Checklist of E/OHS Activities for Automatic External Defibrillator

Program Contact Person: Brian Mohr

School policy for use adopted in place? *Yes No N/A*

Brand of AED? Phillips Heart Smart Model # M5066A-ABA

Name of Medical Director? The device was purchased through the Hutchinson Medical Clinic. It is assumed the Medical Director of the clinic would serve in that capacity.

Year device was placed into use? 2006

Location(s) of devices:

|  |  |  |  |
| --- | --- | --- | --- |
| Building Name  | Location in Building | Expiration date of pads? | Expiration date of batteries? |
| West Elementary | (1) Foyer above fire extinguisher | (1) Adult 5/2017Child 7/2017 | 10/2020 |
| Park Elementary | (1) Hall by main office near water fountain | (1) Adult 5/2017Child 7/2017 | 12/2016 |
| Middle School | (1) Hall by office(2) Auditorium | (1) Adult 5/2017 Child 5/2017(2) Adult 7/2017 Child 5/2017 | (1) 7/2016(2) 5/2017 |
| High School | (1) Foyer(2) Wrestling room | (1) Adult 5/2017 Child 4/2017(2) Adult 4/2017 Child 6/2017 | (1) 6/2017(2) 6/2017 |

Have all software updates been installed? *Yes No N/A*

Date of update installation*: Winter 2007-2008*

Has staff been trained on operation of the device? Yes, all school nurses and Emergency responders are trained biannually.

* Most recent date of training: August 2015

  *(date*

* Provider of training: American Heart through the Hospital

Location of operators manual: School nurse office and one at each building

Are battery checks documented? Yes, a check list is available at each AED station.