

**Wilderness First Aid Basics****First Aid Report Form****American Red Cross****Rescue Request**

Start Here		First Aid Given		Rescue Request	
<b>INITIAL ASSESSMENT</b>				Time of Incident:      Date:	
Level of Consciousness:				Am   Pm	
Respirations:				<b>Nature of Incident:</b> <input type="checkbox"/> Fall <input type="checkbox"/> Illness <input type="checkbox"/> Heat <input type="checkbox"/> Cold <input type="checkbox"/> Burn <input type="checkbox"/> Allergy <input type="checkbox"/> Bite or Sting <input type="checkbox"/> Other	
Pulse:				<b>Brief Description of Incident:</b>	
<b>SAMPLE HISTORY</b>					
Signs and Symptoms:					
Allergies:					
Medications:					
Pertinent Past History:					
Last Fluid or Food:					
Events Leading to Accident:					
<b>PHYSICAL EXAM (DOTS)</b>		<b>Injuries:</b>		<b>First Aid Given:</b>	
Head:					
Neck:					
Chest:					
Abdomen:					
Pelvis:		Pain (Location):			
Extremities:		Skin Temp/Color:			
Back:		Consciousness:			
Skin:		Initial:			
Victim's Name:      Age:		Time:			
		Resp:			
		Pulse:			
		Victim's Name:		Age:	
		Address			
		Notify (Name)			
Completed by:		Date:	Time Started:	Relationship:	Phone:

95

Detach here - Keep this section with victim

## Rescue Request

**Exact Location (Include map if possible):**

**Area Description:** \_\_\_\_\_

Terrain: \_\_\_\_\_

**On-site Plans:**

☐ Will stay put

☐ Will evacuate to:

**Can stay overnight:**

☐ Yes☐ No

On-site equipment: \_\_\_\_\_

Evacuation needed for: \_\_\_\_\_

Equipment needed: \_\_\_\_\_

Party members remaining:

Name

**Notify/Phone**

### Vital Sign Record

[illegible]