

WILDERNESS FIRST AID EVALUATION

INITIAL ASSESSMENT

Date of Incident _____

Time of Incident _____ AM
_____ PM

Adult Normals:
Pulse 60-100/m Cap refill < 2s
Breaths 12-15/m Pupils: equal
Temp 98.6 °F & reactive

Level of Consciousness (LOC, **A,V,P,U**)

- Alert
- Responds to Verbal
- Responds to Pain
- Unresponsive

Pulse Breaths

VICTIM'S CONTACT INFO

Name _____

Phone _____

Dr. or Emerg. Contact Name _____

Dr. or Emerg. Contact Phone _____

EVACUATION REQUEST

Total # to Evac, including victim on this form _____

Victim's Name _____

Victim's Phone _____

Dr. or Emerg. Contact Name _____

Dr. or Emerg. Contact Phone _____

HISTORY

Signs & symptoms _____

Allergies / Med-Alerts _____

Medications _____

Pertinent Past History _____

Last Food or Drink _____

Events Leading to Accident _____

FIRST AID APPLIED

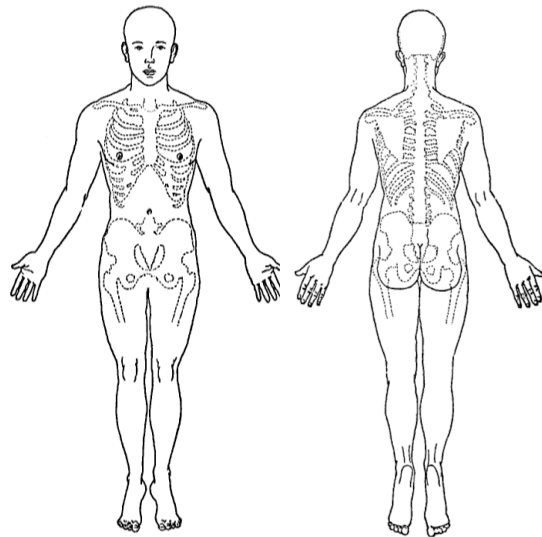
Date of Incident _____ Time of Incident _____ AM
_____ PM

Brief description of incident _____

Injuries (prioritize, noting pain level) _____

First aid given: _____

EXAM for Deformity, Open injury, Tenderness, Swelling



Examine: Head, Neck, Chest, Abdomen, Pelvis, Extremities, Back, Skin

Date Started _____ Time Started _____ AM
_____ PM

Name of care giver _____

Vitals	LOC (AVPU)	PULSE	BREATHS per Min	SKIN TEMP	SKIN COLOR
Initial	AM				
	PM				
	AM				
	PM				
	AM				
	PM				
	AM				
	PM				

VITAL SIGN RECORD

Every 15 minutes for 1st hour or if changing. Every hour if stable.

Date	Time	LOC (AVPU)	Pulse Rate	Pulse Character	Pulse below injury Rate	Pulse below injury Character	Breaths Rate	Breaths Character	Pupils	Skin	Other
	AM										
	PM										
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	PM										
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EVACUATION REQUEST

Exact Location (include map or sketch)

GPS Lat: ____° ____' ____." "

GPS Long: ____° ____' ____." "

Area description:

Terrain or hazards rescuers need to be aware of:

Site visible from air? Yes / No	Look for (describe landmarks, signals, tent color, etc.)
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Radio or cell phone communications?

On-site plan: Will stay put Yes / No	If stay put is NO, will evacuate to:
Can stay overnight? Yes / No	

List on-site equipment available:

List equipment or supplies needed:

Party members remaining	Notify/phone
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