UC RIVERSIDE
Environmental
Health & Safety

Stop the Bleed Program

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Revised by:

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1. Stop the Bleed Program Description

Stop the Bleed is a national movement to raise awareness and inspire action. It encourages bystanders to receive training and be prepared to assist in bleeding emergencies before professionals can intervene. Stop The Bleed Training provides people with crucial skills and knowledge that can enhance the likelihood of survival while waiting for professional help. In emergencies, every second matters, especially when a professional responder isn't yet on the scene. A person suffering significant blood loss could die within five minutes without prompt action. Administering first aid can be life-saving.

Assembly Bill No. 2260, now recognized as the Tactical Response to Traumatic Injuries Act, received approval and was officially filed in September 2022. This legislative measure mandates the inclusion of trauma kits in certain newly constructed buildings, aligning these provisions with existing Good Samaritan laws to afford liability protections. The key provisions of the bill are as follows:

1. **Building Requirements**: The legislation mandates that certain types of new buildings (e.g., educational, business, assembly) meeting specified occupancy thresholds must maintain a minimum number of trauma kits on-site. Additionally, these buildings must ensure the kits are regularly inspected, replenished, and maintained as necessary.
2. **Definition and Contents of Trauma Kits**: The bill stipulates the composition of a "trauma kit" as a compilation of medical supplies, including tourniquets, bleeding control bandages, non-latex gloves, scissors, and instructional materials. These kits are tailored to address immediate responses to traumatic injuries, including those arising from violent incidents such as shootings.
3. **Exemptions and Additional Provisions**: Certain facilities, including those under construction or renovation, health facilities, and residential buildings failing to meet occupancy thresholds, are exempt from these requirements.
4. **Legal Protection Under Good Samaritan Laws**: Individuals utilizing trauma kits in emergency scenarios are granted the protections outlined in Good Samaritan laws. This entails immunity from civil liability if aid is provided in good faith and without expectation of compensation. Such protection extends to personnel employed by property managers or similar entities, provided they are not specifically compensated for administering emergency medical care.
5. **Training and Awareness**: Building management entities are tasked with informing tenants about the location and utilization of trauma kits, along with providing training resources. This initiative aims to cultivate a more responsive and prepared environment in the event of emergencies involving severe injuries.

AB-2260 proposes placing trauma kits in public buildings with an occupancy of 200 people or more, akin to the presence of Automated External Defibrillators (AEDs). This encompasses assembly buildings with an occupancy of 300 or more, as well as business, educational, factory, institutional, mercantile, and residential buildings with an occupancy of 200 or more, excluding single-family and multifamily dwelling units.

Compliance obligations concerning trauma kits entail acquiring and situating at least six on-premises, as specified, conducting inspections, restocking supplies, and providing tenants with training information for utilizing the kits.

Assembly Bill No. 70, enacted into law on October 8, 2023, builds upon the provisions of prior legislation (AB 2260) regarding trauma kits, extending requirements to certain existing structures undergoing significant modifications or renovations. Here are the key updates and their implications:

1. **Compliance Measures**: For all buildings now covered under this law, the managing entity must ensure the installation of at least six trauma kits in easily accessible locations, conducting regular inspections and maintenance. Kits must be restocked after use, and tenants must be annually informed about kit locations and offered training on their use.
2. **Exemptions and Special Cases**: The bill clarifies exemptions for certain facilities, such as health facilities and correctional institutions, with high-security concerns. This ensures that the legislation does not unduly burden entities where compliance might compromise critical functions or safety protocols.
3. **Extended Scope to Older Buildings**: Previously, only buildings constructed after January 1, 2023, were mandated to have trauma kits. AB 70 broadens this mandate to encompass buildings constructed before this date, provided they undergo substantial modifications or tenant improvements exceeding $100,000 in one calendar year or are specifically renovated for use as places of assembly, such as auditoriums or theaters.
4. **Liability Protections**: The law maintains liability protections for individuals using trauma kits in emergency situations, stipulating immunity from civil damages for acts or omissions in rendering emergency care, provided all requirements are met. It also shields property managing entities from liabilities for kit failures, except in cases of gross negligence.
5. **Renovation Thresholds**: The bill outlines specific financial thresholds triggering the trauma kit requirement for older buildings undergoing improvements or renovations. This ensures that buildings undergoing significant upgrades or repurposing adhere to current safety standards concerning emergency medical preparedness.

By extending requirements to modified or renovated older buildings, AB 70 aims to promote a more consistent level of emergency preparedness across a broader range of public and private facilities in California. This legislative action aligns with broader efforts to enhance public safety and responsiveness in addressing emergencies that may lead to traumatic injuries.

2. Scope

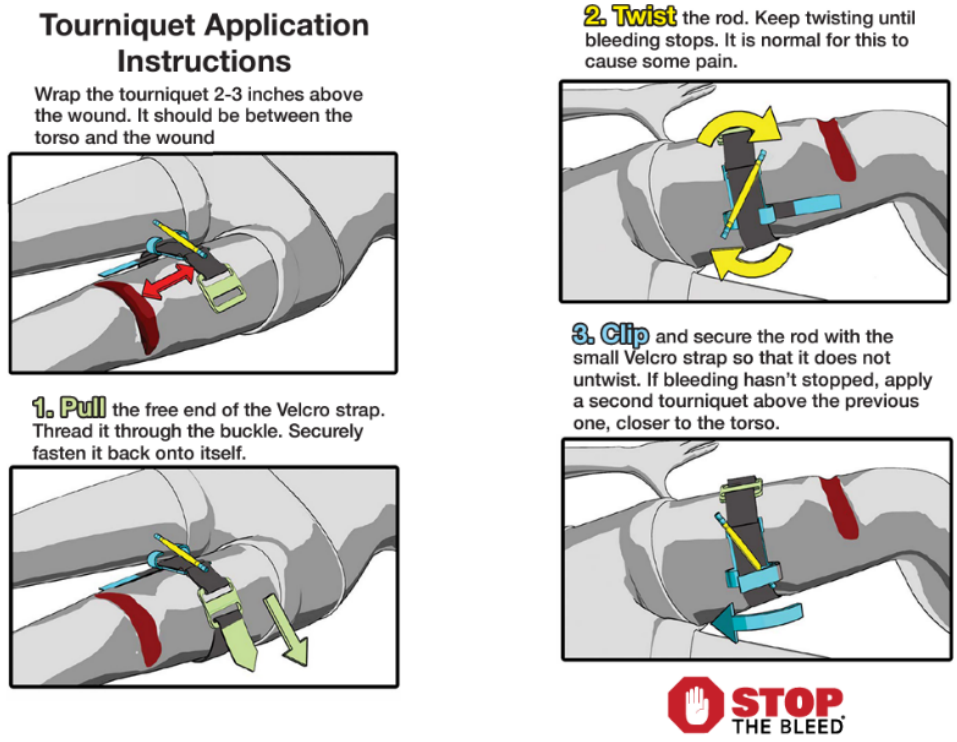
The UCR Stop the Bleed Campaign furnishes a robust framework applicable to all UCR departments and individuals trained in Stop the Bleed techniques and equipped with relevant supplies. Its primary function is to furnish guidance and assistance to participating entities campus-wide. This document aims to institute uniform guidelines for processes like application, training, placement, and other vital facets of the campaign. Functioning as both a roadmap and a checklist, it guarantees compliance with necessary elements as per regulatory norms.

3. Definitions

- **Building owners:** Must ensure that tenants annually receive a brochure, approved as to content and style by CPR1, which describes the proper use of Stop the Bleed Kits, and also ensure that similar information is posted next to any installed AED.
- **Bystander first aid/CPR:** Initial first aid/CPR provided by a trained individual who is not part of an organized medical response system such as ERT or EMS.
- **Cardiopulmonary resuscitation (CPR):** Rescue breathing and external cardiac compression applied to a victim in respiratory and/or sudden cardiac arrest.
- **Compliance Requirements**: Related to trauma kits, these include acquiring and placing at least six trauma kits on the premises, as specified, inspecting the trauma kits, restocking the trauma kits, and providing the building or structure's tenants with information for training in the use of the trauma kits.
- **Emergency Medical System (EMS):** Refers to a professional agency comprised of community responders dispatched during emergencies to provide medical assistance and/or ambulance transport.
- **Good Samaritan Protection**: A person or entity that provides first-care provider training for the use of a public access trauma kit or bleeding control kit to a person who renders emergency care pursuant to subdivision (b) is not liable for any civil damages resulting from any acts or omissions of the person rendering the emergency care.
- **Maintenance:** The program portal monitors each registered Stop the Bleed kit and the expiration dates of its contents. Monthly inspections are conducted for each kit in line with the AED maintenance schedule. Once the contents of a kit expire, CPR1 will initiate automatic supply replenishment. The bleeding control kits are recommended to be replaced every five years, and the installation date would be used to decipher the

recommended replacement date. If a bleeding control kit is used in an emergency, the protocol is simply that the kit should be replaced with a new kit. Each Stop the Bleed kit also meets ANSI standards.

- **Quick actions to Stop the Bleed**
  1. **Call 9-1-1**
  2. **Apply pressure with Hands.**
  3. **Pack wound and Press.**
  4. **Apply Tourniquet.**



- **Stop the Bleed Designee**: Each location with stop-the-bleed kits must designate an individual(s) who will be responsible for maintaining the kit and completing the required monthly check.
- **Stop the Bleed Program Coordinator**: Environmental Health and Safety (EH&S) personnel responsible for providing guidance and assistance in all matters involving the Stop the Bleed campus program.
- **Training:** "Stop the Bleed" is a critical training program designed to teach individuals how to stop bleeding in emergency situations before professional help arrives. This training is vital as bleeding is a leading cause of preventable death in trauma situations. The Training for "Stop the Bleed" is essential because it equips individuals with the critical skills needed to help control bleeding in emergency situations.

Reasons why Stop the Bleed training is essential:

- **Building Confidence:** This training not only provides lifesaving skills but also boosts confidence in handling high-pressure situations. Knowing how to act in an emergency can reduce panic and encourage more coordinated, effective responses.
- **Content Covered:** Recognizing Life-Threatening Bleeding: Identifying different types of bleeding and understanding their severities.
- **Cost:** Participants who wish to enroll in the training program must submit their department the Chart of Accounts (COA) and be able to commit to all training components. Failure to do so will result in a recharge to that department. Please see section 7, Training Courses, for a detailed cost breakdown.
- **Empowering Bystanders:** In many emergencies, especially in situations where professional medical help may not be immediately available, bystanders with the right training can act swiftly and effectively to control bleeding. This can be the difference between life and death.
- **Enhancing Public Health Preparedness:** By training non-medical individuals, communities become more resilient and better prepared to respond to emergencies. "Stop the Bleed" training is part of broader public health efforts to improve emergency preparedness among the general public.
- **Methods to Stop Bleeding:** Techniques include direct pressure, wound packing, and the use of tourniquets.
- **Practical Application:** Participants practice these techniques, using training aids like limb models and fake blood to simulate real-life scenarios.
- **Saving Lives:** Uncontrolled bleeding is a major cause of preventable deaths. Quick and effective intervention can significantly reduce the number of deaths from bleeding after injuries, whether from everyday accidents, natural disasters, or traumatic events.
- **Supporting Professional Responders:** By controlling bleeding, trained individuals can stabilize victims until professional medical help arrives. This support can significantly improve outcomes by preventing critical blood loss and allowing emergency medical services to focus on more advanced treatments when they arrive. Overall, "Stop the Bleed" training is about empowering as many people as possible with the knowledge and skills to make a critical difference in emergency situations.
- **Training Structure and Duration:** The course typically lasts about one to two hours. It includes both instructional and hands-on components.

