

Lifeline AED

- 5 Years Device Warranty
- 7 Years Standby-Life Battery
- 300 Shocks Or 16 Hours Monitoring
- Biphasic 150 Joules Energy
- 2.0 kg Physical Weight
- Internal Event Recording
- PC-Based Event Reviewing
- Removable Storage card

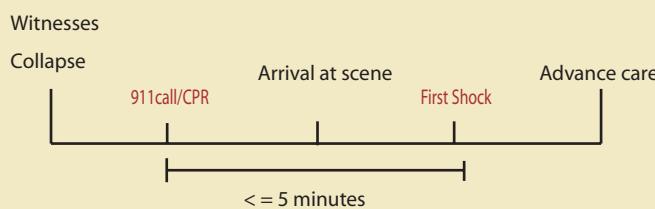
RITZ
MEDICAL

Sudden Cardiac Arrest is a Serial Killer... It kill 400,000 in North America alone each year.
But, it can be treated by early defibrillation.
Delay defibrillation (>10 minutes) survival rate less than 5%.

Be a Hero, Save a Life...

with the Defibtech Lifeline AED

Survival Time Line



RITZ MEDICAL SDN. BHD.

Suite 918, Block B2,
Pusat Dagang Setia Jaya,
9, Jalan PJS 8/9,
46150 Petaling Jaya,
Selangor, Malaysia.

Sudden cardiac arrest (SCA) is one of the leading causes of death among adults in North America. Each year, it claims the lives of an estimated 225,000 in the United States alone. Once every one or two minutes, another American succumbs suddenly, without warning.

Most victims of sudden cardiac arrest are middle-aged or elderly. Though the average victim is about 65-years-old, some victims are in their 30s or 40s. Most collapse at home. For many, there is no previous history of heart problems. Sudden cardiac arrest is often the first symptom.

Although victims of sudden cardiac arrest tend to fit in certain categories, sudden cardiac arrest, by its nature, is completely unpredictable. It can strike anyone, anywhere, any time. Chances are you know someone who has experienced sudden cardiac arrest-a friend, a relative or a co-worker.

Sudden cardiac arrest does not have to be fatal

Sudden cardiac arrest does not have to result in "sudden death." When sudden cardiac arrest occurs, most victims have an abnormal heart rhythm called ventricular fibrillation (VF). When the heart is in this state, it cannot beat in a coordinated fashion and blood does not circulate to the heart and the brain. First, the pulse stops. Then, breathing stops. The victim loses consciousness, collapses and appears lifeless.

But the victim doesn't have to stay that way. Ventricular fibrillation is a treatable rhythm. In this state, electrical energy is present in the heart, but it is chaotic. If the heart can be shocked quickly with a defibrillator, a normal heart rhythm may be restored. This is called defibrillation. If this shock is delivered within minutes after collapse, many victims can survive.

The key is to be quick

Studies conducted at cardiac rehabilitation centers have shown that when sudden cardiac arrest victims in ventricular fibrillation receive defibrillation therapy within the first minute or two after collapse, more than 90 percent survive to be discharged from the hospital.

In more typical community settings, victims of sudden cardiac arrest rarely survive. Why? Most victims do not have immediate access to prompt, definitive treatment. Too much time elapses before the defibrillator arrives-if it arrives at all.

In New York City, for example, the average emergency response time is relatively long-about 12 minutes-due in part to traffic delays and the logistics of getting to victims in high-rise buildings. There, only 5 percent of witnessed VF victims-1 to 2 percent of all cardiac arrest victims-survive.

Seattle, on the other hand, has achieved an average response time of seven minutes and a VF survival rate of 30 percent. In Rochester, Minnesota, response times average six minutes and 45 percent of VF victims survive.

In all reports of survival, the shorter the time from collapse to defibrillation, the better the chances of survival. If defibrillation is delayed for more than 10 minutes, survival rates drop to less than 5 percent.

