

**Board Policy 8310F(2): Inspection and Inventory**

Building: _____ Device Location: _____

DATE									
TIME									
r-Routine p-Post Use									

Inventory Items:									
Storage cabinet intact									
AED exterior intact									
Battery installed and functional									
Spare battery available									
AED self-test									
AED user guide available									
CPR guide available									
Two sets of electrodes									
Two Incident Report Forms									
Pen									
Two mouth barrier devices									
Razor									
Scissors									
Two pairs of non-latex gloves									
Gauze pads or towel									
Initials of Inspector									



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Corrective Action Required and Completed:

Date	Details	Reported to Superintendent	Initials