

## **INSTRUCTIONS FOR USING THE NATIONAL AED REGISTRY**

Welcome to the National AED Registry.

The National AED Registry is a free service made available to you by Atrus Inc., creators of the AED Link<sup>™</sup> system.

Where available at your local 9-1-1 center, AED Link rapidly links Sudden Cardiac Arrest victims, AEDs, and trained AED responders in the event of a Sudden Cardiac Arrest. When this system is activated in your community, you have the opportunity to voluntarily respond with this potentially lifesaving device by becoming a volunteer citizen responder. This is totally optional. A list of communities participating in AED Link is in Appendix B at the end of these instructions.

The National AED Registry is a robust repository for the AED Program data that is entered when you register. The Registry has no banner ads, does not spam or otherwise use this information.

One of the most important functions of the National AED Registry are the monthly email reminders sent to Site Managers/AED Coordinators and Inspectors to inspect, maintain and service the AEDs in their Program to ensure they are "operationally ready". By that we mean the battery is installed and working, the electrode pads are installed, and equally important that the AED is in the same location as previously reported in the Registry.

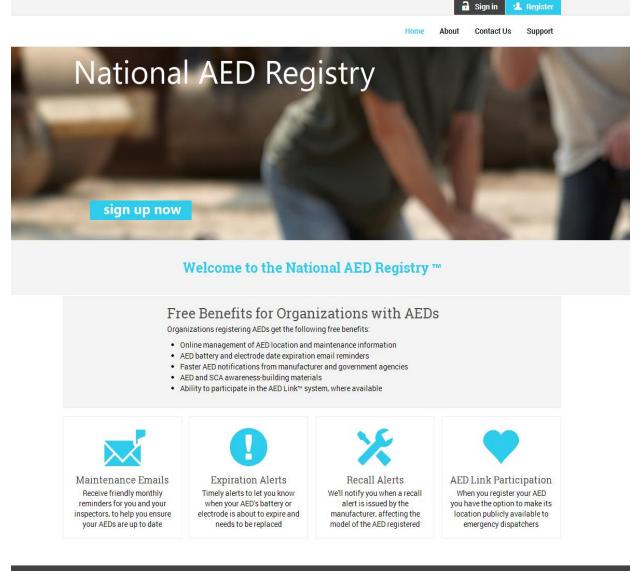
Additionally, prior to the expiration dates for the battery and/or the electrode pads, Site Managers/AED Coordinators and Inspectors will begin receiving email reminders of the upcoming expiration dates. These notices will become more frequent as the date nears and, if the accessories have not been replaced, continue until they are replaced.

That's a brief overview of the benefits available once you have registered in the National AED Registry.



Let's begin!

Start by opening any browser window to access the National AED Registry or press CTRL and click on the following link <u>http://nationalaedregistry.com/</u> to open or reverse click your mouse to open the Hyperlink). The use of Google Chrome or Mozilla Firefox is recommended.



QUICK LINKS

ABOUT

You should be looking at a page that looks like the above screen shot.

At the top of the opening page of the National AED Registry, there are two buttons - "Sign in" or "Register". There is also a "Sign up Now" button at the bottom of the picture.

If you have not registered your AED Program in the National AED Registry, click on the "Register" button at the top of the opening page or the "Sign up Now" button at the bottom of the picture.

Please follow along to complete registering in the National AED Registry.

### IMPORTANT: PLEASE NOTE THAT THROUGHOUT THE WEBSITE THERE ARE REQUIRED FIELDS DENOTED BY (\*).

Please complete the page below, noting all required fields (\*) including the acceptance of terms and conditions

| Program Details      | Program Sites        | Site AEDs | Finish |   |
|----------------------|----------------------|-----------|--------|---|
| lenotes required fie | Id                   |           |        |   |
| AED Coordina         | ator Information     |           |        | AED Coordinator Address                 |
| *Name                |                      |           |        | * Program Name (Same as Organization 📄) |
| First Name           | Las                  | t Name    |        | Name of your AED Program                |
| * Email Address      |                      |           |        | * Address Line 1                        |
|                      |                      |           |        | AED Coordinator Address                 |
| *Organization        |                      |           |        | Address Line 2                          |
| Organization         |                      |           |        | Address Line 2                          |
| Job Title            |                      |           |        | * City                                  |
| Job Title            |                      |           |        | City                                    |
| *Usemame             |                      |           |        | *Country                                |
| Username             |                      |           |        | United States 🔻                         |
| * Password           |                      |           |        | * State/Province                        |
| Password             |                      |           |        | Alabama 🔻                               |
| *Retype Password     | 4                    |           |        | *Zip Code/Postal Code                   |
| Confirm Passwo       | rd                   |           |        | 55555                                   |
| *Coordinator's AE    | D Training Program   |           |        | * Primary Phone                         |
|                      |                      |           |        | 5557771234                              |
| * Date Training Pr   | ogram Completed      |           |        | Text Message Enabled?                   |
|                      | gram, leave date sho | own)      |        | Alternate Phone                         |
| 05/29/2014           |                      |           |        | 5557771234                              |
|                      |                      |           |        | Text Message Enabled?                   |

Coordinator's AED Training Program: If AED Training is <u>not</u> mandatory, please click on the drop down arrow and highlight "n/a".