Every minute counts		
	Time from notification to defibrillation	Survival rate*
Rehabilitation centers	Immediate defibrillation (1-2 minutes)	90%
Model community	Early defibrillation (6 minutes)	45%
	Early defibrillation (7 minutes)	30%
Typical community	Delayed defibrillation (>10 minutes)	<5%

* For victims of sudden cardiac arrest in witnessed ventricular fibrillation

It is impossible in most community settings to respond consistently to sudden cardiac arrest victims within the one to two minute timeframe documented in some cardiac rehabilitation centers. But all communities can aim to reduce the critical interval from collapse to defibrillation. Since the exact time of collapse often is difficult to identify and measure, communities can focus on minimizing the interval from the 911 call to the first defibrillatory shock. Communities that reduce this "call-to-shock" time to five minutes or less can expect as many as one-third to one-half of sudden cardiac arrest victims found in ventricular fibrillation to be resuscitated. Reducing "call-to-shock" time by even one minute can mean the difference between life and death.

Survival timeline:
Communities should aim to reduce "call-to-shock" time interval



Once victims are resuscitated, the prospects for long term recovery are very promising. Eight in 10 survivors will live at least a year longer. Six in 10 survivors will live five more years.

The American Heart Association and other organizations have adopted a simple action plan designed to help communities improve survival from sudden cardiac arrest in adults. This plan is called the Chain of Survival.

Summary

Sudden cardiac arrest kills one adult every one to two minutes. The key to survival is prompt defibrillation. The challenge for communities is to respond, defibrillator in hand, to every victim of sudden cardiac arrest within minutes. If the time from 911 call to defibrillation is seven minutes or less, as many as one-third to one-half of sudden cardiac arrest victims found in ventricular fibrillation can be resuscitated.



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THE AED

Question: What is an AED?

Answer: AED stands for "Automatic External Defibrillator." An AED is used to administer an electric shock to a person who is having a cardiac arrest. AEDs are designed to allow non-medical personnel to save lives.

Q: How does an AED work?

A: Two pads, connected to the AED, are placed on the patient's chest. A computer inside the AED analyzes the patient's heart rhythm and determines if a shock is required to save the victim. If a shock is required, the AED uses voice instructions to guide the user through saving the person's life.

The need for an AED

Q: Why do we need AEDs?

A: AEDs save lives. When a person has a sudden cardiac arrest ("SCA"), their heart's regular rhythm becomes chaotic or arrhythmic. Every minute that the heart is not beating lowers the odds of survival by 7% to 10%. After 10 minutes without defibrillation very few people survive.

Q: What is Sudden Cardiac Arrest (SCA)?

A: Sudden cardiac arrest is when the heart's normal heart rhythm suddenly becomes chaotic. The heart can no longer pump the blood effectively and the victim collapses, stops breathing, becomes unresponsive, and has no detectable pulse. When used on a victim of SCA, the AED can be used to administer a life-saving electric shock that restores the heart's rhythm to normal.

Q: Is SCA the same as a heart attack?

A: No. Both the heart attack (myocardial infarction) and a sudden cardiac arrest have to do with the heart, but they are different problems. SCA is an electrical problem; a heart attack is a "plumbing" problem. Sometimes a heart attack, which may not be fatal in itself, can trigger a sudden cardiac arrest.

Q: Who can have a SCA?

A: Anyone, anytime. Children can have SCAs, teenagers can have SCAs, athletes can have SCAs, old people can have SCAs. Although the risk of SCA increases with age and in people with heart problems, a large percentage of the victims are people with no known risk factors.

Q: What does the American Heart Association say about AEDs?

A: The AHA strongly supports having AEDs in public areas such as sports arenas, office complexes, schools, doctors' offices, shopping malls, airports, and other public places. The AHA also advocates that all police and fire and rescue vehicles be equipped with an AED.



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The Treatment for SCA

Q: What is the recommended treatment for SCA?

A: Defibrillation is the only treatment proven to restore a normal heart rhythm.

Q: How much time do I have to respond if someone has a sudden cardiac arrest?

A: Only minutes. Defibrillate within 3 minutes and the chances of survival are 70%. After 10 minutes, the chances of survival are negligible.

Q: I know CPR; wouldn't it help?

A: CPR only buys a little more time – potentially giving the victim a small amount of extra time until a defibrillator arrives. But SCA ultimately requires a shock to restore a normal heart rhythm. As a result, most CPR training now also includes AED training.

Easy to Use

Q: Is an AED complicated to use?

A: AEDs are very easy to use. An AED can be used by practically anyone who has been shown what to do. In fact, there are a number of cases where people with no training at all have saved lives.