4. Responsibilities

Campus Chancellor is responsible for:

- Ensuring compliance with health and safety requirements across all facilities and programs under their jurisdiction.

CPR1 - AED Total Solutions (contractor) responsible for:

- Provide medical oversight.
- Supply replacement parts as needed.
- Provide online CPR1 portal.
- Online management program with reminders, notifications, tracking, & reporting
- Interactive reporting console.
- Online resource library.
- Data entry/batch upload.
- Tracking System that all of the Stop the Bleed kits on campus are connected to this system, and EH&S will recharge departments for the annual required license.

Department Heads are responsible for:

- **Coordinating Training for Employees:** Organizing and facilitating Stop the Bleed training sessions for departmental staff, including the required First Aid training for employees that are outside the campus building requirements.
- **Designating a Department Stop the Bleed Coordinator:** This involves assigning a coordinator to oversee Stop the Bleed-related activities within the department and coordinate with EH&S.
- **Employees:** are responsible for familiarizing themselves with their roles and responsibilities as outlined in their department's Emergency Action Plan. This includes understanding building evacuation routes, proper operation of fire extinguishers and alarms, accessing emergency services, and reacting appropriately in emergency situations.
- **Maintaining Records of Maintenance and Testing:** Keeping detailed records of Stop the Bleed kits maintenance and testing activities and using the campus system to record and report any issues.
- **Purchasing, Installing, and Maintaining Stop the Bleed Kits:** Ensuring Stop the Bleed Kits are acquired, properly installed, and regularly maintained in compliance with departmental requirements that exceed building requirements for Stop the Bleed Kits, as mandated by outside entities requiring it from the campus.
- **Retaining Stop the Bleed kit Training and Maintenance Records:** Storing all Stop the Bleed training records and equipment maintenance/testing logs, which must be available for review by EH&S or Fire building inspections.

Environmental Health & Safety (EH&S) Stop the Bleed Coordinator is responsible for:

- Ensuring all inquiries pertaining to Stop the Bleed kits are in compliance with the criteria outlined in AB-2260.
- Ensure all Stop the Bleed purchases and replacement items through campus procurement go through the appropriate vendor, and recharges annual fees as necessary.
- Assists in placing the acquired Stop the Bleed in an unlocked, accessible location. Departments need to ensure that the Stop the Bleed coordinator has access to the Stop the Bleed kits in the event of an emergency.
- Conducting annual inspections of Stop the Bleed equipment for quality assurance through the online system as required.
- Communicating with department designee(s) on all Stop the Bleed matters.
- Document monthly equipment inspections through the campus CPR1 online monitoring system for public areas and recharges for locations without a Stop the Bleed Department Designee.
- In the event of Stop the Bleed emergency use, will assist in obtaining event information and filing of the Stop the Bleed event notification.
- Coordinates CPR1 Total Solutions program subscription service and access for UCR employees.
- Communicate to site management the costs and benefits of expanding the existing medical emergency response by including
- Review the program annually to evaluate effectiveness.

Facilities Services is responsible for:

- Ensuring that buildings are remodeled in compliance with appropriate codes applicable to UCR and according to the policies and procedures for the projects they manage.
- This includes ensuring that Stop the Bleed Placement Guidelines are followed, including cabinet installation.
- The EH&S Department should be involved in the project during the earliest stages to reduce the potential for unnecessary expenses. Facilities Services will provide plans and specifications to EH&S for review of Stop the Bleed installation conformance to the referenced codes and standards.
- Additionally, recently retrofitted buildings must incorporate Stop the Bleed Kits in accordance with California Health and Safety Code §19310-Trauma Kits. This mandate applies to structures renovated after January 1, 2023, particularly those undergoing modifications, renovations, or tenant improvements exceeding $100,000 within a calendar year.

Fire and Life Safety Program is responsible for:

Integrating the Stop the Bleed program as a vital component of the campus's overall emergency preparedness and response strategy. Their responsibilities include:

- **Coordinating with EH&S**: Working closely with the EH&S Department to ensure that Stop the Bleed placement and maintenance meet all applicable codes and standards. This includes providing plans and specifications to EH&S for review and approval. Providing comprehensive training for the campus community on fire safety and Stop the Bleed usage. This includes regular fire drills and Stop the Bleed training sessions to ensure that individuals are prepared to respond effectively to both fire and to stop uncontrolled bleeding in emergency situations.
- **Raising Awareness and Education**: Educating the campus community about fire hazards, prevention practices, and the importance of Stop the Bleeds kits in emergency situations. This includes distributing informational materials, conducting workshops, and promoting a culture of safety.
- **Compliance and Reporting**: Ensuring compliance with California Health and Safety Code §19310-Trauma Kits regarding the incorporation of Stop the Bleed kits in newer constructions and recently retrofitted buildings. Reporting on the status of Stop the Bleed kit implementation and any incidents involving Stop the Bleed use.

Planning, Design & Construction (PD&C) is responsible for:

- Ensuring that buildings are constructed and/or remodeled in compliance with appropriate codes applicable to UCR and according to these policies and procedures for the projects they manage.
- The EH&S Department should be involved in the project at the earliest stages to reduce the potential for unnecessary expenses.
- PD&C will provide plans and specifications to EH&S for review of Stop the Bleed conformance to the referenced codes and standards.
- Additionally, newer constructions and recently retrofitted buildings must incorporate Stop the Bleed kits in accordance with California Health and Safety Code §19310-Trauma Kits. This mandate applies to structures renovated after January 1, 2023, particularly those undergoing modifications, renovations, or tenant improvements exceeding $100,000 within a calendar year.
- All new construction and renovations on UCR property must incorporate a Stop the Bleed kit within a dedicated cabinet strategically placed in the first-floor lobby near the main elevator, stairs, or another prominent location approved by EH&S as part of the project design.

Stop the Bleed Department Designee is responsible for:

- Maintaining Stop the Bleed equipment according to manufacturer specifications and campus Stop the Bleed program requirements.

- Document monthly equipment inspection through the campus CPR1 online monitoring system.
- If a bleeding control kit is used in an emergency, it should be replaced with a new kit. Notify the EH&S Stop the Bleed Program Coordinator as soon as possible by emailing ehsocchealth@ucr.edu, calling 951-827-5528, or in person within 24 hours of the incident. Please report the incident to EH&S via the online system https://ehs.ucr.edu/report.
- Participated in case reviews, responder training and retraining, data collection and other quality assurance activities.
- Develop and maintain the emergency response plan and UCR policies and procedures.
- Maintain a list of trained to Stop the Bleed responders.
- Ensure compliance with UCR policies and procedures of the Stop the Bleed Program
- Is the primary recharge contact for department oversight.

Supervisors are responsible for:

- Training their employees on appropriate emergency response activities, including the locations of Stop the Bleed kits.

Vice Chancellors, Directors, Deans, and Department Chairs are responsible for:

- For communicating and promoting the Stop the Bleed program within their respective units and enforcing the policy within their control areas.

5. Program Components

5.1 Process of Obtaining a Stop the Bleed Kit

To ensure uniformity across the campus in online systems and communication procedures with Emergency Medical Services (EMS) and the designated medical director, UCR requires that all its entities acquire only Stop the Bleed kits approved by EH&S. For details on purchasing, please reach out to ehsocchealth@ucr.edu.

Step 1: Assessment and Planning

- **Risk Assessment:** UCR EH&S will conduct a thorough risk assessment to determine the specific needs of the campus. When evaluating the environmental factors, it is important to consider the building layout's intricacies, the occupancy levels, and the specific activities that take place within the premises, particularly in areas with high-volume traffic. These factors play a critical role in ensuring the space's safety, efficiency, and overall functionality.
- As part of the assessment, the campus will follow the requirements stated by California bills regarding trauma kit requirements:
- A building needs a trauma kit if:

    - It is an assembly building with an occupancy of 300+.
    - It is a public building (business, educational, factory, institutional, mercantile, residential but not single-family or multifamily homes) with an occupancy of 200+.
    - It is newly constructed with permits post-January 1, 2023.
    - It is an existing building undergoing renovations or modifications exceeding $100,000 or is renovated for assembly use.
    - It installs a minimum of six accessible trauma kits.
    - It performs regular inspections and maintenance.
    - It provides annual training or information to tenants on kit usage.
    - It ensures compliance with legal provisions for liability protection.
- **Kit Configuration:** Decide on the contents of the trauma kits based on likely injuries and medical emergencies that could occur. Items like tourniquets, bleeding control bandages, and protective gloves are essential.

Step 2: Training and Education

- **Regular Training Sessions:** The EH&S Stop the Bleed Program Coordinator will be tasked with planning and organizing recurring training sessions for students and staff members annually per AB-2260 . These sessions will encompass hands-on demonstrations illustrating the correct utilization of each item in the trauma kit.
    - The EH&S Stop the Bleed Program Coordinator has provided two different training provider options that the campus can utilize. One is the current vendor, CPR1, and the other is a free economic option through Highlander Emergency Medical Services. Further information can be found in section 7, Training Courses.
- **Integration into Orientation:** As part of the orientation for new students and staff, it is strongly recommended to include training on trauma kits. This training will provide essential skills for emergency situations. To find out more about the available stop-the-bleed training and the resources provided, please visit the EH&S Occupational Health webpage. It is crucial to ensure that all staff and students are well-prepared to handle unexpected medical emergencies.
- **Digital Resources:** Provide online resources, such as instructional videos and quick-reference guides, accessible through the EH&S Occupational Health webpage.

Step 3: Maintenance and Compliance

Stop the Bleed Kit Inspection Requirements: Regular inspection and maintenance of Stop the Bleed kits are essential to ensure they are ready for use in an emergency. The following checklist outlines the necessary steps and items to check during an inspection:

5.2 Inspection Checklist

- **External Condition of the Kit:**
  - ☐ Ensure the kit is intact with no visible damage to the case or packaging.
  - ☐ Check that the kit is stored in an easily accessible location, clearly marked, and free from obstructions.
- **Contents of the Kit:**
  Verify that all items are present and in good condition. Replace any missing, expired, or damaged items.
  The typical contents include:
- **Tourniquets:** Ensure there are sufficient tourniquets and they are in good working condition.
- **Hemostatic Dressings:** Check for expiration dates and replace if expired.
- **Compression Bandages:** Inspect for any damage or signs of wear.
- **Gauze Rolls and Pads:** Confirm availability and check for expiration.
- **Trauma Shears:** Ensure they are present and functional.
- **Gloves:** Verify there are multiple pairs of non-latex gloves.
- **Marker:** Ensure there is a functioning marker for noting the time of tourniquet application.
- **Instructional Guide:** Confirm the presence of a Stop the Bleed instructional guide or quick reference card.
- **Emergency Blanket:** Check for tears or damage and replace if necessary.
- **Expiration Dates:**
  - ☐ Review all items with expiration dates, such as hemostatic dressings and gauze, and replace any expired items.
- **Functionality Check:**
  - ☐ Test the functionality of reusable items like trauma shears and ensure tourniquets can be properly tightened.
- **Cleanliness:**
  - ☐ Ensure all items are clean and free from contaminants. Clean or replace items as needed.
- **Documentation:**
  - ☐ Keep a log of inspections, noting the date, inspector's name, and any actions taken (e.g., items replaced).
  - ☐ Ensure the log is easily accessible and up to date.

