



Registering of Automatic External Defibrillators on the Save a Life App



In order that all AED's that have been put in cabinets for public use are recorded on the relevant ambulance computer systems, could you please fully complete the details below and E-Mail this form back to defib@scas.nhs.uk Please also use this form for any future amendments you may make regarding information relating to your AED. If you have already sent these details elsewhere please still complete this and return to defib@scas.nhs.uk.

App Name.

The name of the building the defib is attached to.

Post Code

Precise location of the defib. Please ensure this is correct as our ICT systems will recognise the location of the defib from the post code.

Type

PAD = 24/7 No Restrictions or STATIC = Internal or Restricted Hours

App Status

The Ambulance Service will confirm when your defib is live on their systems.

Building Name**Building Number****Street Name(s)****Town**

County

Type of Building Defib is Attached to

Please think about how you would describe your location to a member of the public calling 999. What is the most obvious description of your building. i.e. School, Public House, or Telephone Box.

Details and EXACT location.

The exact location the defib can be found i.e. First Aid Room; or Wall Facing Car Park etc. We will provide these instructions to the public.

Availability

Please confirm whether this is available 24/7 or opening hours only.

Opening Hours

Please state the times the defib is available for use.

Call Ahead Telephone Number

This should be a telephone number that can be placed on the app and made public for potential users to call to advise of the requirement for the defibrillator.

Call Takers Call Ahead Telephone Number

This should be a telephone number that can be placed on our systems for the 999 call takers to be aware of. If they need more information or assistance in an emergency.

Access Code of Cabinet

Please state if the cabinet is not locked.

Guardians

Please note that it is preferable to have **at least two** guardian's per defib. This is purely to ensure we have someone to contact if there are any queries that may have arisen.

Guardian 1 Name**Guardian 1 E-Mail Address****Guardian 1 Contact Number****Guardian 2 Name****Guardian 2 E-Mail Address****Guardian 2 Contact Number****Guardian 3 Name****Guardian 3 E-Mail Address****Guardian 3 Contact Number**

Defib Supplier

Defib Make & Model

Defib Serial Number

Latitude

Please see notes below

Longitude

Please see notes below

Expiration Date of Defib Warranty

Normally 10 years after issue date.

Expiration Date of Adult PADs

Expiration Date of Infant PADs

Battery Manufacturer Date

Expiration Date of Battery (if Provided)

Normally 5 years after issue date.

Cabinet Type

Location Code/Cabinet Serial Number

Please note that we have stored this information. We do not however use this information when receiving a 999 call. Please do not place this information on the cabinet, please ensure it is replaced with your Post Code.

<http://www.scas.nhs.uk/news/campaigns/savealife/>

Please note that if you have previously downloaded our app you may have to 'Update AED List' from the menu function to be able to see any changes. You can find your longitude and latitude by searching for your location on Google Maps. Right click on your location and select 'what's here'. A box will appear with two numbers at the bottom of the box which are slightly greyed out. This is your longitude and latitude. Please let me know if we have your location wrong.