Date Training Program Completed: If Training Program is "n/a", then leave current date as shown.

Please don't forget to check the box to "accept the terms and conditions".

Next, you will be asked be add the locations at which AEDs are located for your Program.

Click on "Add New Location".

| ~                                    | 9   | Ψ                                   | ıС                                       |   |  |         |
|--------------------------------------|---|-------------------------------------|--|---|--|---------|
| Program Details                      | Program Sites                             | Site AEDs                           | Finish                                   |   |  |         |
| Acme Cafe, Acme<br>each AED found th | Corp 3rd Floor, Acm<br>roughout each site | e Corp Bldg C).<br>(e.g. behind rec | Later on during th<br>eption desk, on wa | e registration process, you will be<br>Il in employee lunchroom, etc.). | names you enter on this page should be fairly basic (<br>e asked to describe the precise physical placement lo | 1.1.1.1 |
| Location                             | Addre                                     | SS                                  | City                                     | State   | Individuals Trained  |         |
| Add New Loca                         |   |                                     |  |   | ⇒ co   | ontinue |

We encourage you to refer to the Glossary tab for definitions and clarifications.

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|---------------------------------------|--------------------------|------------------|---------------------|-------|---|
| Program Details                       | Program Sites            | Site AEDs        | Finish              |       |   |
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| Location                              | Addr                     | ess              | City                | State | Individuals Trained   |
|                                       |                          |                  |                     |       | - Continue  |
| * denotes required                    | field                    |                  |                     |       |   |
| Location Infor                        | mation                   |                  |                     |       |   |
| Same as AED Cr                        | oordinator Location      | 1                |                     |       |   |
| * Location Name                       | 2)<br>Le. Main Campus, ( | Corporate Office | -                   |       |   |
|                                       | iz, wain sampus, i       | corporate onto   | e)                  |       |   |
| Address     Address                   |                          |                  | -                   |       |   |
|                                       |                          |                  |                     |       |   |
| Address Line 2                        |                          |                  |                     |       |   |
| City                                  |                          |                  |                     |       |   |
|                                       |                          |                  |                     |       |   |
| * State/Province<br>Maryland          | ~                        |                  |                     |       |   |
| La Co                                 | in the second            |                  |                     |       |   |
| * Postal Code                         |                          |                  |                     |       |   |
|                                       |                          |                  |                     |       |   |
| Phone Number<br>5557771234            |                          |                  |                     |       |   |
|                                       |                          |                  |                     |       |   |
| * Number of Indivis<br>in CPR/AED Use | duals Currently Trai     | ned              |                     |       |   |
| 1                                     | 1                        |                  |                     |       |   |
| Address Verificat                     | ion                      |                  |                     |       |   |
| Verify address fo                     | ir me 🕑                  | 0                |                     |       |   |
| 😰 🛛 Add Locat                         | ion                      |                  |                     |       | Ø Cancel  |
| T.                                    |                          |                  |                     |       | 16  |

Location Information:

Please think of this in terms of a pyramid. At the top will be the name of the company. If there are multiple buildings that house AEDs, please be specific as to the building address and/or name. You will have an opportunity to be specific about the placement within the building on another screen.

Location1: XYZ Bank: Main Street Office

Location2: XYZ Bank: Downtown Branch

Location3: XYZ Bank: Uptown Branch

If it is a home, please use your given name for the residence. Do not just say "Home", but, for example "Steven Jones Residence". If a house of worship, please also use the city. For example, do not just say "ABC House of, but more specifically "ABC House of Worship – (city name)".

### A WORD ABOUT ADDRESS VERIFICATION

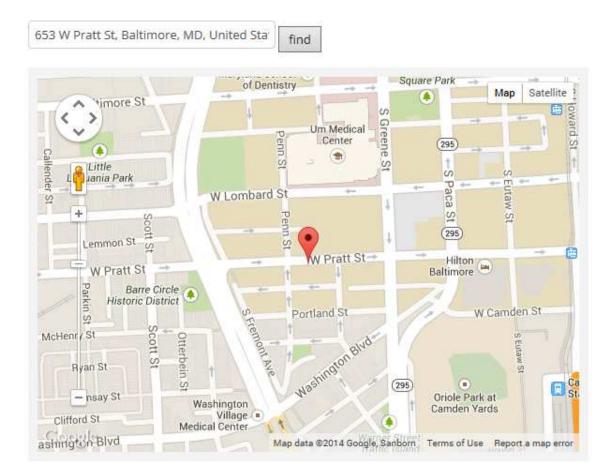
Because the AED Registry is designed to inform EMS of the location of your device, it is important that the location be as accurate as possible. Often, mapping software will put your "map pin" in the street or other, perhaps distant, location.