5.3 Monthly Inspection

- Perform a comprehensive inspection of the Stop the Bleed kit at least once a month.
- Check the condition of each item and ensure no items are missing or damaged.
- Verify that all items are within their expiration dates.

5.4 After-Use Inspection

- Immediately after the use of the kit, inspect and restock all used or damaged items.

- Clean any reusable items and ensure the kit is ready for future emergencies.

5.5 Reporting

- Report any deficiencies or issues with the Stop the Bleed kit to UCR EH&S at ehsocchealth@ucr.edu or by calling 951-827-5528.
- Document the inspection and any actions taken in the inspection log. The form can be found in **Appendix G**.
- If a bleeding control kit is used in an emergency, it should be replaced with a new kit. Notify the EH&S Stop the Bleed Program Coordinator as soon as possible by emailing ehsocchealth@ucr.edu, calling 951-827-5528, or in person within 24 hours of the incident. Please report the incident to EH&S via the online system https://ehs.ucr.edu/report.

Compliance Checks

- Review state and local regulations regularly to ensure the kits meet all legal requirements and best practices in emergency medical response.

Step 4: Continuous Improvement

- **Feedback Mechanism:** EH&S will establish a feedback Qualtrics survey where students and staff can suggest improvements or report issues with the trauma kits or training programs.
- **Review and Update:** Periodically review the program to incorporate new best practices and feedback from the campus community and campus stakeholders.

Step 5: Documentation and Reporting

- **Record Keeping:** EH&S will maintain training records of all training sessions, maintenance checks, and usage incidents. This documentation is crucial for legal compliance and audits
- **Incident Reports:** If a bleeding control kit is used in an emergency, it should be replaced with a new kit. Notify the EH&S Stop the Bleed Program Coordinator as soon as possible by emailing ehsocchealth@ucr.edu, calling 951-827-5528, or in person within 24 hours of the incident.

Step 6: Strategic Placement

- **Accessible Locations:** To improve campus safety, it is recommended to strategically position trauma kits in easily accessible locations throughout the facilities. These kits should be situated in common areas such as lobbies, near exits, in hallways adjacent to large lecture halls, and close to dining areas. The placement of these kits must adhere to the criteria specified in AB-2260 to ensure compliance. UCR will integrate trauma kits within a dedicated cabinet strategically placed in the first-floor lobby near

the main elevator, stairs, or another prominent location approved by EH&S as part of the project design.

- **Visibility:** Ensuring that the kits are highly visible and clearly marked. These kits will be positioned near existing AED units. Signage for the Stop the Bleed kits will be affixed to the box to facilitate prompt identification of their locations during emergencies.

5.6 UCR Criteria for Stop the Bleed Kits Placement Locations:

Stop the Bleed kits will be available in the following locations on campus

- This legislative measure mandates the inclusion of trauma kits in certain newly constructed buildings after January 2023.

Relevant Building Types on Campus:

- **Group A Assembly Buildings**
  - Criteria: Occupancy of greater than 300.
  - Examples: Large lecture halls, auditoriums, sports arenas, and concert halls where large groups gather for events or assemblies.
- **Group B Business Buildings**
  - Criteria: Occupancy of 200 or more.
  - Examples: Administrative buildings, campus libraries, and large research facilities that serve as workplaces for staff and students.
- **Group E Educational Buildings**
  - Criteria: Occupancy of 200 or more.
  - Examples: Main academic buildings, laboratories, and classrooms that regularly host a large number of students.
- **Group R Residential Buildings**
  - Criteria: Occupancy of 200 or more, excluding single-family and multifamily dwelling units.
  - Examples: Large dormitories or residential halls that house many students.

Considerations for Modified or Renovated Buildings

- **Renovations and Improvements:** Any of the buildings falling into the above categories that undergo significant tenant improvements or renovations exceeding $100,000 within a calendar year would also require trauma kits. This includes upgrades or changes to buildings that might be repurposed, such as old buildings turned into student centers or assembly areas.

Strategic Placement

- Trauma kits will be housed in a dedicated cabinet in the first-floor lobby, near the main elevator, stairs, or another EH&S-approved location.

- If you are interested in obtaining Stop the Bleed Kits, please complete **Appendix F**.

5.7 Protocol for Using Stop the Bleed Kits

- This protocol outlines the steps to follow when responding to a bleeding emergency. It is intended for use by individuals trained in Stop the Bleed techniques.

A. Ensure Scene Safety

- Assess Scene for Safety: Ensure the environment is safe for both the responder and the victim. Use universal precautions such as gloves and eye protection if available.

B. Assess the Victim

- **Check for Responsiveness:** Tap the victim and shout to see if they respond.
- **Activate Emergency Response Plan:** If unresponsive or if there is severe bleeding, call 9-1-1 immediately or activate the in-house emergency plan. Ensure someone brings the Stop the Bleed kit to the scene.

C. Identify the Source of Bleeding

- **Locate the Bleeding Site:** Identify where the bleeding is coming from. This may involve removing or cutting away clothing.

D. Control the Bleeding

- **Apply Direct Pressure:**
  - ☐ Use gauze, cloth, or any clean material to cover the wound.
  - ☐ Press firmly and maintain continuous pressure.
  - ☐ If bleeding continues, apply more gauze or cloth without removing the first layer.
- **Use a Tourniquet (if applicable):**
  - ☐ **Location:** Apply a tourniquet above the bleeding site, as close to the injury as possible.
  - ☐ **Application:** Tighten the tourniquet until the bleeding stops.
  - ☐ **Note:** Do not place a tourniquet over a joint. Place it above the joint if necessary.
  - ☐ **Record Time:** Note the time the tourniquet was applied and communicate this to EMS.
- **Wound Packing (for deep wounds):**
  - ☐ Pack the Wound: If the wound is deep, use gauze or a clean cloth to pack the wound tightly.
  - ☐ Continue to Apply Pressure: Maintain direct pressure on the packed wound until help arrives.

E. Monitor the Victim

- **Reassess the Bleeding:** Regularly check to ensure bleeding has stopped or is under control.
- **Monitor Vital Signs:** Keep track of the victim's breathing, pulse, and level of consciousness.

F. Transfer Care to EMS

- **Communicate with EMS:**
  - ☐ Provide information on the victim's condition, the location and nature of the injury, and the measures taken to control the bleeding.
  - ☐ Include the time the tourniquet was applied if used.
  - ☐ Assist as Needed: Help EMS personnel as requested.

G. Post-Use Procedure

- **Document the Incident:** Record details of the incident, including the victim's information, the nature of the injury, and actions taken.
- **Notify Appropriate Personnel:** If a bleeding control kit is used in an emergency, it should be replaced with a new kit. Notify the EH&S Stop the Bleed Program Coordinator as soon as possible by emailing ehsocchealth@ucr.edu, calling 951-827-5528, or in person within 24 hours of the incident. Please report the incident to EH&S via the online system https://ehs.ucr.edu/report.
- **Restock and Clean Kit:** Replace any used supplies in the Stop the Bleed kit and clean any reusable items.

H. Debriefing

- **Conduct Debriefing:** The EH&S Bleeding Control Program Coordinator should conduct an incident debriefing with involved employees to review the response and identify any areas for improvement.
  - ☐ By following this protocol, responders can effectively manage severe bleeding and improve their chances of survival until professional medical help arrives.

6. Trauma Kit Cost and Renewal Cost

- A comprehensive cost breakdown for departments seeking to ascertain the cost of acquiring trauma kits is available. EH&S department has established partnerships with CPR1, the current vendor within the AED program for training courses.
- Please refer to **Appendix D** for a detailed breakdown of the costs associated with the Stop the Bleed Control Kits.
- The bleeding control kits are recommended to be replaced every five years, using the installation date to determine the recommended replacement date.

- If a bleeding control kit is used in an emergency, it should be replaced with a new kit. Notify the EH&S Stop the Bleed Program Coordinator as soon as possible by emailing ehsocchealth@ucr.edu, calling 951-827-5528, or in person within 24 hours of the incident. Please report the incident to EH&S via the online system https://ehs.ucr.edu/report.

7. Training Courses

Departments interested in acquiring trauma kits must also provide training. A detailed cost breakdown is available. The EH&S department has partnered with CPR1, the current vendor for the AED program, to offer training courses for fees to be paid by interested departments.

- **CPR1 Stop the Bleed Course Costs:**

Class Size	Cost
10 people	$385.90
12 people	$408.00
15 people	$510.00
20 people	$782.00
25 people	$850.00

- **Partnerships:** The EH&S department has established partnerships with CPR1 and Highlander EMS.
  - **CPR1**: CPR1 offers different price points depending on the expected group size. It is important to ensure that all registered participants attend the training session, as charges will apply based on the group class, regardless of attendance. This training requires a time commitment, and the department will be responsible for the associated costs. For group classes with more than 15 participants, one Stop the Bleed Kit will be provided.
  - **UCR Highlander Emergency Medical Services (EMS):** is a student-run organization at the University of California, Riverside. The students involved hold Emergency Medical Technician Certification through the California Emergency Medical Services Authority. Highlander EMS is dedicated to providing emergency education and care to promote a safer and healthier campus environment. They offer free hands-on training for Stop the Bleed, with a minimum requirement of 10 participants per course. As time slots are

limited, please ensure that all registered participants attend, as there will be no charge to the department.

- To schedule a training session for CPR1 or Highlander EMS, please contact the Occupational Health Coordinator at ehsocchealth@ucr.edu.

8. Stop the Bleed Kit Inspection(s) and Requirements

8.1 Stop the Bleed Kit Inspection(s)

- Once the monthly visual inspection is complete, the Department Designee must fill out the monthly inspection form, and the form can be found in **Appendix G**.
- **Annual Inspection:** In addition to monthly checks, the EH&S Stop the Bleed Program Coordinator performs an annual onsite review of all Stop the Bleed kit units to ensure quality and reliability.
  - **Reporting Issues:** If a bleeding control kit is used in an emergency, it should be replaced with a new kit. Notify the EH&S Stop the Bleed Program Coordinator as soon as possible by emailing ehsocchealth@ucr.edu, calling 951-827-5528, or in person within 24 hours of the incident. Please report the incident to EH&S via the online system https://ehs.ucr.edu/report.

