## WORKPLACE FIRST AID PREPAREDNESS CHECKLIST

| NO | CHECKLIST                                     | YES | NO | COMMENTS |
|----|---|-----|----|----------|
| 1. | First aid kits located in designated areas    |     |    |          |
| 2. | Employees know the location of first aid kits |     |    |          |
| 3. | First aid kits are restocked regularly        |     |    |          |
| 4. | Emergency contact numbers are displayed       |     |    |          |
| 5. | First aid kits contain necessary items        |     |    |          |
| 6. | Employees trained in first aid                |     |    |          |



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| 7.  | First aid kits are easily accessible               |  |  |  |
|-----|--|--|--|--|
| 8.  | First aid policy is documented                     |  |  |  |
| 9.  | Emergency procedures are in place                  |  |  |  |
| 10. | Incident report forms are available                |  |  |  |
| 11. | First aid room or area is designated               |  |  |  |
| 12. | Communication system for emergencies is functional |  |  |  |
| 13. | Regular first aid drills conducted                 |  |  |  |



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| 14. | First aid signage is visible and clear      |  |  |
|-----|---|--|--|
| 15. | Compliance with local first aid regulations |  |  |

## **Further Comments & Action**



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