



## Resources

### for Survivors of Cardiac Arrest

#### **The Save Hearts in Arizona Registry & Education (SHARE) Program**

Arizona Department of Health Services | Bureau of EMS & Trauma System  
602-364-0580

#### ❖ **SHARE Supports Survivors**

Many of our partner organizations offer psychological and emotional support and advocacy opportunities for cardiac arrest survivors and their families.

Sudden Cardiac Arrest Foundation (SCAF) – The SCAF Survivor Network is a private, members-only online community for sudden cardiac arrest survivors. Once survivors register with the site, they can share their experiences, find others who have been through similar life-changing events, and help one another during the healing process. Join the SCAF Survivor Network and participate in the Arizona affiliate forum.

<http://www.sca-aware.org/> Facebook: <https://www.facebook.com/youcansavealife> ; Toll Free: (877) 722-8641

Sudden Cardiac Arrest Association (SCAA) – The SCAA’s COPE Program offers helpful articles on a wide-range of topics for survivors and family members.

<http://www.suddencardiacarrest.org/aws/SCAA/pt/sp/cope>; Toll-Free: (866) 972-SCAA

Parent Heart Watch (PHW) – PHW is a state-by-state network of parents and partners solely dedicated to reducing the often disastrous effects of Sudden Cardiac Arrest in youth.

<http://www.parentheartwatch.org>; Toll-Free: (800) 717-5828

- ◆ Please visit the SHARE website [www.azshare.gov](http://www.azshare.gov) for a complete list of organizations ◆

#### ❖ **SHARE Celebrates Survivors**

Celebrate your life by attending a Survivor event. Our planned events often include the emergency responders and bystanders who were part of your experience. We will keep you informed of dates and times of events throughout the state.

#### ❖ **SHARE Shares Survivor Stories**

Much about a cardiac event can be described as “life-changing” and many survivors and their family members want to share what they have learned as a result of the experience. The SHARE website features stories written by survivors or loved ones. We welcome your story.

The Arizona Department of Health Services Bureau of Emergency Medical Services & Trauma System wants every Arizonan to know what to do if an adult suddenly collapses and is unresponsive. Their Save Hearts in Arizona Registry and Education (SHARE) Program promotes a comprehensive, standardized system of out-of-hospital cardiac arrest care throughout Arizona encompassing all “links” in the “chain of survival”: bystander response, emergency medical dispatcher CPR instruction, emergency medical services provider resuscitation, and standardized care at hospitals. SHARE also seeks to support survivors of out-of-hospital cardiac arrest by providing them with helpful resources.



**ATTENTION: Arizona Cardiac Arrest Survivors**

Mail, FAX, or Email this form to:  
Alyson Welch, SHARE PROGRAM  
Arizona Department of Health Services  
150 N. 18<sup>th</sup> Ave., Suite 540  
Phoenix AZ 85007  
FAX: 602-364-3568  
[Alyson.welch@azdhs.gov](mailto:Alyson.welch@azdhs.gov)

(This information will remain private unless you have authorized us to share it.)

I am a survivor

I am a family member or a friend of a survivor. Name and relationship to survivor:

\_\_\_\_\_

Survivor Information:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Date of incident: \_\_\_\_\_

Responding EMS Agency: \_\_\_\_\_

Location of Cardiac Arrest: \_\_\_\_\_

I have an ICD: \_\_\_\_\_

Transported to Hospital by which Fire Dept. / Ambulance Company \_\_\_\_\_

Hospital: \_\_\_\_\_

Was bystander CPR performed? \_\_\_\_\_ Bystander's name/relationship: \_\_\_\_\_

Would you or a family member be willing to write your story for the SHARE website? ([www.azshare.gov](http://www.azshare.gov)) \_\_\_\_\_

If so, would you be willing to include a photograph? \_\_\_\_\_ Would you like to be invited to survivor events? \_\_\_\_\_

Would you like to join the Arizona Cardiac Arrest Survivors' group? \_\_\_\_\_ (If yes, you will be contacted.)

Also you can reach the group at: [azcasurvivor@gmail.com](mailto:azcasurvivor@gmail.com), 602-317-6595,