Q: Can a non-medical person make a mistake when using an AED?

A: AEDs are safe to use by anyone who has been shown how to use them. The AED's voice guides the rescuer through the steps involved in saving someone; for example, "apply pads to patient's bare chest" (the pads themselves have pictures of where they should be placed) and "press red shock button." Furthermore, safeguards have been designed into the unit precisely so that non-medical responders can't use the AED to shock someone who doesn't need a shock.

Q: Can the AED itself make a mistake?

A: It is unlikely. Studies show that AEDs interpret the victim's heart rhythm more quickly and accurately than many trained emergency professionals. If the AED determines that no shock is needed, it will not allow a shock to be given.

Q: Can I be sued if I help someone suffering from SCA?

A: State and federal "Good Samaritan" laws cover users who, in good faith, attempt to save a person from death. To date, there are no known judgments against anyone who used an AED to save someone's life.

Q: Has anyone been revived by using the Defibtech AED?

A: Even though the Defibtech AED has only been on the market since 2003, it has already saved a number of people's lives.



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Maintenance

Q: How often must I change batteries?

A: The Defibtech AED comes with a lithium battery pack that is available in a 5 or 7-year size. If the unit is used frequently, the battery pack may have to be replaced more often. The AED will inform the user when the battery pack needs to be replaced.

Q: What else do I need to do to keep my AED in working order?

A: The pad package must be replaced every two years. Otherwise, the AED performs automatic self-checks on a regular basis to test its operational readiness. If anything is not fully functional, the unit will make a loud chirp and flash a red light warning the owner that servicing may be required.

Buying an AED

Q: Can anyone buy an AED?

A: Anyone can buy an AED. The Food and Drug Administration's (FDA) rules require a physician's prescription (AEDs are manufactured and sold under guidelines approved by the Food and Drug Administration) before the Lifeline AED can be delivered.

Q: What features should I look for in an AED?

A: Look for 1) an AED that is easy for non-medical people to use, 2) an AED that is technically reliable, and 3) one that is reasonably priced. Defibtech's AED more than meets all three requirements.

Q: Why is the Defibtech AED better than other AEDs?

A: Defibtech designed the unit from the ground up, building on a foundation of previous AED-related knowledge and incorporating a number of design and technological innovations. As a result, the Defibtech AED is a state-of-the-art defibrillator designed for the non-medical person. Advanced design techniques and robotic assembly allow Defibtech to sell their AED at the lowest price in the market.

Q: What is your warranty?

A: The Defibtech AED is warranteed for five years.

Q: How do I buy the Defibtech AED?

A: Contact Defibtech at 1-866-DEFIB-4-U (1-866-333-4248)

Malaysia Local Distributor :

RITZ MEDICAL SND BHD (371429-A)

Suite 918 Block B2 , Pusat Dagang Setia Jaya, 9 Jalan PSJ8/9 , 46150 Petaling Jaya, Selangor, Malaysia
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Life-saving technology within reach



LIFELINE AED Semi-automatic Defibrillator

Defibtech has designed a revolutionary new semi-automatic external defibrillator, from the ground up.

Technologically advanced enough to include all mission critical features necessary to provide the most advanced treatment for Sudden Cardiac Arrest. Yet so simple and unintimidating to use that even non-medical personnel can effectively save lives.

The Lifeline AED was developed by experienced multidisciplinary engineering teams and incorporates state-of-the-art digital signal processing techniques and advanced ECG analysis algorithms.

This enables the device to exceed the American Heart Association performance recommendations, giving the user confidence the correct therapy is being delivered.

The Lifeline AED defibrillator uses advanced biphasic technology — including the most studied biphasic shock waveform — and automatically adjusts the shock delivery to the person's individual needs.

For first response professionals like police, fire and EMS, the Lifeline AED is standard equipment. For schools, offices, stores, malls, factories, and public places, it's becoming as vital as the fire extinguisher.



