Mission

Children’s Healthcare of Atlanta started Project S.A.V.E. in 2004. Its mission is to promote and facilitate prevention of sudden cardiac arrest (SCA) of children, adolescents and others in Georgia communities.

Primary prevention is achieved through:
• Use of the comprehensive pre-participation history and physical exam for student athletes
• Pediatric cardiac risk assessment for all children by primary care, emergency department and sports medicine providers
• Awareness of early warning signs and symptoms of pediatric heart conditions by primary care physicians, school nurses, coaches, physical education teachers, parents and others who work with children
• Prompt referral for further evaluation when risk conditions or warning signs are present

Secondary prevention is accomplished through:
• Education and consultation with communities on implementation of a comprehensive automated external defibrillator (AED) program in place during community-based activities
• Promotion of cardiopulmonary resuscitation (CPR) and AED education for staff, students, and citizens that includes prompt recognition of sudden cardiac arrest and timely emergency treatment

Project S.A.V.E.

S Sudden cardiac arrest
A Awareness
V Vision for prevention
E Education

Contact

Contact Richard Lamphier, Clinical Program Manager of Project S.A.V.E., at 404-785-7201 or richard.lamphier@choa.org for more information or to arrange a free consultation for your school or organization.

Project S.A.V.E. is an affiliate of Project ADAM, a program of Children’s Hospital of Wisconsin.

What is sudden cardiac arrest?

Sudden cardiac arrest (SCA) occurs when the heart stops functioning normally, preventing normal pumping and blood flow to the brain, heart and other vital organs.

On average

1,000 people experience SCA every day in the U.S.

three are kids triple survival rates more than thanks to bystander CPR and use of an automated external defibrillator (AED)
Primary prevention and awareness

Warning signs of possible heart risk in a student:
• Fainting or nearly fainting or seizure-like activity during or immediately after exercise, high emotions or being startled.
• Excessive, unexpected and unexplained fatigue or shortness of breath with exercise.
• Unusual chest pain or chest discomfort with exercise.
• Unexplained heart murmur or high blood pressure.
• Premature, unexplained death in a close relative younger than 50.
• Close relatives with certain conditions such as hypertrophic cardiomyopathy, dilated cardiomyopathy, long QT syndrome, Marfan syndrome or clinically important arrhythmias.

If any of these signs or family history is present, or if an adult witnesses these symptoms in a student, the student should be evaluated further by his primary care provider, with appropriate referral as indicated.

Project S.A.V.E. supports the use of the standardized pre-participation evaluation endorsed by the Georgia High School Association to identify student athletes at risk for SCA. Use of other screening techniques such as electrocardiogram (ECG) and echocardiogram should be at the discretion of the student’s healthcare provider, based on history and physical exam.

Secondary prevention: The American Heart Association chain of survival

Children, adolescents or adults in the community who experience a sudden collapse because of ventricular fibrillation can often be successfully treated after prompt recognition of the signs of SCA with early CPR, rapid defibrillation with an AED and early activation of emergency medical services (EMS). All are critical factors for the victim’s survival.

An AED is a device that looks for a shockable heart rhythm and delivers a shock only if needed. It is small, portable, automated and simple to operate. Voice prompts give instructions, and the machine will not shock someone who does not need to be shocked. Successful resuscitation depends on treatment with CPR and the AED within three to five minutes. Prompt SCA recognition, a first responder team with CPR skills and an AED in the community are critical to saving a life because emergency medical services will take longer to arrive.

A successful community emergency action plan

Purchasing an AED is only a small part of a successful program. The key elements of a good emergency action plan (EAP) are:
• An AED coordinator who will ensure up-to-date AED maintenance and training of first responder teams.
• A written plan that includes communication, response team training and practice, and actions to take after the device is used.
• AED maintenance check and documentation monthly or by manufacturer recommendations.
• A first-responder team of five to 10 people trained in CPR, use of the AED and the EAP.
• Community awareness of sudden cardiac arrest recognition, knowledge of the EAP and what a witness should do.
• AED practice drill at least annually.
• Communication with local EMS about the community’s program.

You can be a Project S.A.V.E. HeartSafe Community

Consultation
Our Project S.A.V.E. staff will provide free on-site or phone and written consultation regarding prevention of sudden cardiac death in your community setting. Communities who request this assistance will receive up-to-date information on:
• How to train staff, students and citizens to recognize SCA and be aware of emergency treatments to prevent death.
• Implementation of a comprehensive “best practice” AED program and EAP.

The program also can assist with CPR instructor training, community awareness, funding ideas and resources.

Recognition
Georgia communities can be recognized as HeartSafe after completing a checklist that demonstrates successful implementation of all of the important program elements. This comprehensive EAP may save the life of a student, a staff member, or a parent or visitor who experiences SCA. This EAP is also a template that can be used to respond to any medical emergency in the community setting.

Once recognized, the organization will receive a framed certificate of recognition and a letter to the district superintendent, head of school or community leader of your choice. In addition, if an AED is used in an emergency, Project S.A.V.E. will purchase or reimburse the organization for new AED pads.

Project S.A.V.E. organizations can contribute to critical public health research by reporting cardiac events that occur in the community to a national or statewide database. Increased awareness of sudden cardiac arrest and familiarity with CPR and the AED contribute to making the whole community more “heartsafe.” It is evident that putting this program in place in a community is truly lifesaving. Since the program’s inception, 48 lives have been saved in Georgia schools; 48 students and adults are alive today because their communities practiced and were prepared for this emergency.