


LIFEPAK CR PLUS AED MAINTENANCE	YEAR:
Site Name:	Primary Liaison:
Site Address:	
Site Phone:	Backup Liaison:

SERIAL # OF AED:	
Electrode Expiration Date:	Pediatric Pad Expiration Date (optional):
Specific Location of Unit:	

Check each LIFEPAK CR Plus AED monthly for the following:

- "OK" on the Readiness Indicator 
- Electrode Expiration Date
- Ambu Rescue Kit Available (razor, mask, gloves)
- Unit is free from any damage

Place initials in column indicating a monthly check has been completed

	January	February	March	April	May	June	July	August	September	October	November	December
Check done												
Initials												

Comments:

KEEP THIS FORM FOR YOUR RECORDS

For Device Questions or Service, Please Call Physio-Control 1-800-442-1142

For local support from Sedona Fire District contact Joshua Wells, padinfo@sedonfire.org, 1-928-699-8853