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SENATOR JOHNSON: (Laugh) Well, I'll put on my light again, then. Mr. President, should I go ahead with...we're down to zero seconds.

SENATOR CUDABACK: I'm sorry, but you're not the next speaker, Senator Johnson.

SENATOR JOHNSON: All right.

SENATOR CUDABACK: Senator Baker, you have five seconds if you wish to use them.

SENATOR JOHNSON: I yield...

SENATOR CUDABACK: Senator Baker.

SENATOR BAKER: Thank you, Mr. President and members. I don't know whether I'm the only one in the building or anyone on the floor that's certified defibrillator current...I am. We...as an EMT...we need our Lieutenant Governor back in here. He's a certified paramedic, and I'm sure his ambulances have defibrillators in them. I can answer a few questions. I...our ambulance service...I had to take training years ago when we started using defibrillators. There was external defibrillators, and then we went to automatics. Automatics is what we have over in the Clerk's Office. It's a compact little machine that has two leads on it, red and a white. Reds are standard. White, right; red, ribs. And it...you open up the cover on it, it will tell you where to put the electrodes. It will do a self-assessment of the machine, and then it will do assessment of the patient. And it will not...if there's a shockable rhythm on there, then it will say, stand back, and you press a button, and it shocks that person, and hopefully returns that rhythm to a...I want to say a normal rhythm. If it's a straight line, it won't allow you to shock. And if it's a...say, a fibrillation that's not a shockable rhythm, it will not allow you to shock that person. It's all automatic. It's all built in within the machine. And it's impossible, absolutely impossible, to shock someone who has a rhythm that is a...so-called, a workable heart, it's a working heart. So