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| External first aid information |

# About this form

To help support the verification of your external first aid course and / or professional training, please fill in as much of this form as you can.

If you have been awarded a 3 year certificate, then you should be uploading this information in the External first aid (3 year) area of the learning platform.

If you have been awarded a 1 year certificate, for example for you a doctor, nurse or other health care professional with in-date training such as BLS, ILS or ALS, you should be uploading this information in the External first aid (1 year) area of the learning platform.

Our verifiers may need to contact you to check when it is unclear if all elements of the syllabus have been covered or if there is something missing. They can do this directly through the learning platform where you will receive a notification email to the email you have registered on the learning platform. However, sometimes it might be easier to contact you through phone or email directly.

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| --- | --- |
| Name : | |
| **Membership Number:** |  |
| **Name of external provider for your course:** |  |
| **Course length (hours):** |  |
| **Link to course website / syllabus information:** |  |
| **Phone / email :** |  |
| **Medical professionals only: please provide your Registration number/Pin and confirm which Council this is with (NMC, GMC or HCPC** |  |

You can now use the table below to match your course / training to the current Girlguiding 1st Response syllabus. Please tick **YES** if this element was included in your course / training and **NO** if it was not. If it has not been included in your course / training our first aid verifiers will work with you to cover the remaining elements.

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| 1st Response syllabus | | | |
| You must have demonstrated elements marked with \*\* practically on your course (although those who are not able to do this may instruct others in doing the skill). | | | |
|  | **YES** | **NO** | **Session in**  **1st Response Course** |
| **Life Support** |  |  |  |
| Approach and assessment \*\* |  |  | 1 |
| CPR for an adult \*\* |  |  | 1 |
| CPR for a child \*\* |  |  | 1 |
| Use of AED (automated external defibrillator) \*\* |  |  | 1 |
| Choking |  |  | 1 |
| Causes and level of unresponsiveness |  |  | 1 |
| Recovery /safe airway position \*\* |  |  | 1 |
| **Trauma and injury** |  |  |  |
| Shock |  |  | 2 |
| Bleeding\* (inc tourniquets) |  |  | 2 |
| Fractures and sprains (including spinal injuries) |  |  | 2 |
| Ticks |  |  |  |
| Head Injury |  |  | 2 |
| Dental incidents |  |  | 2 |
| Burns (including chemical and sunburn) |  |  | 2 |
| **Major Illness** |  |  |  |
| Asthma |  |  | 3 |
| Anaphylaxis \* |  |  | 3 |
| Heart attack |  |  | 3 |
| Stroke |  |  | 3 |
| Seizures |  |  | 3 |
| Diabetes |  |  | 3 |
| Sepsis/Meningitis |  |  | 3 |

If you *partially* covered any of the syllabus above (eg: bleeding without tourniquets) please provide more information below:

Remember to upload a copy of your most recent and in-date certificate or screenshot confirmation of any course completion alongside this form.