

EMERGENCY OXYGEN & AED KITS - INVENTORY AND MAINTENANCE FORM

O2 KIT # (ex: NDC 1 of 2)	YEAR	DIVING UNIT NAME	DIVING UNIT LOCATION	UNIT DIVING SUPERVISOR NAME
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OXYGEN KT ITEMS ISSUED		ITEMS ISSUED		QTY	ITEMS ISSUED	QTY
FIRST STAGE REGULATOR	SERIAL NUMBER	REUSABLE O2 MASK			NON-REBREATHER MASK (single use)	
SECOND STAGE DEMAND VALVE REG with LP HOSE	SERIAL NUMBER / MANUFACTURER	BVM RESUSCITATOR BAG			SPARE WASHER	
OXYGEN CYLINDER #1	SIZE	Steel Alum	HYDROSTATIC TEST DATE	SERIAL NUMBER		
OXYGEN CYLINDER #2	SIZE	Steel Alum	HYDROSTATIC TEST DATE	SERIAL NUMBER		

OXYGEN KIT INSPECTION / MAINTENANCE (Check each item every 3 months and initial appropriate boxes)		JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1.	Check condition of reusable O2 mask and the BVM resuscitator bag and mask. Clean or replace if necessary.												
2.	Check condition of single use non-rebreather mask. Replace if necessary.												
3.	Verify washer is seated properly. Tighten as needed.												
4.	Check cylinder condition. Valve should be clean and dry (NO OIL)												
5.	Verify cylinder wrench is attached to yoke and accessible to both cylinders (when applicable).												
6.	Open cylinder valve. Check pressure gauge. Verify cylinder is full (2015 psi +/- 10%).												
7.	Briefly push button on demand valve. Valve should have high flow, no whistle, and fully stop when released.												
8.	Close cylinder valve. Check for leaks. Pressure gauge needle should not move.												
9.	Push button on demand valve to bleed off contents.												
10.	Check for corrosion. Rinse and clean as needed.												
11.	Check general condition of watertight storage case.												

DEMAND VALVE TESTS: PASSING PRESSURE = 40-48 mmHg	PREVIOUS 2 YEAR SERVICE DATE	JAN/FEB/MAR		APR/MAY/JUN		JUL/AUG/SEPT		OCT/NOV/DEC	
	DATE			DATE		DATE		DATE	
			mmHg		mmHg		mmHg		mmHg

- NOTES:
- Emergency oxygen kits shall be inspected before diving operations and monthly inspections are recommended.
 - Follow the manufacturers recommendations for the demand valve resuscitator or it shall be tested every three (3) months and serviced by an authorized service center every two (2) years.

AED INSPECTION / MAINTENANCE		JAN	APR	JUL	OCT
Pad Expiration Date	Check primary and 9V batteries every month and initial appropriate box	FEB	MAY	AUG	NOV
Primary Battery Expiration Date		MAR	JUN	SEP	DEC

For questions or service needs for these kits, e-mail dmo@noaa.gov.