AED / Defibrillator Medical Authorization

The Food & Drug Administration considers LIFEPAK® defibrillators and some of the accessories required to operate them (including electrodes) to be prescription devices pursuant to 21 CFR 801.109. Physician / Medical authorization is required. Most states provide immunity from civil liability to the physician prescribing an AED. State legislation can be accessed through your state's website or medical board.

This serves as Medical Authorization for External Defibrillators and Automated External Defibrillators (AEDs) and the accessories required to operate them (including electrodes) as indicated below.

Recipient of the AED Medical Authorization [check appropriate box(es)]:

- ☐ INDIVIDUAL
- ☐ BUSINESS OR NON-PROFIT ORGANIZATION
- ☐ GOVERNMENT AGENCY

Name of recipient of AED(s): _____

Address for each location at which an AED will be located:

LOCATION NAME: _____

STREET: _____

CITY/STATE/ZIP: _____

PHONE NUMBER: _____

CONTACT/TITLE: _____

If more locations are provided for under this Medical Authorization, please attach a separate piece of paper listing the required contact information for each location.

List any restrictions to this Medical Authorization, if applicable: _____

Authorizing Physician or Licensed Practitioner: [please print]

NAME: _____

STREET: _____

CITY/STATE/ZIP: _____

PHONE NUMBER: _____ FAX NUMBER: _____

SIGNATURE: _____ DATE: _____

Please fax completed form to Soma Technology at 860-218-2565