

Wellington Search and Rescue Casualty Assessment Form

Date Time found

Family name First name

Date of Birth M / F Next of kin

Address

.....

..... phone

FIRST CHECK - SAFETY; RESPONSE; AIRWAY; BREATHING; CIRCULATION

Chief complaint.....

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Events leading to problem / mechanism of injury

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Time of accident / Onset

Mark injury and draw a line to area on diagram

Past Medical History.....

- Fracture
- Dislocation
- Laceration
- Graze
- Foreign Body
- Pain
- Haemorrhage
- Burns
- Swelling
- Puncture
- Sprain
- Tenderness
- Bruising

Medications.....

Allergies.....

Last ate or drank

Pain Onset

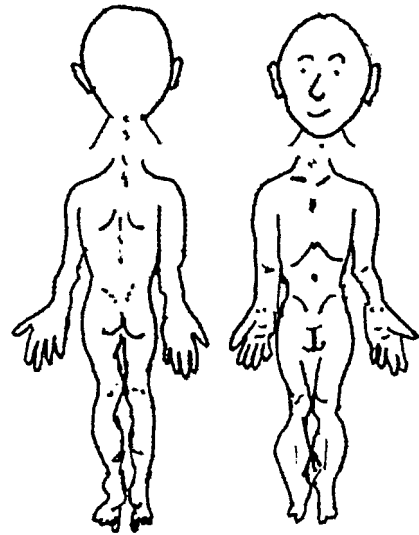
 Provoked by

 Quality.....

 Region / radiation.....

 Severity

 Timing.....



On Examination – see box (add any comments here)

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Vital Signs

	1		2		3		4	
Time taken								
pulse								
breathing (rate / depth)								
skin (colour / temp)								
pupils (react / unreactive) (equal / unequal)	L	R	L	R	L	R	L	R
level of consciousness								
conscious and alert								
conscious and confused								
unconscious – responds to voice								
unconscious – responds to pain								
unconscious – no response								

Tararua Tramping Club Situation Assessment Form

Location of incident

Grid Reference Map Number Series Edition Year.....

Description of location (eg beside small creek) and how you got there (eg descended east spur of Mt Wood, came off on right side)....

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Inform

Club SAR Officers – We need SAR, the situation is serious

Club SAR Officers – We can make it out, but will be delayed

What do you want?

eg a helicopter, a stretcher party, a paramedic, medical advice, first aid items, a radio, ropes, ice-axes, overnight gear, tentage, a primus, food for 2 days, people to be informed of delay. Use your judgement, almost anything is possible if it is necessary.

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What have you got with you to cope with the situation?

eg first aid items, a radio, ropes, ice-axes, overnight gear, tentage, a primus, food for 2 days.

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Members of party

Total number in party..... Leader.....

List names of **all** party members and what they are doing eg staying with patient at accident site, going to a hut, leaving the bush and going home. Record contact numbers or details for all.

Name	Activity	Contact number / details
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

Other

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