Under "Address Verification", please use the dropdown arrow "I'll verify this address"

| I'll verify the address |
|-------------------------|
|-------------------------|

This will open up a map.

Please type in your address and click "find".



Zoom in as much as you can to see your location.

| $\bigcirc$                   | non St     | Map Satellite |
|------------------------------|------------|---------------|
| veratt St                    | W Pratt St | W Pratt St    |
| Penn Carry Out<br>Bestaurant |            | Camden Pub 🝸  |
|                              |            |               |
| -<br>Coogle                  |            |               |

Then drag and drop the map pin to the precise location. This will automatically put the most precise geo coordinates into the system.

| 53 W Pratt St, Baltimore, | MD, United Star find | non St                | Map Satellite                |
|---------------------------|----------------------|-----------------------|------------------------------|
| Veratt St                 | W Pratt St           |                       | W Pratt St                   |
| Penn Can<br>Restaura      | y Out                |                       | Camden Pub 🝸                 |
| -                         |                      |                       |                              |
| Google                    | Map data ©20         | 14 Google, Sanborn Te | rms of Use Report a map erro |

Click "Add New Location" when complete. The following screen will appear.

|                | V                   |                 | B             |           |                                     |  |             |
|----------------|---------------------|-----------------|---------------|-----------|-------------------------------------|--|-------------|
| ogram Details  | Program Sites       | Site AEDs       | Finish        |           |                                     |  |             |
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| Atrus Maryland | Office              | 653 W. P        | ratt          | Baltimore | MD                                  | 1  | edit delete |
| Add New Loca   | ation               |                 |               |           |                                     |  | ⇒ Contin    |

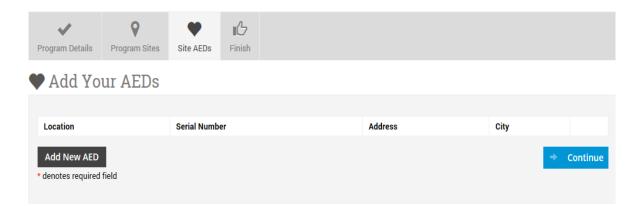
If you have an additional location(s), please add now by clicking "Add New Location". When you are finished adding locations please click the blue "Continue" button.

You always have the ability to add additional locations in the future.

### ADDING AEDS

Here you will begin adding AEDs and assigning them to the locations that you have previously entered. It would be most helpful to you to refer to "Appendix A" at the end of these instructions for the data fields required for completion.

Begin by clicking "Add New AED".



| This is an example of the "Add New AED Page. | This is an exam | ple of the | "Add Nev | AED Page. |
|--|-----------------|------------|----------|-----------|
|--|-----------------|------------|----------|-----------|

| trus Registry Tes  | at  |  |   |   |   |   |  |   |                                 |
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|  | SC .  |  |   |   |   |   |  |   |                                 |
| Add New AED  |   |  |   |   |   |   |  |   |                                 |
| enotes required field  |   |  |   |   |   |   |  |   |                                 |
|  |   |  |   |   |   |   |  |   |                                 |
| AED Details  |   |  | AED Location  |   |   |   |  |   |                                 |
| lanufacturer   |   |  | *Location   |   |   |   |  |   |                                 |
| ۲  |   |  |   |   |   |   |  |   |                                 |
| ED Type/Model  |   |  | * Placement Details   |   |   |   |  |   |                                 |
| •  |   |  |   |   |   |   |  |   |                                 |
|  |   |  |   |   |   |   |  |   |                                 |
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| set/Tag Number   |   |  |   |   |   |   |  |   |                                 |
| et ray number  | -   |  | Select this checkbox if the AED is stor   | ed in a vehicle or some other mobile unit 🕗   |   |   |  |   |                                 |
|  |   |  |   |   |   |   |  |   |                                 |
| tall Date (mm/dd/yyyy)   |   |  | *Site Description   |   |   |   |  |   |                                 |
|  |   |  |   |   |   |   |  |   |                                 |
|  |   |  | *SiteType   |   |   |   |  |   |                                 |
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ENTER THE AED INFORMATION IN THE ORDER LISTED BELOW

