>
<i>David Henry Argosky LeBoeuf</i>	<i>17th Worcester</i>	<i>8/16/2021</i>

# SENATE . . . . . No. 1489

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By Mr. Moore, a petition (accompanied by bill, Senate, No. 1489) of Michael O. Moore, Jack Patrick Lewis, Angelo J. Puppolo, Jr., Joan B. Lovely and other members of the General Court for legislation to improve outcomes for sudden cardiac arrest. Public Health.

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[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 1313 OF 2019-2020.]

## The Commonwealth of Massachusetts

\_\_\_\_\_  
In the One Hundred and Ninety-Second General Court  
(2021-2022)  
\_\_\_\_\_

An Act relative to improving outcomes for sudden cardiac arrest.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1           SECTION 1. Subsection (b) of section 18B of chapter 6A, as so appearing, is hereby  
2 amended by striking out the figure "11" and inserting in place thereof the following figure:-  
3 "13".

4           SECTION 2. Said subsection (b) of said section 18B of said chapter 6A, as so appearing,  
5 is hereby further amended by inserting after the words "Massachusetts Ambulance Association"  
6 the following words:- , 1 of whom shall be a physician with a specialty in emergency medicine, 1  
7 of whom shall have expertise in regional EMS.

8           SECTION 3. Subsection (g) of said section 18B of said chapter 6A, as so appearing, is  
9 hereby amended by adding the following sentence:-

The commission shall establish a procedure for monitoring adherence by identified telecommunicators and the governing bodies of identified telecommunicators to the requirements set forth in above subsection and may adjust state grant or shared revenue amounts based on failure to comply with the requirements of this section.

SECTION 4. (a) As used in this section, the following words shall, unless the context requires otherwise, have the following meanings:-

“Emergency medical dispatcher”, a professional telecommunicator, tasked with the gathering of information related to medical emergencies, the provision of assistance and instructions by voice, prior to the arrival of emergency medical services, and the dispatching and support of EMS resources responding to an emergency call.

“Telecommunicator”, a communications worker who receives and transmits information to coordinate operations of other personnel and vehicles carrying out a service

Paragraph (3) of section 2 of chapter 111C, as appearing in the 2018 Official Edition, is hereby amended by adding the following clause:-

(iii) All 911 telecommunicators that provide dispatch for emergency medical conditions shall be required to be trained utilizing the most current nationally recognized emergency cardiovascular care guidelines, in high-quality Telephone-CPR. The instruction shall incorporate recognition protocols for out of hospital cardiac arrest, compression-only CPR instructions for callers, and continuous education.

SECTION 5. Section 12V ½ of chapter 112, as so appearing, is hereby amended by adding the following in 2 subsections:-

31 (d) Notwithstanding any general or special law to the contrary, an AED registry shall be  
32 established for the purpose of allowing local 911 telecommunicator to locate accessible AEDs.  
33 Any AED used in a public access defibrillation program shall register the device through the  
34 AED medical director.

35 (e) Notwithstanding any general or special law to the contrary, signage located  
36 throughout buildings shall clearly indicate AED locations.

37 SECTION 6. Notwithstanding any general or special law to the contrary, the department  
38 of public health shall include sudden cardiac arrest as a reportable disease.