

First Aid Kit Inspection Form

First Aid Kit No.: _____ Month: _____ Department: _____ Location: _____.

Sr. No.	Material Name	Quantity	Date of Inspection			Remarks
			U	R	S	
1	Small Size Sterilized Dressings	24				
2	Medium Size Sterilized Dressings	12				
3	Large Size Sterilized Dressings	12				
4	Large Size Burn Dressings	12				
5	Cotton Wool 10 gm	12				
6	Cetrimide solution (1%) on a suitable antiseptic solution (200 ml)	01				
7	Mercurochrome (2%) in water (200 ml)	01				
8	Sal-volatile having the dose and mode of administration indicated on label (120 ml)	01				
9	Scissor	01				
10	Adhesive plaster (6 cms x 1 meter)	01				
11	Adhesive plaster (2 cms x 1 meter)	01				
12	Sterilized eye pads (in sealed packets)	12				
13	Polythene wash bottle (500 c.c.) for washing eyes	01				
14	Roller bandages 10 cms. wide	12				
15	Roller bandages 5 cms. wide	12				
16	Triangular bandages	06				
17	Safety pins Packet	02				
18	Kidney tray	01				
19	Snake-bite lancet	01				
20	Potassium Permanganate crystals (30 ml)	01				
21	First Aid Leaflet issued by DGFASLI	01				
	Name of person with signature and date who inspected first aid kit	-----				

*U=Used, R=Refilled, S=Stock

Important Note :

1. Content Applicable on factories employing more than 50 employee rules prescribed under sub sec(1) of sec 45 of GFR,1963, please refer factories act and state rules for more details. This is just for your information.
2. It is advisable that first aid kit can not contain medicines, it is recommended not to give medication without prescription of doctor and victim consent.
3. It is recommended to maintain sterility of all content by changing first aid kit content as and when required.
4. Make List of first aider, Emergency team details and First Aid Register/Logbook to be available at required location.

Contact EHS Or OHC for refilling or replace missing item of first aid kit.