

## Casualty Monitoring Card

Letter	Information	Questions to ask	Casualty response
<b>S</b>	Signs	How are you feeling?	
	Symptoms	Can I look at the injury?	
<b>A</b>	Allergies	Are you allergic to anything or any medication	
<b>M</b>	Medication	Have you recently taken any medication?	
<b>P</b>	Past history	When did you last visit the doctor or hospital?	
<b>L</b>	Last fluids / meal	When did you last have a drink?	
		What have you eaten recently?	
<b>E</b>	Events	What happened?	

**Other Comments:**

Time (24-hour clock)					
<b>Pulse</b>	Rate (per min)				
	Character				
	Location				
<b>Breathing</b>	Rate (per min)				
	Character				
<b>Temperature</b>	Warm/dry				
	Hot/wet				
	Hot/dry				
	Cold/wet				
	Cold/dry				
<b>Colour</b>					
<b>Response / Consciousness</b>	Alert				
	Voice				
	Pressure				
	Unresponsive				

**PULSE CHARACTER** can be described as: - Strong (S), Weak (W), Bounding (B), Regular (R), Irregular (I).

**BREATHING CHARACTER** can be described as: - Deep (D), Shallow (S), Wheezy (W), Bubbly (B), Noisy (N).

## Casualty Monitoring Card

Date	Time	Location – Grid reference including letter prefix	
Casualty name		Casualty address and post code	
Casualty telephone			
Casualty age / Date of birth			
ICE name (In Case of Emergency)		ICE number	
History of incident			
Details of treatment given			
Name of first aider		Tel of first aider	

Indicate injury site on diagrams and add any comments

