

Southern Stone County Fire Protection District

AED Checklists

Name _____ AED # _____ Date _____

Station # _____

AED is clean no dirt or contamination	Yes	No	
Case is intact with no cracks or damage	Yes	No	
Status indicator is OK	Yes	No	
Adult pads within expiration	Yes	No	Exp Date:
Peds pads within expiration	Yes	No	Exp Date:
Razor	Yes	No	
Pocket mask	Yes	No	
gloves	Yes	No	
AED case in good condition	Yes	No	