8.2 Stop the Bleed Requirements

- The following are items that must be included in the trauma kits at a minimum:
  - One tourniquet endorsed by the Committee on Tactical Combat Casualty Care.
  - One bleeding control bandage.
  - One pair of non-latex protective gloves and a marker.
  - One pair of scissors.
- As part of the installation of the trauma kits, there is a requirement to include at least one source of instructional documents described in the item below.
- Instructional documents developed by the Stop the Bleed national awareness campaign of the United States Department of Homeland Security or the American College of Surgeons Committee on Trauma, the American Red Cross, the Committee for Tactical Emergency Casualty Care, or any other partner of the United States Department of Defense.
- Depending on the facility, the requirements for emergency response trauma safety may demand additional components in the trauma kits

9. Reporting Requirements

In the event of a trauma kit emergency use, notify EH&S as soon as possible by either:

- Report online: Report an Incident or Safety Concern
- Email ehsocchealth@ucr.edu

- Phone call (951) 827-5528
- In person within 24 hours of an incident at the Linden Street EH&S Office
- The EH&S Stop the Bleed Program Coordinator will collect all the event information.

10. References

10.1 State Requirements

- AB-2260 Emergency response: Trauma Kits https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202120220AB2260
- AB-70 Emergency response: trauma kits https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB70
- California Health and Safety Code Health and Safety Code §19300 outlines AED requirements for buildings constructed on or after January 1, 2023
- California Health and Safety Code Health and Safety Code §19310-Trauma Kits

Trainings:

- Stop the Bleed: Homeland Security

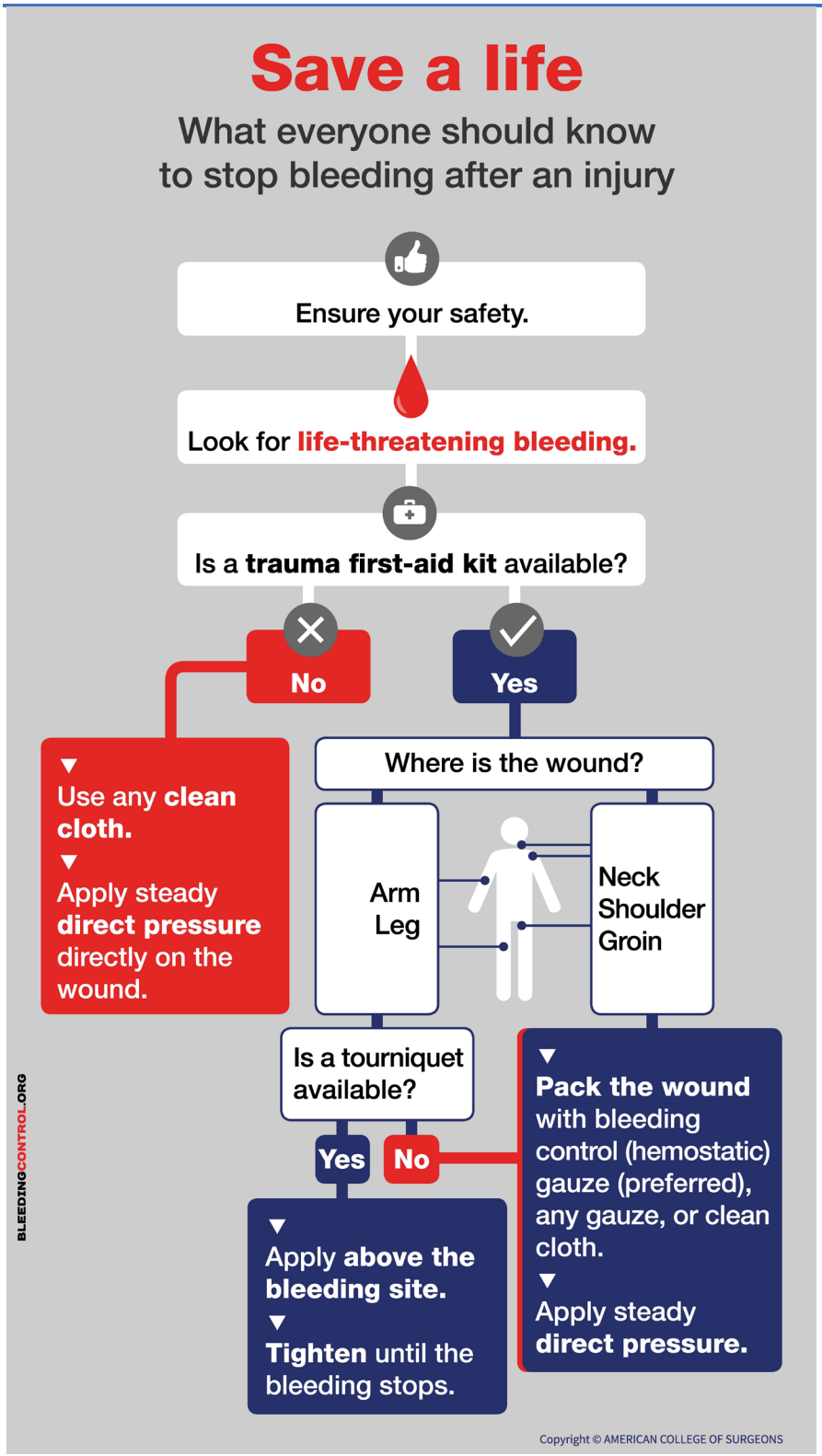
10.2 Stop the Bleed Information

- American College of Surgeons
- American College of Surgeons Committee on Trauma
- Committee for Tactical Emergency Casualty Care
- National Association of Emergency Medical Technicians (NAEMT) Resources
- The Hartford Consensus
- The THREAT Response Plan
- Stop the Bleeding Coalition
- Stop the Bleed national awareness campaign
- White House Stop the Bleed Launch

10.3 ADA Standard for Accessible Design

- American College of Surgeons
- Guidance_2010ADAStandards.pdf
- 2010 ADA Standards for Accessible Design | ADA.gov

Appendix A: Save a Life Guidance



Appendix B: Planning, Design & Construction (PD&C)

B.1 New Construction and Alterations Requiring to Stop the Bleed Kits

(a) Stop the Bleed kits shall be placed in all newly constructed buildings in the occupancy groups and with occupant loads more than that shown in Table A. The occupant load shall be determined based on the occupant load factors in the California Building Code. Occupancy groups shall be determined based on Chapter 3 of the California Building Code.

(b) Prior to approval of final inspection, Stop the Bleed kits shall be placed in all existing buildings undergoing alteration when any of the following apply:

(1) The building undergoing alteration was constructed before January 1, 2023

(2) The accumulated value of the alterations within the building within one calendar year is $100,000 or more: or

(3) The alterations are within a public assembly occupancy use, including auditoriums, performing arts, and movie theaters.

(c) (1) This chapter also applies to a structure listed in subdivision (a) or (b) that is owned or operated by a local governmental entity.

(2) This chapter does not apply to a health facility licensed under subdivision (a), (b), (c), or (f) of Section 1250.

(3) Except for structures specified in subdivision (b), this chapter does not apply to a structure that is vacant or vacant during construction or renovation.

(4) This chapter does not apply to Department of Corrections and Rehabilitation facilities if placement poses a safety or security concern.

(d) (1) A person or entity that complies with subdivision (e) is not liable for any civil damages resulting from any acts or omissions in the rendering of emergency care by use of a trauma kit.

(2) A property managing entity is not liable for any civil damages resulting from the failure, improper operation, or malfunction of equipment or materials within a properly stocked trauma kit.

(e) In order to ensure public safety, the person or entity responsible for managing the building, facility, and tenants of any structure described in subdivision (a) or (b) that is an occupied structure shall do all of the following:

(1) Acquire and place at least six trauma kits on the premises of the building or facility in an easily accessible and recognizable container located next to an automated external defibrillator (AED) as required by Section 19300.

(2) Inspect all trauma kits acquired and placed on the premises of a building or structure every three years from the date of installation to ensure that all materials, supplies, and equipment contained in the trauma kit are not expired, and replace any expired or missing materials, supplies, and equipment as necessary.

(3) If a property managing entity or person is aware, or reasonably should be aware, that a trauma kit has been used, they shall restock the trauma kit after each use and replace any materials, supplies, and equipment as necessary to ensure that all materials, supplies, and equipment required to be contained in the trauma kit are contained in the trauma kit.

Stop the Bleed Kits, which shall be visibly placed and readily accessible in the event of an emergency. Stop the Bleed cabinet shall be mounted such that the top is no more than five (5) feet above floor level. Acquire and place at least six trauma kits on the premises of the building or facility in an easily accessible and recognizable container located next to an automated external defibrillator (AED) as required by California Health and Safety Code §19310-Trauma Kits.

***Table A: Occupancy Groups on the UCR Campus**

Occupancy Group	Occupant Load
Group A "Assembly"	**300**
Group B "Business Buildings"	**200**
Group E "Educational"	**200**
Group R "Residential"[1]	**200**

*Occupancy Group(s) in Table A are selected based on the relevant building types on campus.

[1] Excluding single-family and multi-family dwelling units

The following campus buildings have an occupancy of 200 or more and do not have a Stop the Bleed unit on site. Evaluation is required to assess compliance with CA Health and Safety Code §19310.

Table B: Buildings with 200 or more Occupancy Limit

Site	Required Stop the Bleed Kits for Placements	Occupancy Limit
1420 Iowa	6	248
Aberdeen-Inverness	6	1499
Arts	6	1135
Athletics and Dance	6	248

Batchelor Hall	6	414
Bourns Hall	6	1136
Boyce Hall	6	279
CHASS Interdisciplinary North	6	761
CHASS Interdisciplinary South	6	805
Chemical Sciences	6	499
Chung Hall	6	1671
Dundee A	6	673
Dundee B	6	561
Genomics	6	473
Geology Building	6	327
Heckman Center Complex PH 2	6	570
Ivan Hinderaker Hall	6	323
Highlander Union Building	6	2147
Humanities & Social Sciences	6	1239
Humanities Building	6	610
International Village	6	322
Life Science Building	6	621
Lothian Hall	6	1122
Material Sciences Engineering	6	1136
Multidisciplinary Research Building 1	6	734
North District A	6	1603
North District B	6	1020
Olmsted Hall	6	994
Raymond L. Orbach Science Library	6	1764
Pentland Hills Bear Cave	6	237
Physics Building	6	863
Pierce Hall	6	959
Psychology 1 Building	6	369
Tomas Rivera Library	6	1250

Science Laboratories 1 Building	6	240
Skye Hall	6	1093
School of Medicine Education I	6	478
School of Medicine Education II	6	1164
School of Medicine Research Building	6	238
Spieth Hall	6	538
Sproul Hall	6	1267
Stonehaven	6	556
Student Health & Counseling Center	6	284
Student Success Center	6	1610
Student Support Services Building	6	374
University Lecture Hall	6	570
University Village Building E	6	270
Watkins Hall	6	854
Total	**288 Stop the Bleed units for these buildings that meet the Occupancy limit**	

Table C: Anticipated New Construction(s) for UCR Campus

Building Name
School of Business Building
Undergraduate Teaching & Learning Facility
Greenhouse 16-3 Rebuild
North District Phase 2

Oasis Park
PD&C Annex A

The following locations in Table C are identified as new construction(s) to the UCR campus. Their occupancy load must be evaluated based on California Health and Safety Code §19310-Trauma Kits standards to determine whether a Stop the Bleed Kit is required in the newly constructed building.

