

## **AED Check**

Serial Number:			
Date:			
Location:			
General Informa	tion		
Question		Yes	No
Is the AED unit locate	d in the designated area?		
Is the AED unit cleane	ed and undamaged?		
Is the AED in an alarm	ned cabinet?		
Does the alarm on the	e AED Cabinet work?		
Did you replace the a	larm batteries?		
If yes:	Insertion Date:		
	Change Date:		
	Expiration Date:		
Is there an AED Prep	kit present?		
Is the prep kit sealed a	and undamaged?		
If no:	Does your rescue kit include these items?		
	Gloves		
	Prep Razor		
	Scissors		
	Towel		
	Moist Towlette		
	CPR Mask		
Pads			
Question		Yes	No
Note the expiration d	ate. Are they going to remain attached?		
	Pad:		
	Expiration Date:		
	Lot Number:		

Are you installing new electrodes(pag	ds)?		
If yes:	Pad:		
•	Expiration Date:		
	Lot Number:		
Batteries			
Question		Yes	No
Note the expiration date. Are they go	ping to remain attached?		
	Battery:		
	Expiration Date:		
	Lot Number:		
Are you installing new batteries?			
If yes:	Battery:		
	Expiration Date:		
	Lot Number:		
AED Ready  Question		Yes	No
Is the Status Indicator showing the Al	ED in a ready status?		
Checked By			
Full Name:	Signature:		
Comments			