First Aid Response Sheet

First Aid Officers:	Name:	Telephone:	
Emergency Numbers:	Police, Fire & Ambulance 000		
Nearest Hospital:			
What to do in any	1. Contact First Aid Officer		
medical emergency:			
	D.R.S.A.B.C.D		
	<u>D</u> - Check for DANGER		
	• To you		
	To others		
	To casualty		
	<u>R</u> - Check for RESPONSE		
	Is casualty conscious?		
	Is casualty unconscious?		
	<u>S – SEND for ambulance (if required)</u>		
	A - Check AIRWAY		
	Is airway clear of objects?		
	Is airway open?		
	<u>B - Check for BREATHING</u>		
	Is chest rising and falling?		
	Can you hear or feel air from mouth or nose?		
	If no breathing, give 2 initial breaths		
	<u>C - Give CPR</u>		
	If no signs of life? unconscious, not breathing and not moving, start CPR		
	CPR involves giving 30 compressions at a rate of approximately 100 compressions		
	per minute followed by 2 breaths		
	<u>D - Apply a DEFIBRILLATOR</u> (if available)	an's Ambulance Action Dlan)	
	Follow voice prompts (Ref: St Joh	in s Ambulance Action Plan	
	2. If First Aid Officer is not available:		
	 Check for danger to self and others and remove or control it (ONLY if safe to do so) to avoid further risk to the casualty Call 000 for an ambulance 		
	Give the following details:		
	 Exact location? church, the build Nth 	ing and number – 107 Springfield Rd, Blackburn	
	 What's happened (to the best of 	your knowledge? be clear and concise)	
	 Symptoms (if known) 		
	 Your name and a contact number 	r	
	 Arrange for someone to wait out 	tside for the ambulance to direct them when	
	they arrive		
		y until assistance arrives and administer first aid	
	as instructed until assistance arr		
	 Do not move casualty/s unless es 	xposed to life threatening situation	
	 Record evidence of the event, i.e. wh / Injury report form 	o, where, when, how, and what for the incident	
	6. Submit incident report to the Business Manager as soon as possible		

First Aid Officers list

#	Name:	Contact number:
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		