# Defibrillator Post-use Checklist

## Physio Control LIFEPAK CR Plus

<table>
<thead>
<tr>
<th>Field</th>
<th>Completed</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physio Control LIFEPAK CR Plus Serial Number: ................................</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Defibrillator Coordinator:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Defibrillator Location:</td>
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</tr>
</tbody>
</table>

*Complete the checklist and forward to the Occupational Health Team for retention.*

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**Refer to Physio Control LIFEPAK CR Plus User Manual Sections 3-5 and 5-1 to 5-8 for detailed instructions. Contact the Occupational Health Team for assistance.**

1. Unit and accessories are free from damage, dirt and contamination
   Clean and/or replace if necessary (refer to Sections 5-1 and 5-3)
   
   - [ ] YES
   - [ ] NO
   
   ....../……/........

2. Transfer data from the defibrillator, if desired (refer to Section 4-1)
   
   - [ ] YES
   - [ ] NO
   
   ....../……/........

3. New CHARGE-PAK battery charger is connected or a replacement has been ordered* (refer to Section 5-5)
   *Please note: CHARGE-PAK will usually require replacement after use
   CHARGE-PAK battery charger has not passed expiration date
   
   - [ ] YES
   - [ ] NO
   
   ....../……/........

4. New QUIK-PAK electrode package is connected or a replacement has been ordered* (refer to Section 5-7)
   New QUIK-PAK electrode package has not passed expiration date
   
   - [ ] YES
   - [ ] NO
   
   ....../……/........

5. Close the lid and verify that the **OK** symbol appears in the readiness display, indicating the defibrillator is ready for use (refer to Section 3-5)
   *If either of the CHARGE-PAK **ATTENTION △** or WRENCH **индикаторы** appear, refer to the User Manual or contact authorised service provider
   
   - [ ] YES
   - [ ] NO
   
   ....../……/........

**Signature:** ........................................................................................................ (Print name if different to Defibrillator Coordinator listed above) 

....../……/........

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*Order replacement battery charger or electrode package immediately post use. While awaiting pad replacement, place ‘OUT OF ORDER’ signage on the defibrillator.*