



ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY

EMERGENCY MEDICAL SERVICES AGENCY

1000 San Leandro Blvd. Suite 200 • San Leandro, CA 94577

(510) 618-2050 • Fax: (510) 618-2099

**Public Access Defibrillation
AED Use Notification**

Incident Information	Insert Information Here
Business Name of AED Program	
Address of Incident	
Contact Name	
Contact Number	
Name of Person Who Used the AED	
Date of Incident	
Time of Incident	
Patient's Name (if known)	
Patient's Age (estimate if unable to confirm)	
Patient's Sex	
Time CPR Was Started	
Name of Person(s) Who Did CPR	
Total Number of Defibrillations Delivered	
Date and Time Your Medical Director Was Notified	
Medical Director's Name	
Medical Director's Number	

Please attach any additional information that you think might be helpful.
Please fax or mail a copy of this form to the EMS office within 24 hours of the incident.

Fax Number: 510-618-2099
Attn: AED/PAD Program Coordinator
Alameda County EMS, 1000 San Leandro Blvd. 2nd floor, San Leandro, CA 94577