

AED – Automated External Defibrillator Maintenance Checklist



Location: _____

Inspection performed by: _____

Rating, Corrective Action To Be:

✓ (adequate) X (expired / missing items) B (battery needs replacement)

CRITERIA	January	February	March	April	May	June	July	August	September	October	November	December
AED												
Placement visible, unobstructed & near a phone (if possible)												
Verify AED battery expiration date and battery installation. MFG date:												
Check the status / service indicator light (Green-OK, Red – Problem)												
Verify absence of visual / audible service alarm												
Clean, no dirt or contamination, no damage present												
SUPPLIES												
One sets of Adult AED pads												
One set of pediatric pads												
Check expiry date on pad packages Adult: Pediatric:												
Pocket mask with one way valve												
Examination gloves												
Scissors												
Razors												
Absorbent gauze or hand towels												
ADDITIONAL REQUIREMENTS FROM AED MANUFACTURER												
Open the cabinet door to ensure the door alarms (if not – replace the batteries)												

<p>Corrective Action / Comments: Any defective / missing / expired items please notify the S&H Officer.</p>	
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**Refer to manufacturer’s user manual for more information and proper annual maintenance procedures.