

FIRST AID KIT:

Note: It is not possible to prescribe the contents of a first aid kit to cover all activities / events for all venues and conditions. The checklist below describes the most likely items needed for most situations. Kits must be regularly maintained

	Checked (✓)
Emergency services contacts are available	<input type="checkbox"/>
Container suitability protects the contents and is visibly recognizable	<input type="checkbox"/>
Duty First Aider(s) contacts are available	<input type="checkbox"/>
Kit(s) are situated close to likely use areas	<input type="checkbox"/>
Officials / staff are aware of kit locations	<input type="checkbox"/>
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Adhesive tape	<input type="checkbox"/>
Adhesive strips and patches (sterile band-aids)	<input type="checkbox"/>
Basic First Aid notes	<input type="checkbox"/>
Bio disposal bags	<input type="checkbox"/>
Disposable gloves	<input type="checkbox"/>
Eye pads (sterile)	<input type="checkbox"/>
Rubber thread (elastic) or crepe bandages	<input type="checkbox"/>
Safety pins	<input type="checkbox"/>
Scissors	<input type="checkbox"/>
Sterile covering for serious wounds	<input type="checkbox"/>
Sterile; small, medium and large wound dressings	<input type="checkbox"/>
Triangular bandages	<input type="checkbox"/>

HORSE FIRST AID KIT

Rolls of bandaging tape	<input type="checkbox"/>
Rolls of adhesive bandage	<input type="checkbox"/>
Roll of cotton wool (30 cm x 375 g)	<input type="checkbox"/>
Roll of cotton gauze or crepe bandage (7.5 cm wide)	<input type="checkbox"/>
Disposable nappies or sanitary napkins to act as pressure pads to stop bleeding	<input type="checkbox"/>
Bottle of a wound-cleaning agent such as povidone iodine	<input type="checkbox"/>
Bottle of wound antiseptic	<input type="checkbox"/>
Jar of petroleum jelly	<input type="checkbox"/>
Digital thermometer	<input type="checkbox"/>
60mL syringe or an old, but clean worming syringe for flushing wounds	<input type="checkbox"/>
Container of a soothing, cooling liniment	<input type="checkbox"/>
Container of a soothing, antiseptic cream	<input type="checkbox"/>
Small pack of salt for making salt solutions to cleanse wounds	<input type="checkbox"/>
Pack of gauze swabs	<input type="checkbox"/>
Pair of curved, blunt ended scissors	<input type="checkbox"/>
Torch	<input type="checkbox"/>
Pair of tweezers	<input type="checkbox"/>

AED Defibrillator maintenance (where applicable)

Accessible Location – accessible and visible location and that has clear signage.	<input type="checkbox"/>
Maintenance – The AED defibrillator in proper working order. (It should also be replaced every 8 years or as per manufacturer’s recommendations.)	<input type="checkbox"/>

ALL CHECKS COMPLETED

_____	_____	_____
Name (please print)	Signature	Date

