

Defibrillator Post-use Checklist

| Mediana HeartOn A15 | | | |
|---|---|---------------|------|
| Mediana HeartOn A15 Serial Number: | | | |
| Defibrillator Location: | | | |
| Complete the checklist and forward to the Occupational Health Team for retention. | | | |
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| | to Mediana HeartOn A15 AED Operator's Manual pages 31-34 for detailed instructions. ct the Occupational Health Team for assistance | Completed | Date |
| 1. | Unit and accessories are free from damage, dirt and contamination Clean and/or replace if necessary (refer to page 33) | □ YES □ NO | // |
| 2. | Transfer data from the Event Review Software, if desired (refer to page 31) | □ YES □ NO | |
| 3. | New electrode pads are connected or replacement has been ordered* (refer to page 33) New electrode pads have not passed expiration date | □ YES □ NO | |
| 4. | New battery is connected or a replacement has been ordered* (refer to pages 32-33) Defibrillator has passed Battery Insertion Self-test (refer to pages 13, 15-19) Battery has not passed expiration date Battery Status Icon show fully charged status | □ YES □ NO | // |
| 5. | Power On Self Test (POST) conducted (refer to page 18) Hold ON/OFF button down for at least 5 seconds to start a POST (manually initiated self-test). Upon successfully completing of the POST, the unit will sound the voice prompt "Unit ok" and the status indicator will change from to one of the unit by closing the cover | □ YES □ NO | |
| 6. | Service Indicator shows unit is ready to use (refer to page 9) | ☐ YES ☐ NO | |
| Signature: (Print name if different to Defibrillator Coordinator listed above) | | | // |

Date of next review: 2024

^{*} Order replacement electrode pads immediately post use. While awaiting pad replacement, place 'OUT OF ORDER' signage on the defibrillator.