

## EVENT REPORT – FREE PADS PROGRAMME

Please complete and return this form to take part in our free pads programme for your AED.

REPORTER INFORMATION											
Name					Application number/Order number						
Email											
Contact number											
What was your role in the event?	<input type="checkbox"/>	Rescuer	<input type="checkbox"/>	Patient	<input type="checkbox"/>	Witness					
PATIENT INFORMATION											
	<input type="checkbox"/>	Male	<input type="checkbox"/>	Female	<input type="checkbox"/>	Non-binary / third gender					
Age (if known)											
EVENT INFORMATION											
Date of the event					Estimated time						
Was CPR performed before the AED was switched on?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No							
Was the patient breathing before starting CPR?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Unknown					
Did the patient have a pulse before CPR started?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Unknown					
Was a shock delivered from the AED?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No							
LOCATION TYPE (please check one)											
<input type="checkbox"/>	Home	<input type="checkbox"/>	Office	<input type="checkbox"/>	Medical facility	<input type="checkbox"/>	Sports centre	<input type="checkbox"/>	Public space	<input type="checkbox"/>	Other
Please provide more detail about the specific type of location where the incident took place (e.g. gym, dentist, restaurant, etc)											
EVENT SUMMARY											
Please give a summary of what happened before, during, and after the rescue.											

How easy was it to use the AED?

DECIVE INFORMATION	
BeneHeart C1A	BeneHeart C2
Device serial number (if known)	
Please confirm the address where we should send the free pads	

PERMISSIONS	
	I (the reporter) give permission for Mindray and London Hearts to use and process my data in compliance with the Data Protection Act for the purposes of the free pads programme.
	I (the reporter) give permission for Mindray and London Hearts to contact me for the purposes of marketing and PR related to this incident to improve the public's understanding of heart health, CPR, and resuscitation.
	Signature
	Date