

## LIFEPAK® 1000 Defibrillator CONFIRMATION SHEET

*Sign, Date and Send completed sheet(s) to the contact below*

Account # «End_User_Number» «Account_Name» «City», «State» «Postal_Code» Attention: Risk Management	Completed By (Print Name): _____ Signature: _____ Phone #: (_____) _____ Date: __/__/__ Email: _____	Please return completed form: <ul style="list-style-type: none"> <li>By fax to: 1-866-448-9567</li> <li>By email to: <a href="mailto:rsrecall@physio-control.com">rsrecall@physio-control.com</a></li> <li>Or by mail to: Physio-Control, Inc.                      P.O. Box 970006, Dept. 15N                      Redmond, WA, 98073-9706</li> </ul>
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### INSTRUCTIONS

- Check that the serial number listed matches the serial number on the label located on the back of your device.
- Please indicate if your device(s) are used in a stationary (for example, mounted to a wall) or mobile (for example, in a vehicle) environment.
  - If your device(s) are in a mobile environment, please indicate: EMS, Fire, Police or Other
- Remove and reinstall the battery.
- Continue to remove and install your device battery weekly until contacted by Physio-Control to arrange repair for all affected serial numbers.
- If your LIFEPAK® 1000 shuts down unexpectedly during use, immediately remove and install the battery from your LIFEPAK® 1000. Please contact Physio-Control 1-866-231-1220, 6:00 A.M. to 4:00 P.M. (Pacific), Monday – Friday to arrange for device correction.

Serial Number	Battery Removed & Installed	Stationary (S) or Mobile (M) Environment	If Mobile, note the environment: EMS, Fire, Police, or Other	Weekly Schedule of Battery Removed & Installed	Never possessed the device	Device permanently disposed (scrapped) or retired from use	Device cannot be located	Device transferred to another location*	*Please provide the new address and new contact information
EXAMPLE	YES / NO	S / M	EMS FIRE / POLICE / OTHER	YES / NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	YES / NO	S / M	EMS / FIRE / POLICE / OTHER	YES / NO					