

February 27, 2009

To: Public Health Committee

My name is Caitlin Collazo. I am the Certified Athletic Trainer at New Milford High School. In the fall of 2007 I was in my athletic training room preparing my athletes for the day's practices and competitions. At approximately 3 pm two of my field hockey athletes came running into my room in a panic. The only words they were able to speak were, "Help, he is bleeding, he is on the football field, he is not moving." I grabbed my medical kit, my AED (my high school provides me with my own as well as has two others on campus), and ran out to the football field.

When I came upon the scene there was a custodian laying face down at the foot of the line painting machine. He was unresponsive, cyanotic, and had aspirated. I rolled him over and checked for signs of life; there were none. At this point the certified athletic trainer who was assisting me with the day's activities came to help. I dialed 9-1-1 and once I had given all the information to the dispatcher we began CPR.

After one round of CPR we rechecked for signs of life. He was still not breathing and there was no pulse. At this point we attached the AED. The AED did a quick analysis then advised to shock. We shocked him once, and then began CPR again. The AED never advised another shock, but we still could not palpate a pulse nor was he breathing on his own so we continued CPR. By the time the paramedics arrived, about ten minutes from when the call went out to 9-1-1, his color had improved. When they loaded him into the ambulance the paramedics were just breathing for him and no compressions were being done as a weak pulse was detected. Unfortunately our custodian passed. It was determined that he was diagnosed with a clot in his lower leg a week before and it had traveled to his brain causing an aneurysm which ruptured causing his death.

It is my belief that AEDs are an essential need at schools. They have been a proven life saver in scenarios where CPR would not have been enough. AEDs should not be in schools just for the students and athletes who tend to be in good health but for the coaches, officials, parents, and staff that are there, who may have health risks such as in my personal experience. Also, my greatest fear as an athletic trainer working in a high school setting is the athlete that falls to commotio cordis. In this condition CPR is not enough, you need the stimulation that only an AED can give.

Also, for those schools in towns that do not have a hospital or only have a volunteer ambulance corps, precious minutes may tick away before someone with an AED arrives. This is the case in my job setting. While we have a hospital our ambulance corps is voluntary, and most calls for an ambulance at least ten minutes will pass before the ambulance arrives. It is comforting to know that I have an AED. I thought I had my AED just in case, but it was good to know I have for whenever I may need it. That I will never be left wondering "what if I had an AED, could I have saved a life?" I have an AED; I can do everything in my power to save a life. I think every school in Connecticut should be able to say the same.

Please support SB 981, "An Act Concerning the Availability of Automatic External Defibrillators in Schools."