

May 15th, 2019

Dear Colleague,

I nearly died in 2017. While attending the Republican Governor's Association Conference in Austin, Texas, I experienced an out-of-hospital cardiac arrest (OHCA). My heart stopped beating - making me one of over 350,000 Americans who experience an OCHA each year. I am blessed to be one of only 10% of patients who survived to hospital discharge and, amazingly, without any neurological deficit.

Successful resuscitation from OHCA, a critical measure of a community's emergency response readiness, requires a carefully coordinated response by many individuals including bystanders, emergency medical dispatchers, first responders, EMTs and paramedics and hospital providers. I am thankful for the excellent EMS system in Austin/Travis County which saved my life.

The Austin Community also participates in the Cardiac Arrest Registry to Enhance Survival (CARES) Program, which allows them to benchmark their cardiac arrest performance with local, state, or national metrics to better identify opportunities to improve their OHCA care. CARES provides comprehensive cardiac arrest data that allows informed decision-making and allocation of limited resources for maximum community benefit. CARES has transformed the way that EMS agencies treat cardiac arrest by using real-time feedback and analysis to increase patient survival. This Registry data collection is critical because it allows communities and public health organizations to monitor care and improve their performance.

CARES, a program based out of Emory University in Atlanta, Georgia, and founded by the Center for Disease Prevention and Control, has been collecting OHCA data since late 2005. The CARES registry covers a population of over 130 million people or 40% of the US population, includes a total of over 350,000 records and approximately 70 participating communities in 19 states, and 23 state based registries, 1,400 EMS agencies and over 1,900 hospitals. CARES has published over 60 articles in peer reviewed journals and has supported countless quality improvement efforts in participating communities, resulting in an increase in cardiac arrest survival and a more thorough understanding of OHCA treatment and survival in the field of emergency medicine.

Considering its positive impact on reducing OHCA deaths, I was amazed to learn that every state does not participate in CARES. My goal is for all states to participate in CARES so more lives can be saved. CARES state participation cost is minimal - a \$15,000 annual subscription fee and support for a CARES state coordinator.

I have asked Dr. Bryan McNally, Executive Director of CARES, to join me in asking you to bring CARES to your state. Enclosed are background materials that explain CARES and state participation in more detail. If you have questions about the program or state participation, please contact the Director of Operations of CARES, Allie Crouch (ajpark4@emory.edu).

Sincerely,

Tom Ridge First Secretary, U.S. Department

of Homeland Security 43<sup>rd</sup> Governor of Pennsylvania

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Bryan McNally, MD, MPH Executive Director, CARES

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