### AED Details:

- 1. Manufacturer
- 2. AED Type/Model
- 3. Serial Number
- 4. Asset/Tag Number
- 5. Install Date

| 👫 Registry Home 🧔 My Program I  | etails 💡 Sites 🕶 | ♥ AEDs - ③ Inspectors | s 👻 🧭 Maintenance Log | Instructions         | Glossary   | 😢 Help 🗸  |            |
|---|------------------|-----------------------|-----------------------|----------------------|--|---|------------|
| Atrus Registry Test <ul> <li>Add New AED</li> </ul>                                       |                  |                       |                       |                      |  |   |            |
| <ul> <li>denotes required field</li> <li>▲ AED Details</li> <li>* Manufacturer</li> </ul> |                  |                       |                       | AED Loc<br>*Location |  | T   |            |
| * AED Type/Model  |                  |                       |                       | * Placement Det      | ils ?  |   |            |
| Asset/Tag Number  |                  |                       |                       | Select this che      | okbox if the AED is                              | s stored in a vehicle or some other mobile unit 🤈 |            |
| Install Date (mm/dd/yyyy)   |                  |                       |                       | * Site Description   |  | T   |            |
|   |                  |                       |                       | * Site Type          |  | T   |            |
| Battery Information     Add New Battery  fred, denotes expired battery                    |                  |                       |                       |                      | le Information<br>v Electrode<br>pired electrode | n   |            |
| Battery Model   | Expiration Date  |                       | Installed?            | Electrode Mod        | el   | Expiration Date                                   | Installed? |

Battery and Electrode Information and Expiration Dates: Please do not forget to check the "Is Installed" box in the popup box

AED Location: The location(s) you entered will be available when you click on the drop down arrow

Placement Details: This is the actual place where the AED is located. Please enter as much specific placement details as you can. For example - Inside the front door on the east wall next to the elevator. Try to picture a 911 or EMS Operator telling you where to find the AED as quickly as possible. If you are responding to a sudden cardiac arrest time is the most critical variable in cardiac arrest survival

Mobile AED: Please select the checkbox if your AED is in a vehicle or some other mobile unit

Site Description: Please choose the site description that best matches your site from the drop down menu.

Site Type: Please choose the site type that best matches your site from the drop down menu.

### Now add the AED's Availability:

By making your AED **"public"**, you will be enhancing your community's ability to respond to a victim of Sudden Cardiac Arrest. Time is the most critical variable in cardiac arrest survival. You, or your company, have recognized that by purchasing the AED.

If your community subscribes to the AED Link<sup>™</sup> system and a cardiac arrest occurs within 1,200 feet of your location, the 9-1-1 operator will be able to identify your location and direct someone to ask you, or a designee, to bring the AED to help save a life.

Good Samaritan laws protect users and responders. Owners are also protected as long as the device is maintained in accordance with manufacturer's specifications. This registry will support you in keeping your AED's electrodes and batteries current as a requirement of the Good Samaritan laws. Please check with your local laws for specific information.

If your community subscribes to the AED Link<sup>™</sup> system and you designate your AED **"private"**, your AED will not be summoned by 9-1-1 in the event there is a cardiac arrest anywhere but at your location.

# Availability By making your AED "public", you will be enhancing your community's ability to respond to a victim of Sudden Cardiac Arrest. Time is the most critical variable in cardiac arrest survival. You, or your company, have recognized that by purchasing the AED. If your community subscribes to the AED Link<sup>TM</sup> system and a cardiac arrest occurs within 1,200 feet of your location, the 9-1-1 operator will be able to identify your location and direct someone to ask you, or a designee, to bring the AED to help save a life. If your community subscribes to the AED Link<sup>TM</sup> system and you designate your AED "private", your AED will not be summoned by 9-1-1 in the event there is a cardiac arrest anywhere but at your location. This AED is: Public: Available to be used both at this site and at nearby offsite locations Private: Available to be used at this site only

### Schedule Type

This provides EMS and the 9-1-1 system with the knowledge as to the days/times that the AED would be available if needed. Please mark as appropriate and follow the prompts.

**RESPONDERS** (For communities with AED Link at the 911 center: see Appendix B)

If your AED "Availability" is "Public", Responders are individuals who agree to respond to a call from the local 9-1-1 system to assist a victim of a nearby sudden cardiac arrest with their assigned AED. This request will only be made if the victim is within 1,200 feet of the location of the AED. It is not based on where you are at the moment. If you are unable to respond, you will have the opportunity to press a button on your phone to communicate that back to the 9-1-1 system.

Please note that there is no duty to respond and your good faith actions are covered by the Good Samaritan Laws.

