

FIRST AID POLICY & PROCEDURES

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Policy Purpose

First Aid can save lives. First aid means the treatment of minor injuries which do not need treatment by a medical practitioner or nurse as well as treatment of more serious sudden serious injuries or illnesses prior to assistance for the preserving of life and minimizing the consequences of injury or illness.

The School has a responsibility to ensure adequate, safe and effective First Aid provision in order for every student, staff member and visitor to receive appropriate treatment in the event of an injury, or illness.

This policy sets out the management of First Aid provision at the School.

Application

This policy applies to all staff (teachers, administrative and facilities), students and visitors to the School.

First Aid provision is available at all times on the School campus during the school day, at all times and also off the premises during school activities, trips and visits.

School Nurse:

- is the Appointed person for management of First Aid provision (is a Registered Nurse). There is a nurse on each site at all times and present for the Summer Schools.
- for ensuring that there is adequate and appropriate First Aid equipment and facilities
- for ensuring there are adequate numbers of qualified First Aiders and identifying the need for training

Senior Leadership Team:

- for ensuring that all staff and pupils are aware of, and have access to, this policy
- for ensuring Accident/Incident forms are completed as required; that necessary actions are taken to reduce recurrences and the lessons learnt are communicated across the School community
- for approving the purchasing of first aid training and updating
- for ensuring staff are released in order to have sufficient understanding, confidence and expertise in relation to first aid

First Aiders:

- to give immediate First Aid to students, staff or visitors when needed and ensure that an ambulance or other professional medical help is called when necessary
- to document all treatment given and complete an Accident Form
- to ensure that their First Aid certificates remain up to date through liaison with the School Nurse
- reporting any considered hazard to the Senior Leadership Team

First Aid Training and Updating

The Schools have a high proportion of staff that hold first aid certificates, in 2019/20 approximately 60 staff at the Junior School and 30 at the Senior School site. The School will strive to ensure these certificates are kept up to date. Priority of training is given to those staff in roles where it is deemed essential to be First Aid qualified, for example:

- Sports Teachers
- Staff leading Outdoor Activities
- Staff leading Trips and Visits
- At least one member of staff in each class of Pre-School, Pre-Reception, Reception, Key Stage 1 and Key Stage 2
- At least one member of each department at the Senior school.
- At least two members of the Administration Team
- At least two members of the Facilities Team
- At least two members of the Cleaning Staff
- At least one of the Maintenance Staff
- Senior Leadership Team

First Aid training will be delivered by a number of providers including the St John's Ambulance Brigade and specific training companies.

To revalidate a first aid qualification, an update or refresher course must be attended every 3 years.

First Aid Facilities

Medical Rooms one each site and one additional room close to the pool area

The Medical Room has a stock of first aid equipment and can be accessed by members of the Senior Leadership Team and Admin Staff when the School Nurse is unavailable/off site. The Medical Room is located centrally within the School to provide easy access to ill and/or injured persons. It has access to a sink and bathroom. The room is equipped with a bed, additional seating and has a telephone.

School Reception has a list of first aiders and a list of First Aid Box locations

Please refer to the medicines policy for the administration of medicines, plasters and suntan creams

First Aid Boxes

First Aid boxes are green/ white coloured boxes/bags and are located prominently, near to hand washing facility:

- a. Reception.
- b. Medical/First Aid rooms.
- c. PE Office

The contents of the box are in accordance with the guidelines in the Health and Safety (First Aid) Regulations 1981 – Code of Practice and Guidance 1997. The School Nurse supplements the initial contents (see Appendix 2). Restocking takes place each term following a stock take of the contents (prompted by School Nurse).

The staff member responsible for the area in which the First Aid box is located is responsible for requesting replenishment of items after each use. This member of staff is also responsible for ensuring the First Aid box is kept available for us.

Automated External Defibrillator

There is an automated external defibrillator on each site, at the Junior school site it is situated in the first aid room and at the Senior school it is situated in the downstairs reception areas by the changing rooms both have adult and paediatric pads. Staff who have completed first aid training have also received training in use of the defibrillator. (See Appendix)

Mobile Kits

There are mobile First Aid Kits for use on trips, visits and activities. These range from compact bags to larger Sports First Aid bags. These are stored in the Medical Room and are signed in and out with the School Nurse.

The content of the Mobile First Aid Kits reflects the guidelines above (see Appendix 2).

