

EMERGENCY DRILL RECORD

MEDICAL

Vessel name:

Date:

Location:

MEDICAL EMERGENCY:

Perform first aid as necessary, make preparations for MEDIVAC if required

CREW MEMBERS:

DRILL CHECKLIST:

- | | |
|-------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Alarm sounded | <input type="checkbox"/> Monitor A, B, C's |
| <input type="checkbox"/> Casualty located | <input type="checkbox"/> Keep casualty warm |
| <input type="checkbox"/> Move casualty to safe area | <input type="checkbox"/> Be prepared to do CPR |
| <input type="checkbox"/> Urgency call on radio/transmitter (R/T) or VHF Radio | <input type="checkbox"/> DISTRESS call if required |
| <input type="checkbox"/> First aid kit to scene | <input type="checkbox"/> Prepare for helicopter evac |
| <input type="checkbox"/> Reassure the casualty | <input type="checkbox"/> Reasonable response time? |
| <input type="checkbox"/> Treat casualty for shock | <input type="checkbox"/> Stow all equipment in its original place when drill is complete |

Hatch cover meeting/observations/bottlenecks/deficiencies/problems/discuss the drill – what worked – what didn't:

Corrective measures:

Captain/Operator:

