

**Wilderness First Aid Basics**

Start Here

**INITIAL ASSESSMENT**

Level of Consciousness:

Respirations:

Pulse:

**SAMPLE HISTORY**

Signs and Symptoms:

Allergies:

Medications:

Pertinent Past History:

Last Fluid or Food:

Events Leading to Accident:

**PHYSICAL EXAM (DOTS)**

Head:

Neck:

Chest:

Abdomen:

Pelvis:

Extremities:

Back:

Skin:

Victim's Name:

Age:

Completed by:

**First Aid Report Form**

First Aid Given

*Detach here - Keep this section with victim*

**American Red Cross**

Rescue Request

Time of Incident: \_\_\_\_\_ Date: \_\_\_\_\_

Am Pm

Nature of Incident:

- Fall  Illness  Heat  Cold  Burn  Allergy  
 Bite or Sting  Other

Brief Description of Incident:

Injuries:

First Aid Given:

Pain (Location):

Skin Temp/Color:

Consciousness:

Initial:

Time:

Resp:

Pulse:

Victim's Name:

Age:

Address

Notify (Name)

Relationship:

Phone:

Date:

Time Started:

