

Automated External Defibrillator Maintenance Checklist

Date _____ Location _____
 Inspection Performed by _____

Criteria	Status												
		January	February	March	April	May	June	July	August	September	October	November	December
AED													
Visible placement													
Check expiration dates of pads/battery in AED, replace if necessary.													
Check the status indicator light													
Note absence of visual/audible service alarm													
Check unit and accessories for damage, dirt, and contamination. Clean or replace as necessary.													
Date and Initial AED Inspection Tag													
SUPPLIES													
Two sets of AED pads in sealed package													
Check expiration date on extra pads package													
Check expiration date on extra battery package													
CPR shield with one-way valve													
Examination gloves													
Razor/Scissor													

Please refer to manufacturer's User's Manual for more information and proper annual maintenance procedures.