If your AED "Availability" is "Private", the Responder will only be summoned for an SCA emergency within your own address. This can be an important enhancement to your Program's AED response plan.

|         | R R                     | esponders           |                                    |                     |                    |  |               |               |                 |       |        |
|---------|-------------------------|---------------------|------------------------------------|---------------------|--------------------|--|---------------|---------------|-----------------|-------|--------|
|         | Individua<br>feet of th | als who agree to r  |                                    | of a nearby sudden  |                    | h their assigned AED to a<br>you are unable to respond |               |               | -               |       |        |
|         |                         |                     |                                    |                     |                    |  |               |               |                 |       |        |
|         | Please n                | ote that there is r | no duty to respond<br>-            | and your good faith | actions are covere | ed by the Good Samaritan                               | Laws.         |               |                 |       |        |
|         | 🖳 A                     | dd Responder        |                                    |                     |                    |  |               |               |                 |       |        |
|         | Edit                    | First Name          | Last Name                          | Phone Voice         | Phone Text         | Notification Type                                      | CPR Exp. Date | AED Exp. Date | Certifying Org. | Notes | Delete |
| To add  | d a res                 | ponder, cl          | ick 🕙 🗚 🗠 Add R                    | esponder            |                    |  |               |               |                 |       |        |
|         |                         |                     | New Responde                       | er for this AED     |                    |  | x             |               |                 |       |        |
|         |                         |                     | First Name                         |                     |                    |  |               |               |                 |       |        |
|         |                         |                     |                                    |                     | ]                  |  |               |               |                 |       |        |
|         |                         |                     | Last Name                          |                     | 1                  |  |               |               |                 |       |        |
|         |                         |                     |                                    |                     |                    |  |               |               |                 |       |        |
|         |                         |                     | Notification Type<br>Voice and Tex |                     | ]                  |  |               |               |                 |       |        |
|         |                         |                     | Phone Number f                     |                     |                    |  |               |               |                 |       |        |
|         |                         |                     | i.e. 123555123                     | 34                  | ]                  |  |               |               |                 |       |        |
|         |                         |                     |                                    | or Text Messages    | 1                  |  |               |               |                 |       |        |
|         |                         |                     | i.e. 123555123                     |                     |                    |  |               |               |                 |       |        |
|         |                         |                     | Date CPR Certific<br>mm/dd/yyyy    | ation Expires       | ]                  |  |               |               |                 |       |        |
|         |                         |                     | Date AED Certific                  | ation Expires       |                    |  |               |               |                 |       |        |
|         |                         |                     | mm/dd/yyyy                         |                     |                    |  |               |               |                 |       |        |
|         |                         |                     | Date CPR Certifi                   | cation Expires      | 1                  |  |               |               |                 |       |        |
|         |                         |                     | mm/dd/yyyy                         |                     |                    |  |               |               |                 |       |        |
|         |                         |                     | Date AED Certific<br>mm/dd/yyyy    | cation Expires      | ]                  |  |               |               |                 |       |        |
|         |                         |                     | Certifying Organ                   |                     | 7                  |  |               |               |                 |       |        |
|         |                         |                     |                                    | •                   |                    |  |               |               |                 |       |        |
|         |                         |                     | Notes                              |                     | ]                  |  |               |               |                 |       |        |
|         |                         |                     |                                    |                     |                    |  |               |               |                 |       |        |
|         |                         |                     |                                    |                     |                    | Add Responder  | Cancel        |               |                 |       |        |
|         |                         |                     |                                    |                     |                    |  |               |               |                 |       |        |
| When    | you ha                  | ave compl           | eted this so                       | creen, click        | Add Respond        | er   |               |               |                 |       |        |
| After a | adding                  | all these i         | tems click:                        | Ø                   | Save AED           |  |               |               |                 |       |        |

Please note: Any time information that relates to an AED in your program changes, i.e. new batteries and/or new electrode pads are installed please be sure to change that data in the Registry.

If you have already registered your AED Program in the AED Registry, log in by clicking the "Sign in" button.

On the next screen "Sign in", enter the Username or Email address and password you set up when you registered.

You should now be looking at your AED Program Home page. Registry Home provides you with a snapshot view of the AEDs in your Program.