Defibtech, LLC • Guilford, CT 06437
1-866-DEFIB-4-U (1-866-333-4248) • www.defibtech.com

LIFELINE AED Semi-automatic Defibrillator

Technical Specifications*

Defibrillator

TYPE
Semi-automatic external defibrillator

MODEL
DDU-100A

WAVEFORM
Biphasic Truncated Exponential (Impedance compensated)

ENERGY
150-Joules (nominal into 50 ohm load)

CHARGE TIME (typical)
Less than 6 seconds (DBP-2800 battery pack)
Less than 9 seconds (DBP-1400 battery pack)

SHOCK-TO-SHOCK CYCLE TIME Less than 20 seconds (typical, includes analysis and charging time)

VOICE PROMPTS
Extensive voice prompts guide user through operation of the unit

CONTROLS
– Lighted On/Off button
– Lighted Shock button

INDICATORS
– “check pads”
– “do not touch patient”
– “analyzing”
– AED status LED

Defibrillation/Monitoring Pads

MODEL
DDP-100

TYPE
Single-use, disposable, self-adhesive electrodes with cable and connector

SURFACE AREA
103 cm² (nominal, each pad)

PAD PLACEMENT
Anterior - Anterior

CABLE LENGTH (typical)
48 in (122 cm)

Event Documentation

INTERNAL EVENT RECORD
Critical ECG segments and rescue event parameters are recorded and can be downloaded to a removable data card

PC-BASED EVENT REVIEW
ECG with event tag display, and audio playback when available

REMOVABLE STORAGE
(optional) Up to 12 hours of ECG and event data storage (no audio option) or up to 1:40 of audio, ECG and event storage (audio option) on a removable data card. Actual length of storage is dependent on card capacity

Patient Analysis System

PATIENT ANALYSIS
Automatically evaluates patient impedance for proper pad contact. Monitors signal quality and analyzes patient ECG for shockable/non-shockable rhythms

SENSITIVITY/SPECIFICITY
Meets AAMI-DF-39 specifications and AHA recommendations

Battery Pack

MODEL DBP-2800

POWER
15V, 2800 mAh

CAPACITY (new, at 25° C)
– 300 shocks or 16 hours continuous operation

STANDBY-LIFE (typical)
– 7 years

TYPE
– Lithium/Manganese Dioxide
– Disposable, recyclable, non rechargeable

MODEL DBP-1400

POWER
15V, 1400 mAh

CAPACITY (new, at 25° C)
– 125 shocks or 8 hours continuous operation

STANDBY-LIFE (typical)
– 5 years

LOW BATTERY INDICATORS
– Visible
– Audible

Self Tests

AUTOMATIC
Automatic daily, weekly and monthly circuitry tests

BATTERY INSERTION
System integrity test on battery insertion

USER-INITIATED
Unit and battery pack system test initiated by the user

STATUS INDICATION
Visual and Audible indication of unit status

Environmental

TEMPERATURE
Operating / Standby: 0 – 50°C (32 – 122°F)

RELATIVE HUMIDITY
Operating / Standby: 5% – 95% (non-condensing)

ALTITUDE
-500 to 15,000 ft (-150 to 4500 m) per MIL-STD-810F 500.4 Procedure II

VIBRATION
Ground (MIL-STD-810F 514.5 Category 20)

Helicopter (RTCA/DO-160D, Section 8.8.2, Cat R, Zone 2, Curve G)

Jet Aircraft (RTCA/DO-160D, Section 8, Cat H, Zone 2, Curves B & R)

SHOCK / DROP ABUSE TOLERANCE

MIL-STD-810F 516.5 Procedure IV (1 meter, any edge, corner, or surface, in standby mode)

SEALING / WATER RESISTANCE

IEC60529 class IP54; Splash Proof, Dust Protected (Battery Pack installed).

ESD

EN61000-4-2: 1998, (open air up to 8kV or direct contact up to 6kV)

EMC (Emission)

EN60601-1-2 limits (1993), method EN55011: 1998 Group 1 Level B

EMC (Immunity)

EN60601-1-2 limits (1993), method EN61000-4-3: 1998 Level 3 (10V/m)

Physical

SIZE
8.5 x 11.8 x 2.7 inches (22 x 30 x 7 cm)

WEIGHT (Approximate)
With DBP-1400: 4.2 lbs (1.9 kg)
With DBP-2800: 4.4 lbs (2.0 kg)

*Specifications subject to change without notice

defibtech



Life-saving Technology Within Reach



741 Boston Post Road Guilford, CT

Defibtech Key Points



Business Record, Growth & Stability

- Defibtech has been in business since 1999.
- The Defibtech AED received FDA approval in less time than any other AED on the market at that time.
- Defibtech sales have grown by over 100% in each of the last 3 years.
- Based on publicly available data, we believe Defibtech is the fastest growing AED manufacturer in the market today.
- Defibtech is profitable, a claim which a number of our competitors cannot make.
- Defibtech AEDs are sold in North America, South America, Europe, Asia and the Middle East.



