

119TH CONGRESS
1ST SESSION

H. R. 1466

To amend the Public Health Service Act to clarify liability protections
regarding emergency use of automated external defibrillators.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 21, 2025

Mr. SCOTT FRANKLIN of Florida (for himself, Mr. CONNOLLY, Mr. BILIRAKIS,
Mr. SOTO, Mrs. CAMMACK, Mr. CALVERT, Mr. VAN DREW, Mr. CLINE,
and Mr. BEYER) introduced the following bill; which was referred to the
Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to clarify liability
protections regarding emergency use of automated exter-
nal defibrillators.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Cardiac Arrest Sur-
5 vival Act of 2025”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) Establishing a nationally uniform baseline
9 of protection from civil liability for persons who use

1 automated external defibrillators (in this section re-
2 ferred to as “AEDs”) in perceived medical emer-
3 gencies, who own or hold other property interests in
4 AEDs used in perceived medical emergencies, or who
5 own, occupy, or manage premises in which an AED
6 is used or from which an AED is taken for use in
7 a perceived medical emergency will encourage the
8 deployment of additional AEDs, which will ulti-
9 mately save lives that would otherwise have been lost
10 to cardiac arrest.

11 (2) The current patchwork of State “Good Sa-
12 maritan” laws provides incomplete, inconsistent,
13 and, in some instances, inadequate protection for en-
14 tities considering the acquisition or deployment of
15 AEDs. In these circumstances, concerns about po-
16 tential liability resulting from the good-faith acquisi-
17 tion and deployment of this life-saving technology
18 are inhibiting its deployment.

19 (3) Such concerns are especially acute for enti-
20 ties with operations or facilities in multiple States,
21 yet such entities are also among those in which the
22 widespread deployment of AEDs would be most ben-
23 eficial.

24 (4) A nationally uniform baseline of protection
25 from civil liability is needed for persons who use

1 AEDs in perceived medical emergencies, who own or
 2 hold other property interests in AEDs used in per-
 3 ceived medical emergencies, or who own, occupy, or
 4 manage premises in which an AED is used or from
 5 which an AED is taken for use in a perceived med-
 6 ical emergency.

7 **SEC. 3. LIABILITY REGARDING EMERGENCY USE OF AUTO-**
 8 **MATED EXTERNAL DEFIBRILLATORS.**

9 Section 248 of the Public Health Service Act (42
 10 U.S.C. 238q) is amended to read as follows:

11 **“SEC. 248. LIABILITY REGARDING EMERGENCY USE OF**
 12 **AUTOMATED EXTERNAL DEFIBRILLATORS.**

13 “(a) GOOD SAMARITAN PROTECTIONS.—

14 “(1) IN GENERAL.—Except as provided in sub-
 15 section (e), a person described in paragraph (2) is
 16 immune from civil liability for any harm resulting
 17 from the use or attempted use of an automated ex-
 18 ternal defibrillator device (in this section referred to
 19 as an ‘AED’).

20 “(2) GOOD SAMARITAN DESCRIBED.—A person
 21 described in this paragraph is a person who—

22 “(A) uses or attempts to use an AED on
 23 a victim of a perceived medical emergency, and

24 “(B) is not the owner-acquirer (as defined
 25 in subsection (c)(2)) of the AED.

1 “(b) PREMISES OWNER/LESSEE/MANAGER PROTEC-
2 TIONS.—

3 “(1) IN GENERAL.—Except as provided in sub-
4 section (e), a person described in paragraph (2) is
5 immune from civil liability for any harm resulting
6 from such use or attempted use of an AED.

7 “(2) PREMISES OWNER/LESSEE/MANAGER DE-
8 SCRIBED.—A person described in this paragraph is
9 a person who—

10 “(A) owns, occupies under a lease or simi-
11 lar arrangement, or manages—

12 “(i) the premises at which an AED is
13 used or attempted to be used on a victim
14 of a perceived medical emergency, or

15 “(ii) the premises from which an AED
16 used or attempted to be used on a victim
17 of a perceived medical emergency is taken
18 for such use, and

19 “(B) is not the owner-acquirer of such
20 AED.

21 “(c) DEVICE OWNER-ACQUIRER PROTECTIONS.—

22 “(1) IN GENERAL.—Except as provided in sub-
23 section (e), an owner-acquirer of an AED is immune
24 from civil liability for any harm resulting from the
25 use or attempted use of such AED, unless the harm

1 was proximately caused by the failure of the owner-
2 acquirer to properly maintain the AED according to
3 the guidelines of the manufacturer of the AED.

4 “(2) OWNER-ACQUIRER DEFINED.—For pur-
5 poses of this section, the term ‘owner-acquirer’
6 means any person who owns or has otherwise ac-
7 quired a possessory property interest in an AED
8 that is used or attempted to be used on a victim of
9 a perceived medical emergency.

10 “(d) APPLICABILITY OF IMMUNITY IN CERTAIN CIR-
11 CUMSTANCES.—The immunity provided by subsections
12 (a), (b), and (c) of this section shall apply regardless of
13 whether—

14 “(1) the AED that is used or attempted to be
15 used is marked with, or accompanied by, cautionary
16 signage;

17 “(2) the AED that is used or attempted to be
18 used is registered with any government;

19 “(3) the person who used or attempted to use
20 the AED saw, read, understood, complied with, or
21 attempted to comply with any cautionary signage
22 present;

23 “(4) the person who used or attempted to use
24 the AED had received any training relating to the
25 use of—

1 “(A) AEDs in general; or

2 “(B) the particular AED used or at-
3 tempted to be used; or

4 “(5) the person who used or attempted to use
5 the AED was assisted or supervised by any other
6 person, including a licensed physician.

7 “(e) INAPPLICABILITY OF IMMUNITY IN CERTAIN
8 CIRCUMSTANCES.—Notwithstanding subsection (d), im-
9 munity under subsection (a), (b), or (c)(1) does not apply
10 to a person if—

11 “(1) such person’s willful or criminal mis-
12 conduct, gross negligence, reckless misconduct, or a
13 conscious, flagrant indifference to the rights or safe-
14 ty of the victim proximately caused the harm in-
15 volved;

16 “(2) such person is a licensed or certified health
17 professional who used the AED while acting within
18 the scope of the license or certification of the profes-
19 sional and within the scope of the employment or
20 agency of the professional;

21 “(3) such person is a hospital, clinic, or other
22 entity whose purpose is providing health care di-
23 rectly to patients, and the harm was caused by an
24 employee or agent of the entity who used the AED

1 while acting within the scope of the employment or
2 agency of the employee or agent; or

3 “(4) such person is an owner-acquirer of the
4 AED who leased the AED to a health care entity (or
5 who otherwise provided the AED to such entity for
6 compensation without selling the AED to the entity),
7 and the harm was caused by an employee or agent
8 of the entity who used the AED while acting within
9 the scope of the employment or agency of the em-
10 ployee or agent.

11 “(f) RULES OF CONSTRUCTION.—

12 “(1) IN GENERAL.—The following apply with
13 respect to this section:

14 “(A) This section does not establish any
15 cause of action, or require that an AED be
16 placed at any building or other location.

17 “(B) With respect to the class of persons
18 for which this section provides immunity from
19 civil liability, this section preempts the law of
20 any State to the extent that the otherwise-appli-
21 cable State law would allow for civil liability in
22 any circumstance where this section would pro-
23 vide immunity from civil liability.

1 “(C) This section does not waive any pro-
2 tection from liability for Federal officers or em-
3 ployees under—

4 “(i) section 233 of this title; or

5 “(ii) sections 1346(b), 2672, and
6 2679 of title 28, United States Code, or
7 under alternative benefits provided by the
8 United States where the availability of
9 such benefits precludes a remedy under
10 section 1346(b) of such title 28.

11 “(2) CIVIL ACTIONS UNDER FEDERAL LAW.—

12 “(A) IN GENERAL.—The applicability of
13 subsections (a), (b), (c), (d), and (e) includes
14 applicability to any action for civil liability de-
15 scribed in subsection (a), (b), or (c) that arises
16 under Federal law.

17 “(B) FEDERAL AREAS ADOPTING STATE
18 LAW.—If a geographic area is under Federal
19 jurisdiction and is located within a State but
20 out of the jurisdiction of the State, and if, pur-
21 suant to Federal law, the law of the State ap-
22 plies in such area regarding matters for which
23 there is no applicable Federal law, then an ac-
24 tion for civil liability described in subsection
25 (a), (b), or (c) that in such area arises under

1 the law of the State is subject to subsections
2 (a) through (f) in lieu of any related State law
3 that would apply in such area in the absence of
4 this subparagraph.

5 “(g) FEDERAL JURISDICTION.—

6 “(1) In any civil action arising under State law,
7 the courts of the State involved have jurisdiction to
8 apply the provisions of this section.

9 “(2) The actual, asserted, or potential applica-
10 tion of any provision of this section in any civil ac-
11 tion or as to any civil claim shall not establish the
12 original jurisdiction of the Federal courts over such
13 action or claim under section 1331 of title 28,
14 United States Code.

15 “(h) DEFINITIONS.—

16 “(1) PERCEIVED MEDICAL EMERGENCY.—For
17 purposes of this section, the term ‘perceived medical
18 emergency’ means circumstances in which the behav-
19 ior of an individual leads a reasonable person to be-
20 lieve that the individual is experiencing a life-threat-
21 ening medical condition that requires an immediate
22 medical response regarding the heart or other
23 cardiopulmonary functioning of the individual.

24 “(2) OTHER DEFINITIONS.—For purposes of
25 this section:

1 “(A) The term ‘automated external
2 defibrillator device’ or ‘AED’ means a
3 defibrillator device that—

4 “(i) is commercially distributed in ac-
5 cordance with the Federal Food, Drug,
6 and Cosmetic Act;

7 “(ii) is capable of recognizing the
8 presence or absence of ventricular fibrilla-
9 tion, and is capable of determining without
10 intervention by the user of the device
11 whether defibrillation should be performed;

12 “(iii) upon determining that
13 defibrillation should be performed, is able
14 to deliver an electrical shock to an indi-
15 vidual; and

16 “(iv) in the case of a defibrillator de-
17 vice that may be operated in either an
18 automated or a manual mode, is set to op-
19 erate in the automated mode.

20 “(B) The term ‘cautionary signage’ means,
21 with respect to an AED, any verbal or non-
22 verbal markings or language purporting to limit
23 use of the AED by members of the general pub-
24 lic or to permit use of the AED only by persons
25 with specific skills, qualifications, or training.

1 “(C)(i) The term ‘harm’ includes physical,
2 nonphysical, economic, and noneconomic losses.

3 “(ii) The term ‘economic loss’ means any
4 pecuniary loss resulting from harm (including
5 the loss of earnings or other benefits related to
6 employment, medical expense loss, replacement
7 services loss, loss due to death, burial costs, and
8 loss of business or employment opportunities)
9 to the extent recovery for such loss is allowed
10 under applicable State law.

11 “(iii) The term ‘noneconomic losses’ means
12 losses for physical and emotional pain, suf-
13 fering, inconvenience, physical impairment,
14 mental anguish, disfigurement, loss of enjoy-
15 ment of life, loss of society and companionship,
16 loss of consortium (other than loss of domestic
17 service), hedonic damages, injury to reputation
18 and all other nonpecuniary losses of any kind or
19 nature.”.

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