|          |                                      |             |   | Sample of                      | f AED Program  | Home F  | age  |                          |                           |                    |                 |
|----------|--------------------------------------|-------------|---|--------------------------------|--|---|--|--------------------------|---------------------------|--------------------|-----------------|
| At       | us Regist                            | ry Test     |   |                                |  |   |  |                          |                           |                    |                 |
|          | 3%                                   |             | $\mathbf{\Psi}^{\circ}$   | AEDs<br>7 REGISTERED           | •  | Review Mäinlenance Issues                           | C  | Total Resp<br>12         | ponders                   |                    | 1               |
| AED Lis  |                                      |             |   |                                |  |   |  |                          |                           |                    |                 |
| <u>_</u> | o s<br>Ri New AED                    |             |   |                                |  |   |  |                          |                           |                    |                 |
| Edit     | Serial Number                        | Asset Tag # | Site  | Placement                      | Site Description   | Manufacturer  | Model  | Battery Expiration Date  | Electrode Expiration Date | Total Inspectors   | Total Responder |
| Ø        | <u>X058054270</u>                    |             | Rous Test Site<br>302 SW 5th Avenue<br>Portland, OR 97204   | On wall at reception ist desk  | Residential - Condominium                                  | Zoli Medical  | ZOLL AED Plus  | 01/01/2017               | 05/30/2014                | ,                  | 3               |
|          |                                      |             |   | Backwall between restrooms     | Contraction and the second second                          |   |  |                          |                           |                    |                 |
| Ø        | P123456                              |             | BuckStaris Colline<br>555 S.W. Cak Street<br>Portland, OR 97204   | back wall detively restracting | Public Building - Restaurant Bar                           | Philips Medical Systems                             | Philips HeartStart Onsite [Model M5066A]               | 01/01/2016               | 01/01/2016                | ,                  | 3               |
| Q<br>Q   | <u>P123456</u>                       |             | 555 S.W. Oak Street   | Lador wall deriver restooms    | Public Building - Redaumat Bar<br>Regidental - Condominium | Philips Medical Systems<br>Physic Control/Meditonic | Philips HeartStartOns te [Model M50664]<br>LIFEPAK 500 | 01/01/2016<br>12/31/2014 | 01/01/2016<br>03/01/2016  | 1<br>add inspector | 3               |
|          |                                      |             | 555 S.W. Oak Street<br>Portland, OR 97204<br>Unte Bird Cafe<br>219 Southwast 6th Avenue   |                                |  |   |  |                          |                           | <b>A</b> 0         | 1               |
| ď        | <u>198001234</u>                     |             | 555 G.W. Dak Street<br>Portland, OR 97204<br>Link Bell Oaks<br>219 Soudy Wash Avenue<br>Portland, OR 97205<br>Biody Theats<br>24 AW Biodalway   | Under the cash register        | Residental - Condominium                                   | Physic Control/Meditoric                            | LIFEPAK 500  | 12/31/2014               | 03/01/2016                | add modenter       | 1               |
| Q<br>Q   | <u>145201234</u><br><u>fakec#123</u> |             | 555 SIII. Dak Smet<br>Portand, OK 77224<br>Linkellinet Ciki<br>Portand, OK 77255<br>Ender Theorem<br>Portand, OK 77259<br>Portand, OK 77259<br>Enderskie Construction<br>Enderskie Construction | Underthe clash register        | Resdental-Condominium<br>Resdental-Condominium             | Physio Control/Meditonic<br>Defibrech               | UFEPAK 500<br>Defisiech LifiLine AED (Model DDU-100A)  | 12/31/2014<br>03/24/2015 | 03/01/2016                | A0<br>add montor   | 3<br>add mezond |

Your "Readiness Score" is a percentage of electrodes and batteries that are NOT expired. Anything less than 100% "Ready" means that you must take action to replace a battery and/or electrode pad. If Batteries and/or Electrode Pads have expired, the date will be in "red" with a triangle preceding it.

If you haven't added Inspectors or Responders to your AED Program you will see a "red" triangle and "red 0" in those columns.

To examine your AED Program's maintenance issues you can click on "Review Maintenance Issues" or on the "Maintenance Log" tab at the top of the screen.

See the next section about adding inspectors.

### **INSPECTORS**

The most important part of having an AED is to make sure that it is ready to use when a cardiac emergency happens. That means making sure the battery is working and the electrode pads have not gone past their expiration date. Because they dry out after their expiration dates, the electrode pads have to be replaced periodically based on manufacture's recommendations. Failure to do so can void your protection from the Good Samaritan laws.

Inspectors will be responsible for the inspection, maintenance and servicing of AEDs they are assigned to by the AED Program Coordinator. When the AED Coordinator invites them to participate as an Inspector for their AED Program, they will create an account in the AED Registry. Once they have completed that process, they will be able to view their assigned AEDs and update the expiration dates for batteries and electrode pads. They will receive monthly reminder emails to inspect the AEDs and emails to notify them when either a battery and/or electrode pad is approaching its expiration date.

To begin, click on the inspector tab and then "Invite New Inspector". This will open the page like below:

Simply enter your inspector's email address, first and last name and any custom message you want to include. Then check the box (or boxes) of the AED Locations for which you want them to be an inspector.

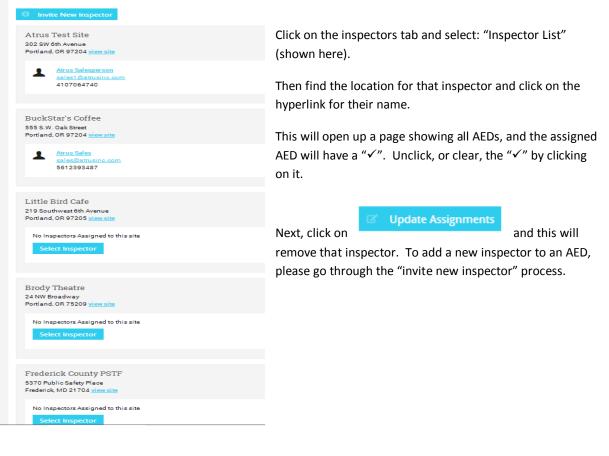
|                        | Registry Test   |   |                        |  |  |  |  |
|------------------------|---|---|------------------------|--|--|--|--|
| Invite                 | e New AED Inspector   |   |                        |  |  |  |  |
|                        |   |   |                        |  |  |  |  |
| enotes req             | quired field  |   |                        |  |  |  |  |
| plete the<br>be able t | size is to find the second secon  |   |                        |  |  |  |  |
| nail Addri             | ress  |   |                        |  |  |  |  |
| person                 | nBcompany.com   |   |                        |  |  |  |  |
| rst Name               |   |   |                        |  |  |  |  |
| hn                     |   |   |                        |  |  |  |  |
| at Name                | r   |   |                        |  |  |  |  |
|                        |   |   |                        |  |  |  |  |
|                        | spector for our site.   |   |                        |  |  |  |  |
|                        |   |   |                        |  |  |  |  |
|                        | ast one AED you would like this inspector to monitor.   |   |                        |  |  |  |  |
|                        | aar one AED you would like this respectant to monitor:  | Pleasance   | Inspector?             |  |  |  |  |
| ect at lea             | art ne 455 yez vould i ken fu supertor to monitor<br>Leaden<br>Avez T wat to m  | On wall at receptionist deak  | Yes                    |  |  |  |  |
| ect at lea             | astron-KEP you woodd like frus reguestor to monitor:<br>Londian<br>Annut Sast Sin<br>Bunddari softwe  | On wall at necetions to deak<br>Back wall between restooms  | Yes                    |  |  |  |  |
| ect at lea             | anna 40 per verd la fra fra reparter to monto:<br>Iconten<br>Assa Teaction<br>Beddara Conte<br>Lucas da Colo  | On wall an exception at deals<br>Back wall between restrooms<br>Under the cash register   | Ves<br>Yes<br>No       |  |  |  |  |
| ect at lea             | astona AED you would live fue regestore to evolve.<br>Leaders<br>Anus Teart Ibn<br>Buckdar / Coffee<br>Liste of Cufe<br>Body Tearts   | On e al a mosponis deski<br>Back-au Bonesen statoroma<br>Under dra sava negatari<br>In de bocaños   | Yes<br>Yes<br>No<br>No |  |  |  |  |
| (ect at lea            | astrona KED you would like the inspectors to monitor:<br>Longtion<br>Anus 1 and 1 | On will an reception at daak<br>Back wall between retrotione<br>Under the walk inguitate<br>In de back official<br>fast back official<br>fast bach official | via<br>Ves<br>No<br>No |  |  |  |  |
|                        | astona AED you would I keniu napestore trenster.<br>Leaden<br>Anut Fara the<br>Buckdari / Coffee<br>Units of Cufee<br>Bockfinates   | On e al a mosponis deski<br>Back-au Bonesen statoroma<br>Under dra sav negatari<br>In de bocaños  | Yes<br>Yes<br>No<br>No |  |  |  |  |

The inspector will receive an email invite from the Program Manager and then be asked to register as an inspector and then confirm that registration when they receive an email requesting them to do that.

### **Changing Inspectors**

Atrus Registry Test

💿 Inspectors



### Maintenance Log

There are three elements to the Maintenance Log: Open Issues, Upcoming Maintenance, and Closed Issues.

**Open Issues**: These are items which are currently expired and need immediate attention by changing the expired items. Please note that, in order for your reminders to work properly, you'll need to update the expiration dates once the item has been changed.

**Upcoming Maintenance:** To help you keep on top of supplies, we provide you with a list of items that are going to expire in the next 90 days.