The staff member in charge of a trip, visit or activity is responsible for obtaining a first aid kit appropriate to the activity and group concerned. Some trips will not require this as it is usual that places of public interest have their own first aid provision.

Leaders of trips require a medical form signed by parents stating any illness. If any illnesses require prescribe medication a MED1.2 & 3 must be completed by the parent and handed to the nurse with medicines. These will then be given to the trip organizer. This form and medicines must be handed back to School Nurse upon return.

Trips involving an overnight stay or outside of Cyprus require an Emergency File (see Emergency File procedure), which includes a copy of the Consent for Medical Treatment form signed by a parent giving responsibility to the School in the event of an emergency requiring medical or surgical intervention.

Vehicle First Aid Kits

All vehicles used to convey students must have a First Aid Kit. Coach companies must be responsible for providing a kit. Contents should be checked and restocked each term by a delegated person. If you find the coach company will not provide a kit then a mobile kit should be taken on the coach.

Record keeping

An Accident/ Incident Report A/I 1 Form, must be completed for all accidents or near misses. The form is located on the web site and the First Aid Room.

All First Aid boxes and kits contain a notebook and pen; a record must be kept for all first aid treatment given. The notebook contains a table to aid completion and ensure all necessary information is documented (e.g. date, time, place of injury/illness, brief description of the event, treatment given, items used). First Aid Policy.

Records are stored for at least 1 year in the Data System.

Monitoring to reduce Risk

The School Nurse will collate an annual report for the Health and Safety Committee meetings detailing accidents and near misses in order to take note of trends and areas of improvement. This report will be presented to the Senior Leadership Team. This will form part of the School's risk management process. The information may help identify training or other needs and be useful for investigative or insurance purposes.

Communication with the Senior Leadership Team and Parents

Teacher in Charge or School Nurse to who will inform parents of any minor accidents during the day. More serious accidents will be reported to parents by a member of the Senior Leadership Team

During a trip, visit, activity or sporting fixture the Teacher in charge will inform the Significant Injuries, accidents or illnesses that occur during the School day will be reported by the nominated Senior Leadership Team contact of any serious or significant injuries, accidents or illnesses and a decision made about who will contact parents. Parents will be informed as soon as possible.

Emergency Services

In the case of the Student/Adult needing to go to the hospital and an ambulance is needed Form 1 CES must be used **call 22887171 (Ambulance Call Centre)**. The patient will automatically be sent to the **Local Public Hospital**. If this is not available call 112.

The First Aider in charge should make arrangements for the ambulance to have access to the accident site and be met at the entrance of the site.

Students will be escorted to hospital by a member of staff.

If the parents of the student make the decision that they want their child to go to a private hospital/ clinic it must be made clear that ALL charges are borne by the parents. If an adult casualty makes the same decision it must be made clear ALL charges will be their own responsibility.

An ambulance should always be called in the case of head injury. In most cases the nurse or first aider will make a decision to call an ambulance according to the severity of the injury.

Dealing with body fluid spills

Guidance on the management and handling of body fluid spillages are in line with the UK's Health Protection Agency. Sand must be used to cover spillage and then cleaned up. The sand must be sealed in a plastic bag and immediately disposed of. Persons cleaning must protect themselves from contact with the appropriate PPE protection.

Medical Management Plans

Every student that has a recognized medical problem (allergies, asthma, epilepsy, diabetes) has an individual Management Plan (MED5) which is held in the Medical Room. The Medical Management Plan contains details of the individual's medical problem, how the problem presents itself and the necessary treatment required. A photograph of the student (especially those suffering from allergies) will be visibly displayed. The details of any pupil requiring an EpiPen, or with a mild nut allergy, or other serious or potentially serious medical condition are highlighted on medical reports.

Epipens

Should a student who has been prescribed an EpiPen leave the school premises on a trip, visit, activity of sports match, their EpiPen (and any other related medication) will be sent with the teacher in charge. Epipens are stored in a medicine's cupboard in Medical Room. Their expiry dates are recorded and parents are sent a reminder when a replacement is required. Out of date pens are taken to the local pharmacy for disposal.

Staff receive a video training on EpiPen use (annually) and individual support as required from the School Nurse. Practice with a Trainer EpiPen is encouraged.

Asthma

Every student suffering from asthma should have a spare inhaler, kept in a locked cupboard in the Medical Room. Expiry dates are recorded and parents are sent a reminder when a replacement is required. Out of date inhalers are taken to the local pharmacy for disposal.