Product Quality & Durability

- Defibtech AEDs are manufactured in the USA in a state-of-the-art ISO 9001-registered facility.
- Defibtech AEDs are tested to rigorous military drop & shock standards.
- Defibtech AEDs are highly rated for dust and water resistance.



Business Model, Affordability & Value

- Defibtech's distributor-only sales model means that we never compete with our distributor partners .
- Defibtech's high quality, low-cost business model offers very attractive profit margins to distributors and the industry's most affordable AEDs to end-users.
- Defibtech's business model and growth record also allows for exceptional investment in research & development, furthering our reputation for quality and AED innovation.



Distributor Sales, Marketing & Service Support

- Defibtech's distributor support includes:
 - Initial and ongoing sales training.
 - A variety of printed, electronic, and video marketing materials.
 - Trade show support.
 - Sales lead distribution.
 - Direct assistance with large AED sales opportunities.
- The Distributor Sales & Marketing Binder contains a wealth of AED information, including over 200 pages of organized documents on sudden cardiac arrest, the AED industry, Defibtech, and our AEDs and related services.
- Defibtech MD offers distributors and their customers a turnkey AED management program that includes all elements of a successful AED initiative: medical oversight and prescription, web-based tracking of AEDs, accessories and trained personnel, and AED/CPR training – on site and online.



Market Acceptance & Widespread Acclaim

- Defibtech AEDs are the defibrillators of choice for thousands of corporations, organizations, municipalities, first responders and others.
- Defibtech AEDs are the current choice of many state AED programs including New Jersey, Arkansas, Florida, Louisiana, Idaho, Maine, New Mexico and Utah. A number of these states have purchased hundreds of Defibtech AEDs multiple years in a row.
- Users continue to switch from other brands to Defibtech AEDs in increasing numbers.
- Defibtech has won numerous design and quality awards (visit www.defibtech.com for details).

Most importantly, Defibtech AEDs have saved many lives

Company Awards

MoMA



Defibtech AED to be Exhibited at MoMA

The Museum of Modern Art (MoMA) in New York City has selected the Lifeline AED to be part of the upcoming exhibition *SAFE: Design Takes on Risk*, to be presented in the museum's new Manhattan building from October 9, 2005 to January 2, 2006.

Best Bang for the Buck Award

Presented by Frost & Sullivan

The Frost & Sullivan Best Bang for the Buck Award is given to the company that offers the solution and/or service with the highest value-to-cost ratio in its industry. (May 2005)

Medical Design Excellence Award (MDEA)

Presented by Medical Device & Diagnostic Industry Magazine (MD&DI) and Canon Communications

The Medical Design Excellence Awards is the premier awards program for the medical technology community. The Lifeline AED was awarded a gold prize in the 2005 competition. (April 2005)

Industrial Design Excellence Award (IDEA)

Presented by the Industrial Designers Society of America (IDSA) and BusinessWeek Magazine

The Industrial Design Excellence Awards (IDEA) is the world's most prestigious and coveted design accolade. The Defibtech Lifeline AED was the only defibrillator to win a prize in this celebration of the best product designs of the year. (June 2004)

Good Design Award

Presented by the Chicago Athenaeum: Museum of Architecture and Design

The Good Design Award is the oldest design competition in the world, founded in Chicago in 1950 by the pioneering greats of modern design. The Defibtech Lifeline AED was judged worthy of the Good Design Award for product distinction. (December 2004)

Design Excellence Award

Presented by Appliance Manufacturer Magazine

The Excellence in Design (EID) awards are presented annually by the Appliance Manufacturer Magazine. The Defibtech Lifeline AED won an award in the Medical Appliances/Laboratory Equipment category. (April 2003)

Medicine on the Net Web Excellence Award

Presented by COR Healthcare Resources

The Medicine on the Net Web Excellence Awards are presented annually to recognize outstanding websites in the medical field. Defibtech won the Best Design award in the Healthcare Medical Supplier category. (February 2005)

