First Aid - Record of Treatment Log



To be	completed by the First Aider	providing the treatment, or th	e person requiring first a	id treatme	ent	To be completed Person responsibl of the firs	e for the contents
Date of Treatment	Employee Number of Injured Person	Type of Injury	What item was used from the first aid box	Acciden compl	t Report leted? NO	First Aid Box checked by	Date of Check

Note: This record must be retained within the first aid box to record any first aid treatment provided within the department. When the record sheet is complete, it should be securely filed for inspection by any manager or the Corporate Health and Safety Team during inspection/audits. Records should be kept for a minimum of 3 years.

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