Diabetes

All diabetic students/staff have a completed diabetic care plan which is kept up to date by the nurse. The prescribed Insulin is kept in the fridge in the First aid room. Expiry dates are recorded and parents are sent a reminder when a replacement is required. Out of date insulin is sent home for disposal. A pack of sweet items is

kept by the nurse in case a person suffers from a Low blood sugar (hypoglycemia) attack.

Epilepsy

The School Nurse will inform all staff of measures to take in the event of a student succumbing to a seizure. If a student is prescribed medication it will be kept in the first Aid room.

Specific Injuries/Illnesses

The first aid management of asthma, anaphylaxis, epilepsy, suspected fractures, and serious (typically sporting) injuries are detailed in Appendices 3-5.

Related Policies

- Medicines Policy
- Health and Safety
- Safeguarding and Child Protection

References

Asthma UK <http://www.asthma.org.uk> Accessed 19/4/12

Department of Health (2001) National Minimum Standards for Boarding Schools

Epilepsy Action <http://www.epilepsy.org.uk> Accessed 19/4/12

EpiPen UK <http://www.epipen.co.uk> Accessed 19/4/12

International Rugby Board (2012) www.irb.co.uk Accessed 19/4/12

St John's Ambulance <http://www.sja.org.uk/sja/default.aspx> Accessed 19/4/12

UK Health and Safety (First Aid) Regulations 1981 and its Approved Code of Practice and Guidance (revised 1997)

Diabetes :<http://www.diabetesinscotland.org.uk/Publications/Paediatric/Fife%20School%20Diabetes%20Policy.pdf>

USEFUL CONTACTS

Ministry of Health Cyprus

Prodromou Street, Nicosia 1148

Tel :22605300

Website: www.moh.gov.cy

Ministry of Education & Culture Cyprus

Kimonos & Thoukydidou Corner, Acropoli, Nicosia 1432

Tel :22800600/700

Website: www.moec.gov.cy

Ministry of Labour & Welfare

Lordou Vyronos 7, Nicosia 1463

Tel: 22401600

Website: www.mlsi.gov.cy

DOCUMENT CONTROL:

Ratified by Board:

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Date Revised: September 2019

Appendices

- 1 Listing of all qualified First Aid Staff
- 2: Contents of First Aid Kits (Ref: UK Health and Safety (First Aid Regulations 1981)
- 3: How to deal with an asthma attack (Ref: www.asthma.org.uk)
- 4: Anaphylaxis and EpiPen Use (Ref: www.epipen.co.uk)
- 5: First Aid for Diabetic High blood sugar (hyperglycemia) and Low blood sugar (hypoglycemia)
- 6: First Aid for Epilepsy Seizures (Ref: www.epilepsy.org.uk)
- 7: First Aid for suspected Fractures (Ref: www.sja.org.uk)
- 8: Accident/Incident Form (A/I 1)
- 9: Request for an Ambulance
10. Defibrillator checklist

Appendix 1 Listing of All Qualified First Aid Staff 2019-2020

The Junior School	The Junior School	The Senior School	The Senior School
Stella Hadjinicolaou	Kostas Mesimerlis	Naomi Theocharides	Philippou Philippou
Maria Readman	Andree Georgiou	Xenia Iacovou	Niki Demetriou
Esther Alexandrides	Kallisteny Constantiou	Achilleas Vyrides	John Pipis
Elizabeth Panteli	Marios Nicodemoy	Eleftheriou Andreou	Filio Hartoutsiou
Jenny Yiannouris	Jill McDonald	Eleftheriou Damianou	Chariety Pamire
Helen Nicolou	Tina Gregoriou	Anastassia Papanasatasiou	Maria Monou
Christina Aggelides	Jose Vidal	Elena Christou	Katerina Ioannou
Julie Markides	Christella Papamichael	Demetra Trasyvoulou	Evi Votsi
Elena Anastasiou	Melina Demetriou	Eleni Kalletsi	Irene Joannides
Mary Varvaris	Sofhie Mellis	Maria Zembeki	Stella Papotta
Maria Anastasiades	Christina Liatsou	Maria Monou	Ioanna Skordi
Demetra Tassouri	Cally Xenophontos	Irene Joannides	Maria Kallepeti
Helen Michael	Wesley Bender Hoplaros	Georgia Papasavva	Eleanora Antoniou
Michelle Christou	Spyroulla Georghiou	Eleni Kasaparides	
Grainne Constatinides	Katerina Paraskeva	Joanna Drousiotou	
Eleni Polyviou	Katerina Economou	Aspasia Manti	
Demetra Gregory	Romonias Economides	Katerina Iordanou	
Nadine Tsielepis	Carole Nicolaides	Paula Savva	
Eugenia Patsalis	Nicole Andreade	Konstantina Varvatsoulis	
Maria Gavriel	Yiota Christoforou	Erine Philippou	
Marina Savva Skordas	Georgia Christou	Natalie Shaka	
Yianna Mavrommati	Anastassia Patsalis	Dina Booton	
Marina Savva	Astero Manias	Eleni Cosma	
Despina Kafouris	Fivi Markidou	Andre Tsolakis	
Andrie Kleanthous	Elena Savva	Helen Polydourou	
Chris Piers	Tania Konstaninou	Elena Andreou	
Fodini Mappouras	Giogos Georgiou	Eleanora Antoniou	
Evanthia Makris	Thalia Achilleos	Procopis Anastassiou	
Anna Papandreou	Zoe Anatassiou	Maria Ptohides	

Appendix 2: Contents of First Aid Kits (Ref: UK Health and Safety (First Aid Regulations 2011) First Aid Policy

British Standard B5-8599-1

First Aid In An Emergency Booklet - Single	1
Medium first aid dressing, 12 x 12cm - sterile	4
Large first aid dressing, 18 x 18cm - sterile	1
Disposable triangular bandage, 90 x 90 x 130cm - non-sterile	2
First aid finger dressing, 3.5 x 3.5cm - sterile	2
Conforming bandage, 7.5cm x 4.5m - single	1
Safety pins, assorted sizes - pack of 6	1
No.16 eye pad first aid dressing - sterile	2
Washproof Low Allergy Plasters Assorted (Pk 10)	4
Sterile Cleansing Wipes (pk 10)	2
Microporous tape, 2.25cm x 10m - single	1
SJS Nitrile Powder Free Gloves (large)	6
Revive Aid	1
Disposable Heat Retaining Adult Blanket	1
Burnshield® Dressing- 10 x 10cm	1
Tuff Kut Scissors	1

Appendix 3: How to deal with an Asthma attack (adapted from asthma.org.uk)

Signs of an Asthma attack or if any of the following happens:

- The prescribed reliever isn't helping or lasting over four hours
- Symptoms are getting worse (cough, breathlessness, wheeze or tight chest)
- Patient is too breathless or has difficulty to speak, eat or sleep
- Breathing may get faster and it feels like they can't get their breath in properly
- Children may complain of a tummy ache.

The following guidelines are suitable for both children and adults and are the recommended steps to follow in an asthma attack:

- Sit up straight – do not lie down. Try to keep the patient calm.
- Take one puff of their reliever inhaler (usually blue) every 30-60 seconds, up to a maximum of 10 puffs.
- If your patient feel worse at any point while you're using their inhaler **or they** don't feel better after 10 puffs **or** you're worried at any time, **call 22887171 (Ambulance Call Centre) for an ambulance**
- If the ambulance is taking longer than 15 minutes you can repeat step 2

If the symptoms improve and you don't need to call **22887171 (Ambulance Call Centre)**, you still need to make an urgent same day appointment.

Check Patients health care plan, as a severe asthmatic might have a prescription for rescue prednisolone tablets. If they have then take these as instructed by the doctor.

IMPORTANT! This asthma attack information is not designed for people using either a Symbicort inhaler on the Symbicort SMART regime or a Fostair inhaler on the Fostair MART regime. If the person is on either the **Symbicort SMART or Fostair MART regime**, the persons own doctor needs to give the correct asthma attack information.

**Contact Senior Leadership Team to attend and inform Parents
Call 22887171 (Ambulance Call Centre), 112 for an ambulance**

Appendix 4: Anaphylaxis and EpiPen use

Anaphylaxis (also known as anaphylactic shock) is an allergic condition that can be severe and potentially life threatening. Anaphylaxis is your body's immune system reacting badly to a substance (an allergen), such as food. The whole body can be affected, usually within minutes of contact with a substance, though the reaction can occur hours later

A more severe form of anaphylaxis can result in sudden collapse without any other warning symptoms, such as hives or flushing. This form of anaphylaxis occurs most commonly after a person is given a medication into a vein or is stung by an insect. A combination of the symptoms listed above normally occur during anaphylaxis. Each symptom on its own does not constitute anaphylaxis.

