

INSCO

Monthly AED Checklist

Instructions: This monthly checklist shall be completed every month by the PAD Coordinator and kept on file for inspection/review by state, county or local officials and by the Medical Oversight Physician/designee.

AED UNIT: Phillips Heartstart

Date: _____

Site: INSCO - TORRANCE

AED Location: Break Room

Instruction	Recommended Actions	Good	Bad
Examine the AED case, connector and battery well for: <ul style="list-style-type: none">• Foreign substances• Damage or cracks	Clean device		
	Contact authorized service personnel		
	Replace batteries		
Examine the battery pins for bending or discoloration or leakage/corrosion	Replace, if needed		
Check expiration date on batteries and electrodes	Replace damaged or broken parts		
Examine the accessory cables for cracked, damaged, broken or bent connectors	If unit does not respond appropriately, contact authorized service personnel		
With battery installed, press ON/OFF button to turn on the AED and look for: <ul style="list-style-type: none">• Self-test messages• Make sure unit responds			
"BATTERY LOW" or "REPLACE BATTERY" message	Replace batteries immediately		
Service indicator or "CALL SERVICE" message	Contact authorized service personnel		
Comments: 			

If any section above was marked "BAD", was it corrected? Yes No N/A

Name Printed: _____ **Signature:** _____