**<u>Closed Issues</u>**: This gives you a digital audit trail of the changes that have been made to an AED. Once you have changed a date for an expired item, that item and the dates changed will appear hear.

| Atrus Regis                   | try Test Maintenance Log            |                                       |                 |                                 |
|-------------------------------|-------------------------------------|---------------------------------------|-----------------|---------------------------------|
|                               |                                     |                                       |                 |                                 |
| Open Issues                   |                                     |                                       |                 |                                 |
| What needs to be done now! (I | tems that have expired)             |                                       |                 |                                 |
| 10 v records per page         |                                     |                                       |                 | Search:                         |
| Туре                          | Site Name                           | Serial Number                         | Expiration Date | Inspector                       |
| Expired Electrode             | Brody Theatre                       | fakes#123                             | 12/31/2013      | A No inspector<br>add inspector |
| howing 1 to 1 of 1 entries    |                                     |                                       |                 | -First -Previous 1 Ned- Last-   |
| Upcoming Mair                 | itenance                            |                                       |                 |                                 |
| hat is coming up. () tems set | to expire in the next 90 days)      |                                       |                 |                                 |
| 10 <b>v</b> records per page  |                                     |                                       |                 | Search:                         |
| Туре                          | 0 Site Name                         | Serial Number                         | Expiration Date | Inspector                       |
| Electrode Expiration          | Atrus Test Sit                      | <u>X058054270</u>                     | 5/30/2014       | Atrus Salesperson               |
| nowing 1 to 1 of 1 entries    |                                     |                                       |                 | Pirst Princus 1 Next Last-      |
| Closed Issues                 |                                     |                                       |                 |                                 |
| hat has been completed in t   | he past. (Alog of your maintenance) |                                       |                 |                                 |
| 10 • records per page         |                                     |                                       |                 | Search:                         |
| Resolved                      | (Туре                               | Site Name                             | Serial Number   | Resolved By                     |
| 6/14/2014                     | Expired Battery                     | Brody Theatre                         | fakes#123       | ElliotFisch                     |
| /29/2014                      | Expired Electrode                   | Frederick County PSTF                 | PSTF8990        | No Inspector Assigned           |
| /29/2014                      | Expired Electrode                   | Frederick County PSTF                 | PSTF8990        | No Inspector Assigned           |
| /29/2014                      | Expired Electrode                   | Frederick County PSTF<br>Frederick Co | PSTF8990        | No Inspector Assigned           |
|                               | Expired Electrode                   |                                       | PSTF8990        | No Inspector Assigned           |

# Appendix A – AED data fields required

| AED Information Requirements |          |  |  |  |  |  |  |
|------------------------------|----------|--|--|--|--|--|--|
|                              |          |  |  |  |  |  |  |
| AED Location Name            | Required | Description<br>Name of the location  | Example<br>Peet's Coffee Shop — Lake<br>Oswego   |  |  |  |  |
| AED Street Address 1         | Required | Address of the AED installation  | 345 First Street                                 |  |  |  |  |
| AED Street Address 2         | Optional |  | Suite #111                                       |  |  |  |  |
| AED City                     | Required |  | Lake Oswego                                      |  |  |  |  |
| AED State/Province           | Required |  | OR   |  |  |  |  |
| AED Postal Code              | Required |  | 97034  |  |  |  |  |
| AED Country Code             | Required | ISO country code of the AED installation address   | US   |  |  |  |  |
| AED Placement                | Required | A description of where the AED can be found at the<br>installation site (e.g. "by the front door, on the north wall").<br>Hint: if you were going to direct<br>someone to go get it, what would you tell them? | Behind the counter, next to the<br>cash register |  |  |  |  |
| AED Serial Number            | Required | The serial number of the AED that was assigned by the manufacturer   | 55988776   |  |  |  |  |
| AED Manufacturer             | Required | The name of the AED manufacturer   | Medtronic  |  |  |  |  |
| AED Model                    | Required | Manufacturer model number and/or name  | LifePak 500                                      |  |  |  |  |
| AED Date Installed           | Optional | Date the AED was placed into service (mm/dd/yyyy)  | 5/1/2003   |  |  |  |  |
| AED Asset Tag Number         | Optional | Site-specific asset or inventory tracking number (not used by Atrus)   | FA331877433                                      |  |  |  |  |
| Battery Model                | Required | Model number or name of the battery  | 11141-000069                                     |  |  |  |  |
| Battery Expiration Date      | Required |  | 3/1/2008   |  |  |  |  |
| Electrode Model              | Required | Model number or name of the electrode (s)  | 11996-000017                                     |  |  |  |  |
| Electrode Expiration Date    | Required |  | 10/1/2010  |  |  |  |  |

# Appendix B – Communities participating in AED Link

As of 6/1/2014

Allina Health EMS, Minnesota

Cayman Islands City of Louisville, KY City of Orlando, FL Collier County, FL EMS Contra Costa County, FL Ft. Wayne, IN Hennepin County (Minneapolis), MN Hot Springs, AR Jefferson County, KY Norwood, OH

Orange County, Florida

Regina Qu-Appelle Health Region, Saskatchewan, Canada

Richmond, CA San Ramon Valley, CA Sandy Springs, GA Stillwater, OK Texarkana, TX Winter Park, FL