MOUNTAINEERING

OUTDOOR FIRST AID

Casualty Report Form

DATE _____

TIME OF INCIDENT _____

FIRST AIDER _____

· CASUALTY DETAILS

Confidential – contains personal information

FULL NAME _____ DATE OF BIRTH / AGE _____ SEX _____

ADDRESS _____ CASUALTY PHONE _____

NEXT OF KIN (NAME & RELATIONSHIP) _____ NEXT OF KIN PHONE _____

· PRIMARY SURVEY – DRcABCDE

Work through in order. Fix problems as you find them.

D	**Danger** Stop and look. Is it safe for you, the group and the casualty? Keep the rest of the group warm and safe. Gloves on!	☐ Scene safe ☐ Moved to safety
R	**Response** Speak loudly & squeeze the shoulders: "Can you hear me? Open your eyes." Shout for help. CALL 999 if unresponsive.	☐ Responsive ☐ Unresponsive
c	**Catastrophic Bleeding** Quick head-to-toe sweep for life-threatening bleeding. Apply firm direct pressure; pack the wound; use a tourniquet on a limb if pressure fails. Note the time applied.	☐ None found ☐ Controlled Tourniquet time _____
A	**Airway** Open the airway with head tilt / chin lift (jaw thrust if spinal injury suspected). Look in the mouth and remove any obvious obstruction, consider rolling on their side to drain any fluid.	☐ Clear ☐ Obstructed – cleared
B	**Breathing** Look, listen and feel for up to 10 seconds. Not breathing normally: call 999, start CPR (30 compressions : 2 breaths), send for an AED. Count the rate and note the effort.	☐ Normal ☐ Not normal / CPR Rate _____ /min
C	**Circulation / CPR** Check for bleeding. Treat for shock: lie down, insulate, keep warm. If trauma is suspected expose to find & treat bleeds. Consider binding feet.	Pulse _____ /min CRT _____ s Skin _____
D	**Disability** Level of response using ACVPU: Alert, new Confusion, responds to Voice, responds to Pain, Unresponsive. Check pupils. Consider low blood sugar. F.A.S.T test.	(A) (C) (V) (P) (U) Pupils _____
E	**Environment & Evacuation** Protect from the environment: insulate from the ground, shelter, extra layers. Then move on to the secondary survey, head-to-toe check for injuries, exposing only what you need (page 2). Evacuate early.	☐ Insulated ☐ Sheltered

· INFORMATION FOR MOUNTAIN RESCUE

Call 999 or 112 · ask for Police, then Mountain Rescue

WHAT3WORDS

/// _____ . _____ . _____

OS GRID REFERENCE (2 letters + 6 or 8 figures)

☐☐ E _____ N _____

DESCRIPTION OF LOCATION (path, features, height, what you can see, visible clothing / tent colour)

_____

_____

HAZARDS PRESENT

☐ Weather / cold ☐ Steep ground / fall risk ☐ Rockfall ☐ Water / river ☐ Darkness ☐ Livestock ☐ Power lines

☐ Other _____

CALLER'S PHONE _____ 2ND PHONE NUMBER _____ NUMBER IN YOUR GROUP _____ TIME OF CALL _____

Poor signal for a call? Use emergency SMS to 999 – your phone must be registered first: text **register** to 999. If texting wait for a reply before assuming help is on the way. Stay on the phone number you gave and keep the battery charged for further contact.

Secondary Survey & Handover

CASUALTY NAME _____

· SAMPLE HISTORY

S	**Signs & Symptoms** – what you see / what they feel
A	**Allergies**
M	**Medications** – carried / taken today
P	**Past medical history**
L	**Last ate / drank / toilet**
E	**Events leading up to incident**

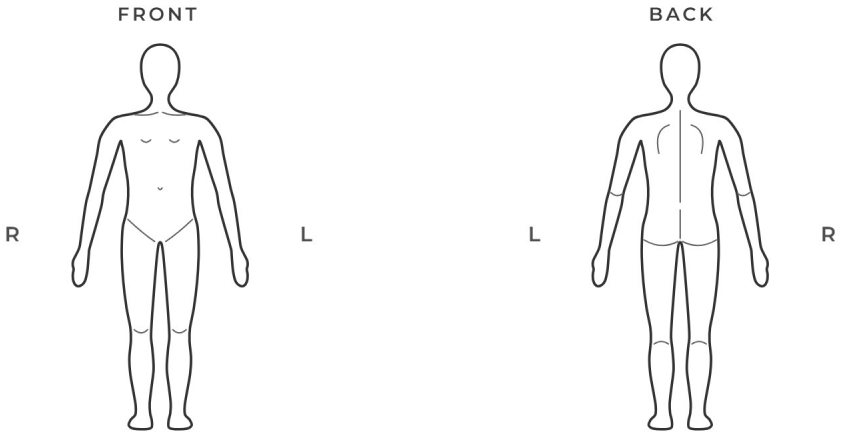
· ATMIST HANDOVER

Pass to MRT / ambulance

A	**Age & sex**
T	**Time of incident**
M	**Mechanism of injury / illness**
I	**Injuries found / suspected**
S	**Signs** – latest observations (see table)
T	**Treatment given**

· INJURY CHART

Mark the location of each injury with its code



KEY

- B Bleeding
- Br Bruising
- Bu Burn
- D Deformity
- P Pain / tenderness
- S Swelling
- W Wound
- N Numbness / tingling
- TQ Tourniquet at _____

· OBSERVATIONS

Repeat every 10–15 minutes, or sooner if things change

Time								
ACVPU								
Breathing rate /min								
Pulse /min								
Radial pulse Y / N								
CRT seconds								
Pain score 0–10								

Adult normal ranges – Breathing 12–20 /min · Pulse 60–100 /min · CRT under 2 s

HANDED OVER TO (MRT / Ambulance / Coast Guard / other) _____

TIME _____

FIRST AIDER SIGNATURE _____