OMEGA FIRE AND SECURITY

FIRST AID TREATMENT REGISTER

SITE NAME: _____

NAME OF FIRST AIDER: _____

TREATMENT CODES	DATE	NAME OF INJURED	NATURE OF THE INJURY (eg Laceration, Right hand)	TREATMENT (use codes)	REFERRED (eg Doctor, Clinic, Hospital)
1 Cleaner / Antiseptic					
2 Swabs for cleaning					
3 Cotton wool for padding					
4 Sterile gauze					
5 Scissors and forceps					
6 Safety pins					
7 Triangular bandages					
8 Roller bandages (75m					
9 Roller bandages					
10 Elastic adhesive					
11 Non allergenic adhesive strip					
12 Adhesive dressing strips					
13 Dressing pads (75mm					
14 Dressing pads (150mm X					
15 Straight splints					
16 Latex gloves					
17 CPR mouth pieces					
18 Stretcher					
19 Blankets					
20 (other)					