



## REQUEST FOR RETURN OF MISSING/DAMAGED EQUIPMENT

Complete this form and submit to  
EHS MFR Services  
239 Brownlow Avenue, Suite 300, Dartmouth, NS B3B 2B2  
Fax: (902) 832-8602 Tel: (902) 832-8620

Name of Agency: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

(Include Postal Code) \_\_\_\_\_

Item	# Requested	Please include all details: date, time, location of call, and damage or failure
V-Vac Suction Handle		
Oxygen Regulator		
Backboard		
Backboard Straps		
Head Immobilizer Unit		
Head Immobilizer Straps Only		
Head Immobilizer Blocks Only		
Head Immobilizer Base Only		
KED		
Blood Pressure Cuff		
Stethoscope		
A1000 Airway Kit		
Safety Vest		
Oxygen Wrench		
Scissors		
* HeartStart FRx Defib Pads		
** LIFEPAK 500 Defib Pads		
HeartStart FRx Defib Battery		

\* HeartStart FRx Defib Pads should be ordered two (2) weeks prior to expiry.

\*\* LIFEPAK 500 Defib Pads should be returned to MFR Services for exchange (6) months prior to expiry.

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**EHS MFR Services use only**

Date Received: \_\_\_\_\_

Date Equipment Sent: \_\_\_\_\_

Sent by: \_\_\_\_\_