What causes Anaphylaxis?

Substances that can trigger this reaction can be very obvious or difficult to identify. The following are some common triggers:

- Foods: In children, hen's eggs, cow's milk, peanuts, tree nuts, fish, wheat, and soy are the most common food triggers. In teens and adults, peanuts, tree nuts, fish, and crustaceans (shellfish such as shrimp) are the most common triggers. Any food, including fruits and vegetables, and some spices and food additives, can cause anaphylaxis
- Medications, especially certain antibiotics (such as penicillin or amoxicillin), medications for pain and fever (such as aspirin or ibuprofen), some x-ray dyes (also called radio contrast media), and others
- Venom from insects, including bees, hornets, wasps, and fire ants
- Latex from natural rubber, found in some latex gloves, balloons, condoms, sports equipment.
- Allergen immunotherapy ("allergy vaccination injections"), such as those given for the treatment of allergic rhinitis (hay fever)
- Exercise, either by itself, or after eating certain foods (eg, wheat, celery, seafood), medications (eg, aspirin), or exposure to cold air/water

Less common triggers include exposure to airborne allergens (such as horse dander), human seminal fluid, and cold temperatures.

Treating Anaphylaxis

Adrenaline (Epinephrine) is the first choice for anaphylaxis it works best if it is given within the first few minutes of a severe allergic reaction.

How to use the EpiPen® Auto-Injector

Instructions may differ from one auto-injector to another.

EpiPen® is an auto-injector, containing one single dose of adrenaline. EpiPen® Jr is available for young children. Stay with other people if possible. There is no need to undress, because the injector works through clothing. However, when possible, lift the edge of a skirt or lower trousers to avoid hitting a buckle, zipper, or contents of your pocket

**Contact Senior Leadership Team to attend and inform Parents
Call 22887171 (Ambulance Call Centre) for an ambulance**

Appendix 5: How to deal with Diabetic High blood sugar (hyperglycemia) and Low blood sugar (hypoglycemia)

Signs and Symptoms of High blood sugar (Hyperglycemia) may include:

- Increased thirst
- Frequent urination
- Fatigue
- Nausea and vomiting
- Shortness of breath
- Stomach pain
- Fruity breath odour
- A very dry mouth
- A rapid heartbeat

Signs and symptoms of Low blood sugar (hypoglycemia) may include

- Shakiness or nervousness
- Anxiety
- Fatigue
- Weakness
- Sweating
- Hunger
- Nausea
- Dizziness or light headedness
- Difficulty speaking
- Confusion

Some people, especially those who've had diabetes for a long time, develop a condition known as hypoglycemia unawareness and won't have the warning signs that signal a drop in blood sugar.

The following guidelines are suitable for both children and adults and are the recommended steps to follow if any symptoms or signs of high or low blood sugar

- Test the patients' blood sugar
- follow the patients' diabetes treatment plan based on the test results.

If the symptoms improve and you do not need to call 112, but an urgent same day appointment to see a doctor should be made.

If the patient does not start to feel better quickly, or start to feel worse, call for emergency help.

! Important information medical attention MUST Be sort if the person is in a diabetic coma is a serious medical emergency. If you're with someone with diabetes who has passed out, call for emergency help, and be sure to let the emergency personnel know that the unconscious person has diabetes.

**Contact Senior Leadership Team to attend and inform Parents
Call 22887171 (Ambulance Call Centre) for an ambulance**

Appendix 6: How to deal with a seizure (adapted from epilepsy.org.uk)

Signs of a Tonic-clonic (convulsion) seizure:

A tonic-clonic seizures are the type of seizures most people recognize. They use to be called grand mal seizures. The patient

- goes stiff, loses consciousness, falls to the floor and begins to jerk or convulse.
- They may go blue around the mouth due to irregular breathing.
- Sometimes they may loss control of their bladder and bowels, and bite their own tongue or the inside of their mouth.