Technology Innovation Award

Presented by the Greater New Haven Chamber of Commerce

The Growth & Innovation Awards are presented to members who are outstanding in their fields. Defibtech was recognized with the Technology Innovation Award for its outstanding contribution and excellence in biotechnology. (September 2004)

CT Quality Improvement Award Innovation Prize

Presented by the Connecticut Quality Improvement Award (CQIA) Partnership

The CQIA is America's oldest state-level Malcolm Baldrige National Quality Award. It is the state's leader for recognizing quality and performance excellence in CT. Baldrige trained examiners awarded the gold award to Defibtech. (July 2004)

Notable Deployments

State of New Jersey Orders over 2,600 Defibtech AEDs



GUILFORD, CT – July 6, 2005 – Defibtech announced today over 2,600 of the Company's Automated External Defibrillators (AEDs) have been ordered by the State of New Jersey for deployment in police, fire and EMS vehicles, as well as in a variety of public facilities. ☐□

Defibtech Delivers over 900 AEDs to State of AR



GUILFORD, CT – March 31, 2005 – Defibtech announced today that for the third year in a row the state of Arkansas has chosen the Defibtech AED to deploy throughout the state. This third deployment of 365 units will bring the total number of Defibtech AEDs delivered to buyers in Arkansas to over 900 units.

YMCAs Deploy More than 300 Defibtech AEDs



GUILFORD, CT – February 24, 2005 – Defibtech announced today that YMCAs/YWCAs across the United States have cumulatively purchased more than 300 Defibtech automated external defibrillators. The AEDs are placed in health centers, gyms, community centers and corporate offices. The YMCAs have already reported a number of saves using Defibtech AEDs.

State of Maine Deploys over 500 Defibtech AEDs



GUILFORD, CT – December 31, 2004 – Defibtech announced today that for the second year in a row, the state of Maine selected the company's AEDs for deployment throughout the state. More than 200 AEDs were shipped to the state of Maine today, adding to the more than 300 previously shipped. The AEDs will be deployed in rural communities in fire, police and emergency services vehicles and community facilities.

State of Idaho Deploys over 380 Defibtech AEDs



GUILFORD, CT – November 30, 2004 – Defibtech announced today that over 380 AEDs were shipped to the state of Idaho. The Idaho Department of Health and Welfare, EMS Bureau purchased more than 380 defibrillators which will be deployed throughout rural communities in fire and emergency services vehicles, community facilities and regional health care centers.

States of FL & NM Deploy over 400 Defibtech AEDs



GUILFORD, CT – July 14, 2004 – Defibtech announced today that it recently shipped over 400 AEDs to the states of Florida and New Mexico. The state of Florida will deploy the AEDs throughout the rural EMS. The state of New Mexico purchased the units for the Department of Aging and Long-term Services and will place the AEDs in a variety of senior centers and long-term care facilities.

Boston Transit System Deploys Defibtech AEDs



GUILFORD, CT – January 14, 2005 – Defibtech announced today that the Massachusetts Bay Transit Authority (MBTA) has deployed more than 60 Defibtech Lifeline AEDs throughout the MBTA system. The AEDs are located in transit stations, corporate offices and vans. The MBTA system includes the Boston subway, known as the "T", as well as the bus and commuter train lines of the metropolitan Boston area.

Regulatory Approvals



FDA Clearance for Lifeline & ReviveR AEDs

The U.S. Food and Drug Administration (FDA) granted Defibtech 510(k) clearance to market its automated external defibrillators. The AEDs are marketed under the Lifeline and ReviveR names. (June 2002)



FDA Clearance for Pediatric Defibrillation Pads

The U.S. Food and Drug Administration (FDA) granted Defibtech clearance to market pediatric defibrillation pads for its Lifeline and ReviveR automatic external defibrillators for use on children under age 8. (June 2004)



CE Marking and ISO-13485 Certification

The CE Marking approval process certified that Defibtech is in full quality compliance with European Union (EU) Directives for Medical Devices for its automated external defibrillators and accessories. (February 2004)



Health Canada License for Lifeline & ReviveR AEDs

The Therapeutic Products Directorate under Health Canada issued the medical device license for all products and accessories in the Lifeline and ReviveR family. The license allows Defibtech to market its devices in Canada. (January 2005)