B.2 Location of Stop the Bleed Kits

Acquire and place at least six trauma kits on the premises of the building or facility in an easily accessible and recognizable container located next to an automated external defibrillator (AED) as required by California Health and Safety Code §19310-Trauma Kits.

B.3 Stop the Bleed Installation and Repair

For all newly constructed buildings that require Stop the Bleed kits, the Stop the Bleed Department Designee shall ensure monthly maintenance checks and verify that the Stop the Bleed kits are in good working condition. The Stop Bleed Department Designee shall also ensure compliance with all requirements under state and federal law relating to Stop the Bleed kits, which may ensure that the conditions for limits on liability under state law are met. In the absence of a Stop the Bleed Department Designee, the EH&S Stop the Bleed program coordinator will fulfill the role of the Stop the Bleed Department Designee. Such requirements and conditions may include, but may not be limited to, the following:

(a) Installation, maintenance, repair, testing, and readiness checks of each Stop the Bleed kit in accordance with the manufacturer's operation and maintenance guidelines, the American Heart Association, the American Red Cross, the California Code of Regulations, and all other applicable rules and regulations including but not limited to, all regulations promulgated by the federal Food and Drug Administration; and as described in section 8 Stop the Bleed Kit Inspection(s) and Requirements.

(b) Upon rendering an emergency case using the Stop the Bleed Kits, activate Emergency Medical Services (EMS) and the in-house emergency plan by phoning 9-1-1 system as soon as possible and report to the EH&S Stop the Bleed Program Coordinator as soon as possible by emailing ehsocchealth@ucr.edu, calling 951-827-5528, or in person within 24 hours of an incident. Please report the incident to EH&S via the online system https://ehs.ucr.edu/report.

(c) In the event of utilizing the Stop the Bleed Kit, the procedure entails replacing the utilized kit with a new one.

B.4 Stop the Bleed Cubix Cabinet Dimensions and Specifications

The Cubix CB2-BC-S and KC-S are two types of Stop the Bleed cabinets utilized on campus. The semi-recessed Stop the Bleed cabinet is also an approved AED wall storage cabinet appropriate for the campus. The Stop the Bleed Cabinets must be installed following Americans with Disabilities Act (ADA) standards.

The height to reach the handle of a Stop the Bleed kit in a public gathering place should be no more than 48 inches high. ADA guidelines specify maximum reach ranges for health equipment such as Stop the Bleed kits and other life safety devices. For safety equipment with an unobstructed approach, the maximum forward reach to the equipment is 48 inches above the floor. The maximum side reach for an unobstructed approach to a Stop the Bleed kit is 54 inches.

Standard Bleeding Control Wall Storage Cabinet:

Part Number: CB2-BC-S

Price (each): $126.65. Dimensions: 14 3/4"L x 11 5/8"H x 6 3/4"W

Houses up to 6 Bleeding Control Kits.

	Interior Dimensions				Exterior Dimensions			
Standard Cabinets	Height	Length	Depth		Height	Length	Depth	Weight
Small	11 ⅜”	14 ½”	6 ½”		11 ⅝”	14 ¾”	6 ¾”	7.5 lbs.
	Packaging Dimensions (1 unit)				Palletized Dimensions (60 units)			
Standard Cabinets	Height	Length	Depth	Weight	Height	Length	Depth	Weight
Small	14”	18”	10”	10 lbs.	88”	40”	48”	620 lbs.

Components included:

Standard, Surface Mounted Bleeding Control Wall Storage Cabinet

- 0.8mm cold rolled steel
- Textured powder coating finish
- Recessed hinges

- Magnetic door

Transparent Acrylic Window

- Measures 7 ¼” H x 7” L

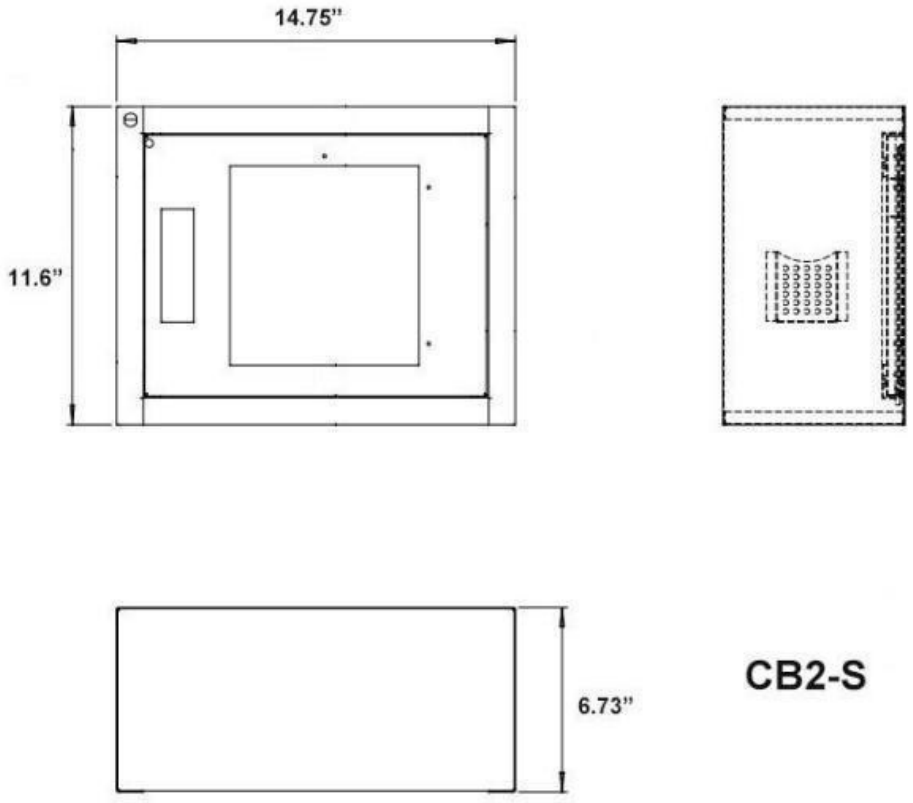
Keyed Alarm System

- Set of two keys
- 80-120 dB local alarm
- 9V battery

Mounting Hardware

- Wall Anchors (4)
- Washers (4)
- Screws (4)

This cabinet is designed to hold bleeding control kits, accessories, and other hemorrhage control products.




BLEEDING CONTROL


BLEEDING CONTROL

In case you need an additional storage cabinet, you may purchase a Small Bleeding Control Wall Storage Cabinet:

Part Number: KC-S

Price (each): $75.65

Dimensions: 14 3/4"L x 5 7/8"H x 6 3/4"W. It can House up to 4 Bleeding Control Kits.

	Interior Dimensions				Exterior Dimensions			
Kit Cabinets	Height	Length	Depth		Height	Length	Depth	Weight
Small	5 ⅝””	14 ½”	6 ½”		7 ⅜”	14 ¾”	6 ¾”	6 lbs.
	Packaging Dimensions (1 unit)				Palletized Dimensions			
Kit Cabinets	Height	Length	Depth	Weight				
Small	9”	17”	8”	7.5 lbs.				

Components included:

Small Kit Storage Cabinet

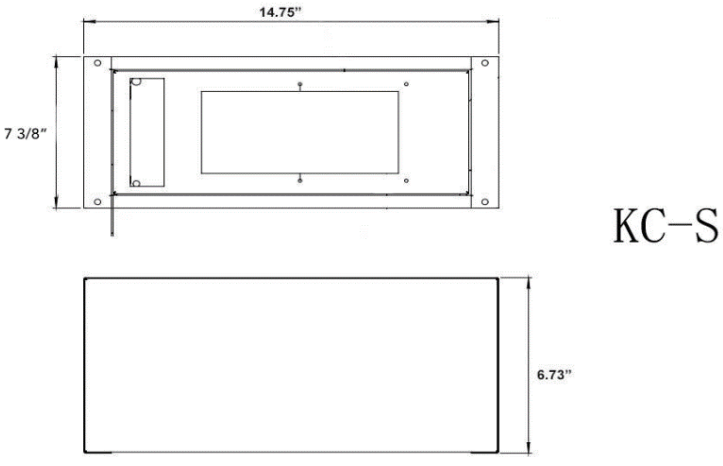
- 0.8mm cold rolled steel
- Textured powder coating finish
- Recessed hinges
- Magnetic door
- Viewing window measuring 6 ⅝” L x 3 ⅝” H

Sticker Pack

- Naloxone
- Bleeding Control
- Allergy
- First Aid
- Oxygen

Keyed alarm system

- Set of two keys



- 80-120 dB local alarm
- 9V battery

Mounting Hardware

- Wall Anchors (4)
- Washers (4)
- Screws (4)

Semi-Recessed AED Wall Storage Cabinet

Part Number: SR-S

When placing the order for Part Number: SR-S, it is essential to specify whether it is for an AED or for Bleeding Control.

Price (each): $160.65.

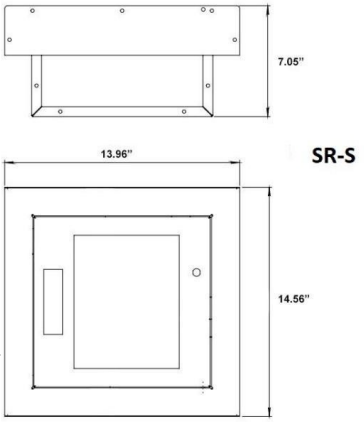
Dimensions: 14 3/4"L x 11 5/8"H x 6 3/4"W

Houses up to 6 Bleeding Control Kits.

	Interior/Rough Wall Dimensions				Exterior Dimensions			
Recessed Cabinets	Height	Length	Depth		Height	Length	Depth	Weight
Large	12”	12”	6 ¾” / 4”		14 ½”	14”	3 ⅛”	9 lbs.
	Packaging Dimensions (1 unit)				Palletized Dimensions (40 units)			
Recessed Cabinets	Height	Length	Depth	Weight	Height	Length	Depth	Weight
Large	17”	17”	10”	11 lbs.	88”	48”	40”	750 lbs.

Components included:

- Semi-Recessed AED or Bleeding Control Wall Storage Cabinet
  - 0.8mm cold rolled steel
  - Textured powder coating finish
  - Recessed hinges
  - Magnetic door
- Keyed alarm system
  - Set of two keys
  - 80-120 dB local alarm
    - 9V battery
- Mounting Hardware
  - Screws (4)
  - Wall Anchors (4)
  - Washers (4)



This cabinet is designed to hold Philips, Heartsine, and Defibtech AEDs or Stop the Bleed Kits

B.5 Stop the Bleed Placement Guidelines

The Stop the Bleed kit must be in an unlocked cabinet accessible to all employees. Starting in July 2025, all Stop the Bleed cabinets on campus should be alarmed so that the alarm goes off when the cabinet is opened and stops when the cabinet is closed. The Stop the Bleed cabinets will have to utilize the 9-volt standard for the alarm system.

Stop the Bleed alarm systems are not required for devices within the Chancellor's home and portable units. Portable units include but are not limited to, those used by the UCR University of California Police Department (UCPD), athletics, and remote research sites.

The Stop the Bleed Kit(s) should be installed at a central point relative to the building's population. Ideally, the unit is installed in a high-traffic area.

(1) One Stop the Bleed unit shall be placed in an easily accessible and recognizable container next to an automated external defibrillator (AED). This ensures that the Stop the Bleed kit is easily accessible to anyone entering or exiting the building and is positioned in a central and commonly known location, making it more likely to be found and used quickly in an emergency.

The wall cabinet housing a Stop the Bleed kit must not protrude more than 4 inches from the wall into walkways, corridors, passageways, or aisles.

The Stop the Bleed unit must be clearly visible and unobstructed, and it must include use and reporting instructions.

To ensure compliance with applicable laws and regulations, including the Americans with Disabilities Act (ADA), the UCR campus must abide by the following requirements regarding installing and placing the Stop the Bleed unit.

B.6 Stop the Bleed Cabinet Installation

Per 2010 Americans with Disabilities Act (ADA) standards for Accessible Design, Section 308 unless otherwise noted (see section 2010 ADA standards for detailed description). These national standards are subject to change by authorities having jurisdiction. ADA requirements are constantly evolving through ongoing legislative and judicial actions.

B.7 Stop the Bleed Cabinet Height

Forward Reach

The requirements specify that the cabinet handle, and consequently the Stop the Bleed handle, shall have a maximum height of 48 inches above the finished floor (AFF), with a minimum height of 15 inches AFF. When reaching forward over an obstruction, the clear floor space shall extend beneath the element for a distance equal to or greater than the required reach depth over the obstruction. For a high forward reach where the reach depth is 20 inches maximum, the maximum height shall be 48 inches. However, if the reach depth exceeds 20

inches, the high forward reach shall not exceed 44 inches, and the reach depth shall be limited to 25 inches.

Parallel or Side Reach
Where the side reach is unobstructed, both the cabinet handle AND the Stop the Bleed handle shall not exceed 48 inches in height above the finished floor or ground, with a minimum height of 15 inches. An obstruction is permissible between the clear floor or ground space and the element if the depth of the obstruction does not exceed 10 inches.

B.8 Stop the Bleed Cabinet Protrusion

Per 2010 ADA Standards for Accessible Design, any wall-mounted cabinet that protrudes more than 4 inches shall have the bottom corner no higher than 27 inches from the floor in a walkway.

In a circulation path (walks, hallways, ramps, stairways, landings, courtyards)

- If the mounting location is in a circulation path and the leading edge is between 27’ and 80’ AFF (48” in the above section), it shall protrude no more than 4” maximum horizontally into the circulation path (sections 204 and 307.2)
- If mounting 27 to 48 inches, the cabinet must be recessed or semi-recessed into the wall so it will not protrude more than 4 inches.
- If the cabinet has the leading edge below 27 inches, it may protrude any amount as long as it does not violate any exit corridor requirements in a room
- If the mounting location is not in a circulation path, it may project any amount from the wall.

B.9 2010 ADA Standards

Advisory 308.1 General. The following table provides guidance on reach ranges for children according to age, where building elements such as coat hooks, lockers, or operable parts are designed for use primarily by children. These dimensions apply to either forward or side reaches. Accessible elements and operable parts designed for adult use or children over age 12 can be located outside these ranges but must be within the adult reach ranges required by 308.

Children's Reach Ranges

Forward or Side Reach	Ages 3 and 4	Ages 5 through 8	Ages 9 through 12
High (maximum)	36 in (915 mm)	40 in (1015 mm)	44 in (1120 mm)
Low (minimum)	20 in (510 mm)	18 in (455 mm)	16 in (405 mm)

308.2 Forward Reach

308.2.1 Unobstructed. Where a forward reach is unobstructed, the high forward reach shallbe 48 inches (1220 mm) maximum and the low forward reach shallbe 15 inches (380 mm) minimum above the floor or ground.

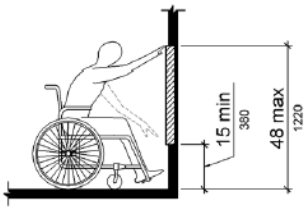


Figure 308.2.1 Unobstructed Forward Reach

308.2.2 Obstructed High Reach. Where a high front forward reaches is over an obstruction, the clear floor space shall extend beneath the element for a distance not less than the required to reach depth for the obstructions. The high forward reach shall be 49 inches (1220 mm) maximum where the reach depth is 20 inches (510 mm) maximum. Where the reach depth exceeds 20 inches (510 mm), the high forward reach shall be 44 inches (1220 mm) maximum, and the reach depth shall be 25 inches (635 mm) maximum.

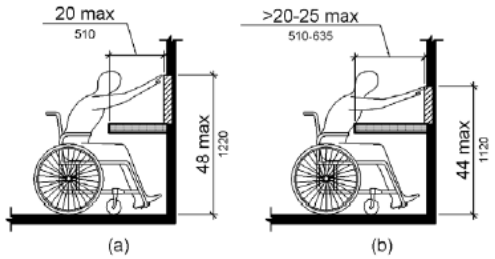


Figure 308.2.2 Obstructed High Forward Reach

308.3 Side Reach

308.3.1 Unobstructed. Where a clear floor or ground space allows a parallel approach to an element and the side reach is unobstructed, the high side reach shall be 48 inches (1220 mm) maximum and the low side reach shall be 15 inches (380 mm) minimum above the finish floor or ground.

Exceptions:

1. An obstruction shall be permitted between the clear floor or ground space and the element where the depth of the obstruction is 10 inches (255 mm) maximum.

2. Operable parts of fuel dispensers shall be permitted to be 54 inches (1370 mm) maximum measured from the surface of the vehicular way where fuel dispensers are installed on existing curbs.

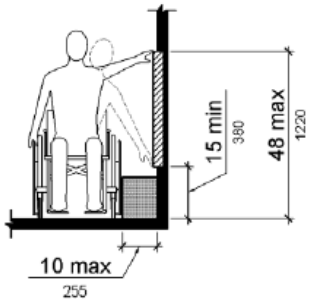


Figure 308.3.1 Unobstructed Side Reach

B.10 Signage

Stop the Bleed units shall have signage on the building exterior and at the main entry door indicating their location, next to an installed AED unit. The “Stop the Bleed” sign shall include the symbol for the Stop the Bleed kits with text stating “Bleeding Control” and a decal on the Stop the Bleed unit box stating, “Bleeding Control on Site.”

Highly visible, three-dimensional transforming “Bleeding Control” sign that allows individuals to locate the bleeding control station that can be used in three different configurations (Flat, Corner, and triangular) directions Each panel: 7" x 4 1/2"

Part Number: Flex3DWS-BC

Price (each): $20

Bleeding Control On-Site Decal

The Bleeding Control On-Site Decal serves as a vital visual aid in emergency response settings, providing clear guidance and awareness of the presence of bleeding control supplies on-site. Crafted with durable materials and featuring bold, easy-to-read lettering and symbols, this decal ensures prominent visibility in various environments, including schools, workplaces, and public venues.

By prominently displaying the location of bleeding control resources, the decal enhances preparedness and empowers individuals to respond effectively to critical situations. Its weather-resistant design and adhesive backing enable secure placement on walls, doors, or other surfaces, serving as an essential component of comprehensive bleeding control readiness strategies.

Part Number: BC- Decal / Cubix safety Bleeding Control Decal.

Price (each): $10

Weight: 0.25 lbs. Measures: 4" L x 5" H

Appendix C: Facilities Services Stop the Bleed Kit Placement Guidelines

The Stop the Bleed kit must be in an unlocked cabinet accessible to all employees. Starting in July 2025, all Stop the Bleed cabinets on campus should be alarmed so that the alarm goes off when the cabinet is opened and stops when the cabinet is closed. The Stop the Bleed cabinets will have to utilize the 9-volt standard for the alarm system.

Stop the Bleed alarm systems are not required for devices within the Chancellor's home, and portable units. Portable units include but are not limited to the ones used by the UCR University of California Police Department (UCPD), athletics, and remote research sites.

The Stop the Bleed Kit(s) should be installed at a central point relative to the building's population. Ideally, the unit is installed in a high-traffic area.

(1) One Stop the Bleed unit shall be placed in an easily accessible and recognizable container next to an automated external defibrillator (AED). There should be 6 trauma kits in the container. This ensures that the Stop the Bleed kit is easily accessible to anyone entering or exiting the building and is positioned in a central and commonly known location, making it more likely to be found and used quickly in an emergency.

The wall cabinet housing a Stop the Bleed kit must not protrude more than 4 inches from the wall into walkways, corridors, passageways, or aisles.

The Stop the Bleed unit must be clearly visible and unobstructed, and it must include use and reporting instructions.

To ensure compliance with applicable laws and regulations, including the Americans with Disabilities Act (ADA), the UCR campus must abide by the following requirements regarding installing and placing the Stop the Bleed unit.

C.1 Stop the Bleed Cabinet Installation

Per 2010 Americans with Disabilities Act (ADA) standards for Accessible Design, Section 308 unless otherwise noted (see section 2010 ADA standards for detailed description). These national standards are subject to change by authorities having jurisdiction. ADA requirements are constantly evolving through ongoing legislative and judicial actions.

C.2 Stop the Bleed Cabinet Height

Forward Reach

The requirements specify that the cabinet handle, and consequently the Stop the Bleed handle, shall have a maximum height of 48 inches above the finished floor (AFF), with a minimum height of 15 inches AFF. When reaching forward over an obstruction, the clear floor

space shall extend beneath the element for a distance equal to or greater than the required reach depth over the obstruction. For a high forward reach where the reach depth is 20 inches maximum, the maximum height shall be 48 inches. However, if the reach depth exceeds 20 inches, the high forward reach shall not exceed 44 inches, and the reach depth shall be limited to 25 inches.

Parallel or Side Reach
Where the side reach is unobstructed, both the cabinet handle AND the Stop the Bleed handle shall not exceed 48 inches in height above the finished floor or ground, with a minimum height of 15 inches. An obstruction is permissible between the clear floor or ground space and the element if the depth of the obstruction does not exceed 10 inches.

C.3 Stop the Bleed Cabinet Protrusion

Per 2010 ADA Standards for Accessible Design, any wall-mounted cabinet that protrudes more than 4 inches shall have the bottom corner no higher than 27 inches from the floor in a walkway.

In a circulation path (walks, hallways, ramps, stairways, landings, courtyards)

- If the mounting location is in a circulation path and the leading edge is between 27’ and 80’ AFF (48” in the above section), it shall protrude no more than 4” maximum horizontally into the circulation path (sections 204 and 307.2)
- If mounting 27 to 48 inches, the cabinet must be recessed or semi-recessed into the wall so it will not protrude more than 4 inches.
- If the cabinet has the leading edge below 27 inches, it may protrude any amount as long as it does not violate any exit corridor requirements in a room
- If the mounting location is not in a circulation path, it may project any amount from the wall.

C.4 2010 ADA Standards

Advisory 308.1 General. The following table provides guidance on reach ranges for children according to age, where building elements such as coat hooks, lockers, or operable parts are designed for use primarily by children. These dimensions apply to either forward or side reaches. Accessible elements and operable parts designed for adult use or children over age 12 can be located outside these ranges but must be within the adult reach ranges required by 308.

Children's Reach Ranges

Forward or Side Reach	Ages 3 and 4	Ages 5 through 8	Ages 9 through 12
High (maximum)	36 in (915 mm)	40 in (1015 mm)	44 in (1120 mm)

Children's Reach Ranges

Forward or Side Reach	Ages 3 and 4	Ages 5 through 8	Ages 9 through 12
Low (minimum)	20 in (510 mm)	18 in (455 mm)	16 in (405 mm)

308.2 Forward Reach

308.2.1 Unobstructed. Where a forward reach is unobstructed, the high forward reach shall be 48 inches (1220 mm) maximum, and the low forward reach shall be 15 inches (380 mm) minimum above the floor or ground.

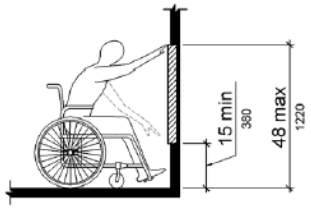


Figure 308.2.1 Unobstructed Forward Reach

308.2.2 Obstructed High Reach. Where a high front forward reaches is over an obstruction, the clear floor space shall extend beneath the element for a distance not less than the required reach depth for the obstructions. The high forward reach shall be 49 inches (1220 mm) maximum, where the reach depth is 20 inches (510 mm) maximum. Where the reach depth exceeds 20 inches (510 mm), the high forward reach shall be 44 inches (1220 mm) maximum, and the reach depth shall be 25 inches (635 mm) maximum.

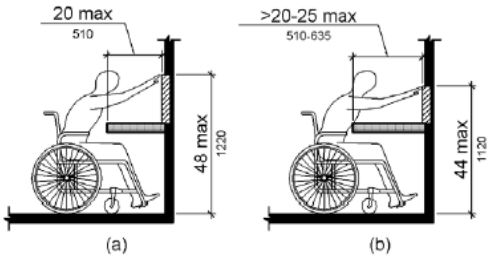


Figure 308.2.2 Obstructed High Forward Reach

308.3 Side Reach

308.3.1 Unobstructed. Where a clear floor or ground space allows a parallel approach to an element and the side reach is unobstructed, the high side reach shall be 48 inches (1220 mm) maximum and the low side reach shall be 15 inches (380 mm) minimum above the finish floor or ground.

Exceptions:

1. An obstruction shall be permitted between the clear floor or ground space and the element where the depth of the obstruction is 10 inches (255 mm) maximum.

2. Operable parts of fuel dispensers shall be permitted to be 54 inches (1370 mm) maximum measured from the surface of the vehicular way where fuel dispensers are installed on existing curbs.

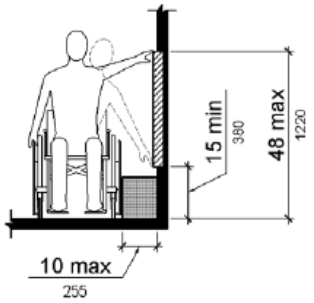


Figure 308.3.1 Unobstructed Side Reach

C.5 Stop the Bleed Cubix Cabinet Dimensions and Specifications

The Cubix CB2-BC-S and KC-S are two types of Stop the Bleed cabinets utilized on campus. The semi-recessed Stop the Bleed cabinet is also an approved AED wall storage cabinet appropriate for the campus. The Stop the Bleed Cabinets must be installed following Americans with Disabilities Act (ADA) standards.

The height to reach the handle of a Stop the Bleed kit in a public gathering place should be no more than 48 inches high. ADA guidelines specify maximum reach ranges for health equipment such as Stop the Bleed kits and other life safety devices. For safety equipment with an unobstructed approach, the maximum forward reach to the equipment is 48 inches above the floor. The maximum side reach for an unobstructed approach to a Stop the Bleed kit is 54 inches.

Standard Bleeding Control Wall Storage Cabinet:

Part Number: CB2-BC-S

Price (each): $126.65.

Dimensions: 14 3/4"L x 11 5/8"H x 6 3/4"W

Houses up to 6 Bleeding Control Kits.

	Interior Dimensions				Exterior Dimensions			
Standard Cabinets	Height	Length	Depth		Height	Length	Depth	Weight
Small	11 ⅜”	14 ½”	6 ½”		11 ⅝”	14 ¾”	6 ¾”	7.5 lbs.
	Packaging Dimensions (1 unit)				Palletized Dimensions (60 units)			
Standard Cabinets	Height	Length	Depth	Weight	Height	Length	Depth	Weight
Small	14”	18”	10”	10 lbs.	88”	40”	48”	620 lbs.

Components included:

Standard, Surface Mounted Bleeding Control Wall Storage Cabinet

- 0.8mm cold rolled steel
- Textured powder coating finish
- Recessed hinges
- Magnetic door

Transparent Acrylic Window

- Measures 7 ¼” H x 7” L

Keyed Alarm System

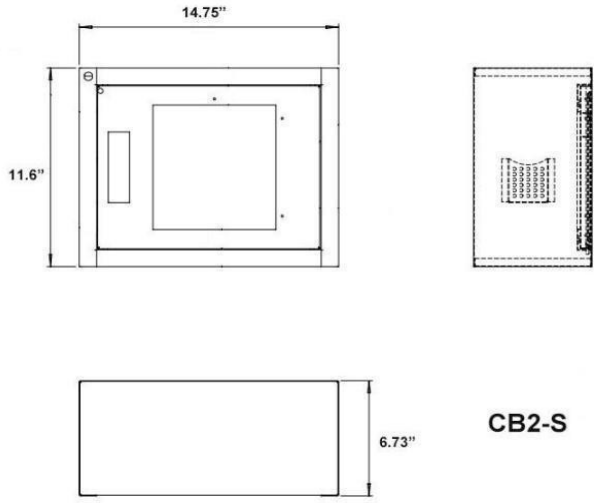
- Set of two keys
- 80-120 dB local alarm
- 9V battery

Mounting Hardware

- Wall Anchors (4)
- Washers (4)

- Screws (4)

This cabinet is designed to hold bleeding control kits, accessories, and other hemorrhage control products.



In case you need an additional storage cabinet, you may purchase a Small Bleeding Control Wall Storage Cabinet:

Part Number: KC-S

Price (each): $75.65

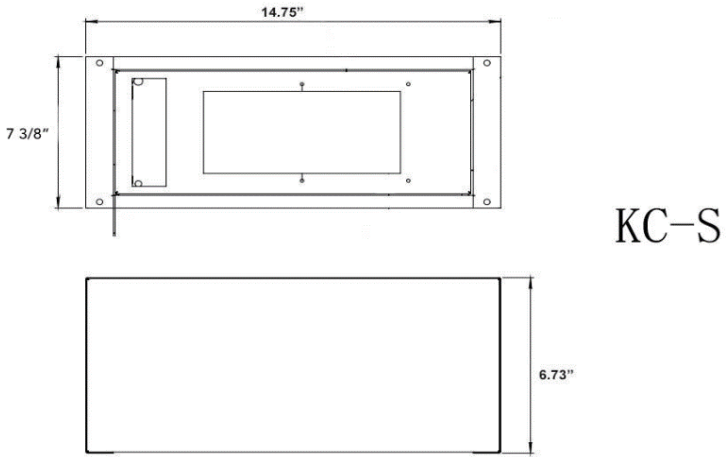
Dimensions: 14 3/4"L x 5 7/8"H x 6 3/4"W. It can House up to 4 Bleeding Control Kits.

	Interior Dimensions				Exterior Dimensions			
Kit Cabinets	Height	Length	Depth		Height	Length	Depth	Weight
Small	5 ⅝””	14 ½”	6 ½”		7 ⅜”	14 ¾”	6 ¾”	6 lbs.
	Packaging Dimensions (1 unit)				Palletized Dimensions			
Kit Cabinets	Height	Length	Depth	Weight				
Small	9”	17”	8”	7.5 lbs.				

Components included:

Small Kit Storage Cabinet

- 0.8mm cold rolled steel
- Textured powder coating finish
- Recessed hinges
- Magnetic door
- Viewing window measuring 6 ⅝” L x 3 ⅝” H



Sticker Pack

- Naloxone
- Bleeding Control
- Allergy
- First Aid
- Oxygen

Keyed alarm system

- Set of two keys
- 80-120 dB local alarm
- 9V battery

Mounting Hardware

- Wall Anchors (4)
- Washers (4)
- Screws (4)

Semi-Recessed AED or Bleeding Control Wall Storage Cabinet

Part Number: SR-S

When placing the order for Part Number: SR-S, it is essential to specify whether it is for an AED or for Bleeding Control.

Price (each): $160.65.

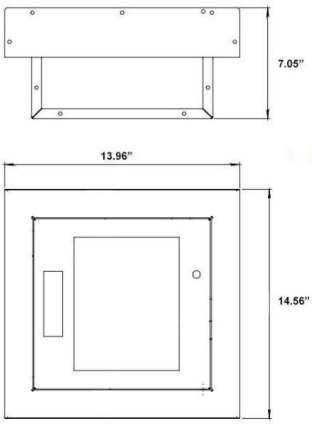
Dimensions: 14 3/4"L x 11 5/8"H x 6 3/4"W

Houses up to 6 Bleeding Control Kits.

	Interior/Rough Wall Dimensions				Exterior Dimensions			
Recessed Cabinets	Height	Length	Depth		Height	Length	Depth	Weight
Large	12”	12”	6 ¾” / 4”		14 ½”	14”	3 ⅛”	9 lbs.
	Packaging Dimensions (1 unit)				Palletized Dimensions (40 units)			
Recessed Cabinets	Height	Length	Depth	Weight	Height	Length	Depth	Weight
Large	17”	17”	10”	11 lbs.	88”	48”	40”	750 lbs.

Components included:

- Semi-Recessed AED or Bleeding Control Wall Storage Cabinet
  - 0.8mm cold rolled steel
  - Textured powder coating finish
  - Recessed hinges
  - Magnetic door
- Keyed alarm system
  - Set of two keys
  - 80-120 dB local alarm
    - 9V battery
- Mounting Hardware
  - Screws (4)
  - Wall Anchors (4)
  - Washers (4)



This cabinet is designed to hold Philips, Heartsine, and Defibtech AEDs or Stop the Bleed Kits

C.6 Signage

Stop the Bleed units shall have signage on the building exterior and at the main entry door indicating their location, next to an installed AED unit. The “Stop the Bleed” sign shall include the symbol for the Stop the Bleed kits with text stating “Bleeding Control” and a decal on the Stop the Bleed unit box stating, “Bleeding Control on Site.”

Highly visible, three-dimensional transforming “Bleeding Control” sign that allows individuals to locate the bleeding control station that can be used in three different configurations (Flat, Corner, and triangular) directions Each panel: 7" x 4 1/2"

Part Number: Flex3DWS-BC

Price (each): $20

Bleeding Control On-Site Decal

The Bleeding Control On-Site Decal serves as a vital visual aid in emergency response settings, providing clear guidance and awareness of the presence of bleeding control supplies on-site. Crafted with durable materials and featuring bold, easy-to-read lettering and symbols, this decal ensures prominent visibility in various environments, including schools, workplaces, and public venues.

By prominently displaying the location of bleeding control resources, the decal enhances preparedness and empowers individuals to respond effectively to critical situations. Its weather-resistant design and adhesive backing enable secure placement on walls, doors, or other surfaces, serving as an essential component of comprehensive bleeding control readiness strategies.

Part Number: BC- Decal / Cubix safety Bleeding Control Decal.

Price (each): $10

Weight: 0.25 lbs. Measures: 4" L x 5" H


BLEEDING
CONTROL
ON SITE

Appendix D: Cost Breakdown for Stop the Bleed Control Kit

EH&S has provided a detailed cost breakdown for departments looking to determine the expenses associated with acquiring trauma kits. The department has partnered with CPR1, the current vendor for the AED program. Each kit below is a cost breakdown and quantity needed for a building meeting the occupant's amount of over 200.

CPR1 Bleeding Control Kit				
Product Number	**Product Description**	**Unit Price**	**Quantity**	**Total**
BC-S-SWATT (Single Kits; Standard)	Bleeding Control Kit-Standard Includes: SWAT-T Tourniquet, 6-inch Emergency Trauma dressing, 2 packs compressed wound-packing gauze, Trauma shears, 2 pair of Nitrile responder gloves, Survival Blanket, Permanent marker, and Instruction card arranged in red rip-stop nylon rapidly deployable zippered pack.	**$50.15**	**6**	**$300.90**
BC-I-CAT (Single Kits; Deluxe)	Bleeding Control Kit-Intermediate Includes C-A-T® Tourniquet, HyFin Vent Compact Chest Seal Twin-pack, 6-inch Emergency Trauma dressing, 2 packs of compressed wound-packing gauze, Trauma shears, 2 pair of Nitrile responder gloves, Survival Blanket, Permanent marker and Instruction card arranged in a red rip-stop Nylon rapidly deployable zippered pack.	**$69.70**	**6**	**$418.20**

BC-Pq-CAT (Single Kits; Premium)	Bleeding Control Kit-Premium Includes: C-A-T® Tourniquet, HyFin Vent Compact Chest Seal Twin-pack, 6-inch Emergency Trauma dressing, 1 Quikclot Bleeding Control dressing, 1 compressed wound-packing gauze, Trauma shears, 2 pair Nitrile responder gloves, Survival Blanket, Permanent marker, and Instruction card arranged in a red rip-stop nylon rapidly deployable zippered pack.	**$94.35**	**6**	**$566.10**

Appendix E: Cost Breakdown for Stop the Bleed Control Kit Cases

EH&S has provided a detailed cost breakdown for departments looking to determine the expenses of acquiring trauma kits that would require a housing unit for kits ranging between 4-6. EH&S has partnered with CPR1, the current vendor for the AED program. The cost breakdown for each kit case is below; the installation costs for all specific work areas will be the responsibility of the requesting department.

CPR1 Bleeding Control Kit Case				
Product Number	**Product Description**	**Unit Price**	**Quantity**	**Total**
KC-S (Can house up to 4 Bleeding Control Kits) 	Dimensions: 14 3/4"L x 5 7/8"H x 6 3/4"W	**$75.65**	**1**	**$75.65**
CB2-BC-S (Can house up to 6 Bleeding Control Kits) 	Dimensions: 14 3/4"L x 11 5/8"H x 6 3/4"W	**$126.65**	**1**	**$126.65**
Semi-Recessed: SR-S (Can house up to 6 Bleeding Control Kits). When placing the order for Part Number: SR-S, it is essential to specify whether it is for an AED or for Bleeding Control. 	Dimensions: 14 3/4"L x 5 7/8"H x 6 3/4"W	**$160.65**	**1**	**$160.65**

E.1 Campus Installations

One Time Cost for Installation Through Facilities Services				
Product Number	**Product Description**	**Unit Price**	**Quantity**	**Total**
UCR Campus Installation	**Installation of the unit through facility services requires a maintenance work order. Additionally, in the event of relocation to a new location, an extra fee will be applied, along with a new work order.**	**$105.75**	**2 hours minimum**	**$211.50**

Appendix F: Stop the Bleed Kits Campus Assessment Form

Stop the Bleed Department Request Form

Date of Request:	
Department Name:	
Stop the Bleed Department Designee:	
Stop the Bleed Department Designee Phone Number	
Stop the Bleed Department Designee Email Address	
The number of Stop the Bleed Kit(s) requested:	
Location of Stop the Bleed Kit(s)(Building/Room):	
Department Manager:	
Checking Stop the Bleed Kits	☐ Stop the Bleed Department Designee ☐ EH&S Stop the Bleed Coordinator
Department COA:	

Acquiring Stop the Bleed kits is a significant investment, **requiring 5-10 years of commitment**. Departments wishing to acquire Stop the Bleed kits must arrange funding for the initial setup and ongoing maintenance, including replacement of the Stop the Bleed kits when expired, installation of Stop the Bleed cabinet, and monthly unit checks. The costs for all specific work areas and vehicle units requested, unless mandated by a specific regulation, will be the **requesting department's responsibility.**

The Department or Administrative Unit agrees to the above responsibilities.

Signature: _____ Date: _____

For any inquiries or to submit this form, please contact the EH&S Occupational Health Coordinator at ehsocchealth@ucr.edu

A detailed cost breakdown has been provided for departments looking to determine the expenses of acquiring trauma kits that require housing units for 4-6 kits. A partnership with CPR1, the current vendor for the AED program, has been established. The cost breakdown

for each kit case is outlined below, with installation costs for specific work areas being the responsibility of the requesting department.

Unit Price * is based on price data collected for 2024-2025; unit price can vary based on the time of purchase.

Renewal cost ** This can vary based on the unit price, sales tax, and shipping cost at the time of purchase.

CPR1 Bleeding Control Kit Case				
Product Number	**Product Description**	**Unit Price**	**Quantity**	**Total**
KC-S (Can house up to 4 Bleeding Control Kits) 	Dimensions: 14 3/4"L x 5 7/8"H x 6 3/4"W	**$75.65**	**1**	**$75.65**
CB2-BC-S (Can house up to 6 Bleeding Control Kits) 	Dimensions: 14 3/4"L x 11 5/8"H x 6 3/4"W	**$126.65**	**1**	**$126.65**
Semi-Recessed SR-S (Can house up to 6 Bleeding Control Kits) When placing the order for Part Number: SR-S, it is essential to specify whether it is for an AED or for Bleeding Control. 	Dimensions: 14 3/4"L x 5 7/8"H x 6 3/4"W	**$160.65**	**1**	**$160.65**

Campus Installations

One Time Cost for Installation Through Facilities Services				
Product Number	Product Description	Unit Price	Quantity	Total
UCR Campus Installation	Installation of the unit through facility services requires a maintenance work order. Additionally, in the event of relocation to a new location, an extra fee will be applied, along with a new work order.	$105.75	2 hours minimum	$211.50

Appendix G: Stop the Bleed Monthly Check Log Form

Instructions: This form must be completed monthly to ensure that the Stop the Bleed kit is ready for use. Upon completion, keep the monthly log with the unit and contact the EH&S Stop the Bleed Program Coordinator for any issues found at ehsocchealth@ucr.edu.

Checking the Stop the Bleed Unit	☐ Stop the Bleed Department Designee ☐ EH&S Stop the Bleed Coordinator
Name	
Email	
Phone	
How many Stop the Bleed Kits are present in your unit:	
Any issues found	

EH&S AED Program Coordinator or the Department Designee is responsible for completing monthly checks for AEDs unless an exception is made.

The inspection includes verifying:

Bleeding Control Kit-Standard Includes:

- ☐ One C-A-T Tourniquet,
- ☐ One 6-inch Emergency Trauma dressing,
- ☐ Two packs of compressed wound-packing gauze,
- ☐ Trauma shears,
- ☐ Two pairs of Nitrile responder gloves,
- ☐ Survival Blanket,
- ☐ Permanent marker,
- ☐ Instruction card arranged in red rip-stop nylon rapidly deployable zippered pack.

Any Items to purchase: _____

Additional observations: _____

Time: _____ ☐AM ☐PM Check:☐Good ☐Bad ☐Other: _____

Print Name of Checker: _____ Date: _____

Signature of Checker: _____

Inspection Checklist for Stop the Bleed Units:

External Condition of the Kit:

- Ensure the kit is intact with no visible damage to the case or packaging.
- Check that the kit is stored in an easily accessible location, clearly marked, and free from obstructions.
  - ☐ **Contents of the Kit:** Verify that all items are present and in good condition. Replace any missing, expired, or damaged items. The typical contents include:
  - ☐ **Tourniquets:** Ensure there are sufficient tourniquets and they are in good working condition.
  - ☐ **Hemostatic Dressings:** Check for expiration dates and replace if expired.
  - ☐ **Compression Bandages:** Inspect for any damage or signs of wear.
  - ☐ **Gauze Rolls and Pads:** Confirm availability and check for expiration.
  - ☐ **Trauma Shears:** Ensure they are present and functional.
  - ☐ **Gloves:** Verify there are multiple pairs of non-latex gloves.
  - ☐ **Marker:** Ensure there is a functioning marker to note the time of tourniquet application.
  - ☐ **Instructional Guide:** Confirm the presence of a Stop the Bleed instructional guide or quick reference card.
  - ☐ **Emergency Blanket:** Check for tears or damage and replace if necessary.

Expiration Dates:

- ☐ Review all expired items, such as hemostatic dressings and gauze, and replace any that are expired.

Functionality Check:

- ☐ Test the functionality of reusable items like trauma shears and ensure tourniquets can be properly tightened.
- ☐ Keep a log of inspections, noting the date, inspector's name, and any actions taken (e.g., items replaced).
- ☐ Ensure the log is easily accessible and up to date.

Appendix H: Stop the Bleed Post-Use Form

Instructions: This form should be completed on-site as thoroughly as possible by the Stop the Bleed responder or professional responders after using a Stop the Bleed kit. Once completed, promptly contact the EH&S Stop the Bleed Program Coordinator at ehsocchealth@ucr.edu or call 951-827-5528 to arrange pick-up within 24 hours and ensure notification to the regulatory body for this program.

Name: _____

Department: _____

Email: _____ **Phone:** _____

Were you the primary responder who used the Stop the Bleed kit? ☐Yes ☐ No

If not, name the person who used the Stop the Bleed Kit: _____

Individual's Name (Optional): _____

Individual's Age: _____ **Gender:** _____

How was the Individual Found? _____

Date of Incident and Time of Incident: _____

Location of Incident (Address and Precise Location): _____

Additional Comments: _____

Other: _____

Responding EMS Service:_____

Individual's Outcome (if known):

☐Discharged Alive ☐DOA at ER ☐Died in ER ☐Died within 24hrs ☐Died After 24hrs

Estimated Response Time: _____☐AM ☐ PM

Receiving Hospital (if known): _____

Additional observations: _____

Name of responder: _____ **Date:** _____

Signature of responder: _____