The following guidelines are suitable for both children and adults and are the recommended steps to during a seizure:

- Protect them from injury (remove any harmful objects from nearby)
- Cushion their head.
- If you are not aware the child/person suffers with epilepsy, look for an epilepsy ID Card or jewellery identification as it may give information about their seizures and what to do.
- Time how long the jerking lasts.
- Aid breathing by gently placing them into the recovery position once the jerking has stoped.
- Stay with them until they are fully recovered
- Be calm and reassuring

What not to do during a seizure:

- Retrain their movements
- Put anything in their mouth
- Try to move them unless in danger.
- Give them anything to eat or drink until full recovered
- Attempt to bring them round

! Important information medical attention **MUST** Be sort if

- You know this is their first seizure
- The jerking continues for more than five minutes or
- They have one tonic-clonic after another without gaining consciousness between seizures or
- They are injured during the seizure or
- You believe they need urgent medical attention

Signs of a Focal seizure:

A focal Seizure can also be called a partial seizure. The patient

- May not be aware of their surroundings or what they are doing
- They may have unusual movements and behaviour.
- Smacking their lips, swallowing repeatedly
- Wandering about

The following guidelines are suitable for both children and adults and are the recommended steps to helping someone having a focal seizure:

- Guide them away from danger
- Stay with them until their recovery is complete
- Be calm and reassure
- Explain anything that they may have missed

What not to do during a seizure:

- Restrain their movements
- Act in a way that could frighten them, such as making abrupt movements or shouting at them
- Assume they are aware of what's happening
- Give them anything to eat or drink until they are fully recovered
- Attempt to bring them round

! Important information medical attention MUST Be sort if

- You know this is their first seizure
- The seizure continues for more than five minutes or
- They are injured during the seizure or
- You believe they need urgent medical attention

**Contact Senior Leadership Team to attend and inform Parents
Call 22887171 (Ambulance Call Centre) for an ambulance**

Appendix 7: First Aid for (suspected) Fractures (adapted from St Johns Ambulance, UK)

Complete or incomplete break or a crack in a bone due to an excessive amount of force look for

- Swelling
- Unnatural range of movement
- Immobility
- Grating noise or feeling
- Deformity
- Loss of strength
- Shock
- Twisting
- Shortening or bending of a limb

Emergency Treatment

- Support the injured limb
- Immobilize the affected part
- Ice pack treatment given

Look for **shock** (a life threatening condition that occurs when the vital organs, such as the brain and heart, are deprived of oxygen due to a problem affecting the circulatory system).

A fracture may cause other internal injuries. In addition to the treatment above, if the fractured bone ruptures the skin, treat for an object in wound.

Shock Symptoms and Treatment

Signs and Symptoms

- Pale face
- Treat any possible causes of shock
- Help them to lie down
- Raise and support their legs
- Loosen tight clothing
- Keep them warm.
- Cold, clammy skin
- Fast, shallow breathing
- Rapid, weak pulse
- Yawning
- Sighing
- In extreme cases, unconsciousness

Contact Senior Leadership Team to attend and inform Parents

Call 22887171 (Ambulance Call Centre) for an ambulance

Appendix 9: Request for an Ambulance

Request for an Ambulance

Dial **22887171 (Ambulance Call Centre)** ask for an ambulance and be ready with following information.

1. Your telephone number

The Junior School 22664855

The Senior School 22660156

2. Location

Junior School Kyriakou Matsi Avenue, Ayioi Omoloyites, Nicosia , 1687

The Senior School Romanou 2 Latchia, Nicosia 2237

3. Give exact location in the school/setting

4. Give your name

5. Give the casualties name and a brief description of the symptoms

6. Inform of the best entrance and state they the crew will be met

AUTOMATED EXTERNAL DEFIBRILLATOR MAINTENANCE CHECKLIST

The checklist may vary depending on the type of the AED and the manufacturer's instructions

NAME OF THE COMPANY:
 **DATE:**//

DATE OF CHECK					
CONSUMABLES OF AED:					
Adult Defibrillation Pads in sealed package					
Expiry Date					
Paediatric Defibrillation Pads in sealed package					
Expiry Date					
BATTERIES:					
Placement Date					
Replacement Date					
STATUS / SERVICE OF INDICATOR LIGHT:					
Functioning properly (green)					
Not functioning properly (red)					
INSPECTION OF THE DEVICE:					
Clean and Proper storage					
Cracks or other signs of damage					
USEFUL CONSUMABLES:					
Gloves (3-5 pairs)					
Absorbent gauze or hand towel					
Medical Razor					
Scissors					
Pocket mask with one-way valve					
CHECKED BY:					
Name / Signature					

COMMENTS / PROBLEMS / CORRECTIONS:

