# **First Aid Kit and Equipment INSPECTION CHECKLIST**

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| **Inspector Name:** |  | **First Aid Kit No.** |  |
| **Inspection Date:** |  | **AED No. \_\_\_\_\_** |  |

| **Contents** | **In stock** | | **Comment** |
| --- | --- | --- | --- |
| **YES** | **NO** |
| 1 X Instructions for providing first aid—including cardiopulmonary resuscitation (CPR) flow chart. |  |  |  |
|  |
| 1 X Notebook and pen. |  |  |  |
|  |
| 1 X CPR face mask/shield. |  |  |  |
| Expiry date:  Sealed and intact. |
| 5 X Disposable nitrile examination gloves. |  |  |  |
| . |
| 5 X Gauze pieces 7.5 x 7.5 cm, sterile 3 per pack. |  |  |  |
|  |
| 1 X Thermal blanket for shock and hypothermia. |  |  |  |
| Sealed and intact. |
|  |  |  |  |
| 8 X Saline, 15 ml. |
| 10 X Wound cleaning wipe, single 1% Cetrimide BP. |  |  |  |
|  |
| 1 X Adhesive dressing strips—plastic or fabric, packet of 50. |  |  |  |
| 10 X Splinter probes, single use, disposable. |  |  |  |
| 1 X Tweezers.  1 X forceps. |  |  |  |
| 1 X Antiseptic liquid/spray 50 ml. |  |  |  |
| 6 X Non-adherent wound dressing/pad 5 x 5 cm (small). |  |  |  |
| 3 X Non-adherent wound dressing/pad 7.5 x 10 cm (medium). |  |  |  |
| 1 X Non-adherent wound dressing/pad 10 x 10 cm (large). |  |  |  |
| 3 X Conforming cotton bandage, 5 cm width. |  |  |  |
| 3 X Conforming cotton bandage, 7.5 cm width. |  |  |  |
| 1 X Crepe bandage, 10 cm, for serious bleeding and pressure application. |  |  |  |
| 1 X Scissors. |  |  |  |
| 1 X Surgical tape |  |  |  |
| 1 X Non-stretch, hypoallergenic adhesive tape—2.5 cm wide roll |  |  |  |
| 2 X Safety pins, packet of 6. |  |  |  |
| BPC wound dressings No. 14, medium. |  |  |  |
| BPC wound dressings No. 15, large. |  |  |  |
| 1 X Dressing—Combine Pad 9 x 20 cm. |  |  |  |
| Plastic bags—clip seal 1S, 1M, 1L. |  |  |  |
| 1 X Triangular bandage, calico or cotton minimum width 90 cm. |  |  |  |
| 4 X Eye pad, single use. |  |  |  |
| 5 X Hydrogel.  3.5 gm sachets. |  |  |  |
| Instant ice pack for treatment of soft tissue injuries and some stings. |  |  |  |
| Bite & itch relief gel. |  |  |  |
| General EpiPen.  Expiry date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Ventolin Asthma reliver.  Expiry date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Spacer. |  |  |  |
| Sharps container. |  |  |  |
| List of contents.  Contents list is correct. |  |  |  |
| **Other:** |  |  |  |
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| **Declaration:** |
| *I have completed the first aid kit inspection.*  * Items have been cleaned.*  * Packets are properly sealed.*  * Items have not exceeded expiry dates.*  * Previously used items have been replaced.* |

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| --- | --- | --- | --- |
| **Inspector Signature:** |  | **Date:** |  |

# **AED Maintenance CHECKLIST**

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| AED Location |  |
| AED Make/Model |  |
| AED Serial Number |  |
| Date battery installed |  |
| Date Pads Expire |  |

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| --- | --- | --- | --- | --- | --- |
| **Inspection** |  | **Date of inspection** |  |  |  |
| **Condition** | Status ready indicator shows the unit is ready. | |  |  |  |
| Battery is working and not expired. | |  |  |  |
| **Component** | Unit is free of cracks, foreign substances, or other signs of damage. | |  |  |  |
| Pads are sealed, unused and not expired. | |  |  |  |
| Supporting materials are sealed and unused within expiration date: Face shield, scissors, gloves, razor, alcohol wipes | |  |  |  |

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| **Declaration:** |
| *I have completed the AED inspection, the item is satisfactory and ready for use.* |

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| **Inspector Signature:** |  | **Date:** |  |