AED Weekly Checks

MGH Biomed Control Number: _____

Date (mm/dd/yyyy)	**Pads In Date? (Y/N)**	**AED Ready for Use?** (Look for hourglass icon) **(Y/N)**	**Initials**	**Comments**
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Please contact Biomedical Engineering with any concerns regarding your AED.
Biomed Engineering: 617-724-1333