## OKLAHOMA DEPARTMENT OF CORRECTIONS DAILY/MONTHLY AED/NARCAN INSPECTION LOG

acility:														Month/Year:																		
ding: AED Location:										AED Serial No.:											AED Battery Date:											
staff member will init ED is GREEN. If stati	al ve us ligh	rifying nt is f	g the	ey ha , noti	ve co	ondu HSA	cted or de	the d	laily ee a	mair and re	ntena efer t	ince to tro	chec uble:	k of t	he A	ED. able	The in th	daily e "In	/ mai nstrud	ntena	ance s for	che Use	ck w Guid	ill ind de" lo	clude ocate	verif d in l	icatio back	on th pocl	at the	e ligh f AEI	nt o O ca	
Daily AED Maintenand Check	ily AED Maintenance Check 1 2 3 4 5 6 7 8 9								10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
ED Light is Green (✔	)																															
itials																																
	MO	NTHI	Y CI	HECK	ζ - Δ	FD					<b>(√)</b>			•				M	ONTH	11 Y (	CHEC	CK - I	VAR	CAN.					(✓)			
MONTHLY CHECK - AED Date										(*)				Da	MONTHLY CHECK - NARCAN (✓)  Date																	
AED Secured	in Ca	se																	ored		man	ner c	onsi	stent	with							
Battery Status and within the manufactures expiration date														manufacturer guidelines.  Naloxone kits protected from direct sunlight and stored in an area between 59 – 86 degrees Fahrenheit.																		
Electrodes in place and within the manufactures expiration date  AED Operation Verified *(see below for list)													Naloxone kits kept in a secure area that is accessible to trained staff.  Naloxone within the manufactures expiration date																			
Initials															Ini	tials																
*Operation C  1. Verify ba 2. Open the 3. Wait for STATUS verify tha 4. Check th 5. Listen fo 6. Close th to RED. INDICAT not return	ttery in the AED the AE INDIC to the Second	s not lid. ED to CATO STAT iration ob appro	indicate ind	ate st RED NDIC e on t pts. e the tely fi GREE	atus: Afte ATOF he el chan ve se N. If t	Obser app R retulectron ge of econd the S	erve to roximus to des. ( the Solutions, velocity to the Solutions)	the chately of GRE (Replater of GRE) (Replater of TATU (TIT) of TATU	ange five: EEN. ace it	e of the second of expining the second of th	nds, red) ATOF ATUS	;			1. 2. 3.	Nal guid Nal are Nal stat	oxon deline oxon a bet oxon ff. mage	e kits es. e kits weer e kits	s will n 59 - s will	ed in be pro- 86 d be ke ed kit	otect legre pt in s rep	ed fro es Fa a sec	om di ahrer cure a	rect s nheit. area t	unlig hat is	s acce	d be s	store	d in a	d		
Staff Name	taff Name Initial Staff Name										Initia	al	Sta	aff Na	f Name Initial							Staff	Nam			Initia	al					
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