

TRAUMA FIRST AID KIT - QUICK REFERENCE CARD



WARNING & LIABILITY WAIVER: THIS CARD IS AN AIDE-MEMOIRE FOR TRAINED INDIVIDUALS ONLY. IT IS NOT A SUBSTITUTE FOR ACCREDITED MEDICAL TRAINING. UNQUALIFIED USE MAY CAUSE SEVERE INJURY OR DEATH. STRICT ADHERENCE TO YOUR TRAINED PROTOCOLS IS REQUIRED. BY USING THIS KIT, YOU ACCEPT ALL LIABILITY FOR OUTCOMES AND WAIVE ALL CLAIMS AGAINST THE MANUFACTURER AND DISTRIBUTOR. CONTACT EMERGENCY SERVICES IMMEDIATELY (112/911).

1. MASSIVE HEMORRHAGE (M)

1. Assess immediately for life-threatening, pulsating, or massive bleeding.
2. Apply direct pressure to the source of the bleeding as the first immediate action.
3. Apply a Tourniquet to limbs (High & Tight over clothing, or 2-3 inches/5-8 cm above the wound on bare skin) and always record the time of application. (TQ Time Applied: _____)
4. Apply Wound Packing using hemostatic gauze for junctional bleeds (groin, armpits, neck), maintaining continuous direct pressure for at least 3 minutes, followed by a pressure bandage.

2. AIRWAY (A)

1. Assess if the airway is patent (Can the casualty speak? Are there snoring or gurgling sounds?).
2. Open the airway in an unconscious casualty using a Chin-lift or, if spinal injury is suspected, a Jaw-thrust maneuver.
3. Clear visible obstructions from the mouth and airway (e.g., blood, vomit, debris).
4. Insert an airway adjunct, such as a Nasopharyngeal Airway (NPA), in an unconscious casualty who tolerates it.

3. RESPIRATION (R)

1. Expose the chest and assess the respiratory rate and symmetry of chest wall movement.
2. Inspect the entire torso (front, armpits, and back) for open, penetrating wounds.
3. Apply a Chest Seal (preferably a vented seal) to open chest wounds upon the casualty's exhalation.
4. Monitor continuously for signs of a tension pneumothorax (increasing respiratory distress, distended neck veins) and 'burp' (vent) the chest seal if necessary.

4. CIRCULATION (C)

1. Check the radial pulse (at the wrist); absence of a radial pulse may indicate severe shock or significant blood pressure loss.
2. Re-assess all previously applied tourniquets and pressure bandages (Are they still tight? Is there any bleed-through?).

5. HYPOTHERMIA & HEAD INJURY (H)

1. Prevent heat loss and monitor mental status by removing wet clothing, insulating the casualty from the cold ground, wrapping them in a thermal survival blanket, and tracking their neurological status using the AVPU scale (Alert, Verbal, Pain, Unresponsive).

KIT MAINTENANCE & EXPIRY CHECK

ITEM	EXPIRY	CHECKED BY	NOTES



SCAN FOR KIT
RESTOCK &
MANUALS



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1. LOCATION & DISPATCH

GPS / COORDS: _____

WHAT3WORDS: /// _____ . _____ . _____

EMERGENCY: 112 (EU) / 911 (US)

(MOUNTAIN) RESCUE: _____

MARITIME RADIO: VHF Channel 16

OTHER EMERGENCY NO: _____

2. PATIENT HANDOVER (A.T.M.I.S.T. Report)

☐ Age / Sex: ____ / ____

☐ Time of Incident: _____

☐ Mechanism (How?): _____

☐ Injuries Found: _____

☐ Signs (Vitals): Pulse () | Breathing ()

P () | B () | AVPU: A () V () P () U ()

☐ Treatments Given (TQ, Chest Seal, etc.): _____

3. UNIVERSAL DISTRESS SIGNALS

SOS MORSE (Light/Sound): 3 Short, 3 Long, 3 Short (. . . - - - . . .)

ALPINE DISTRESS: 6 Signals per minute (1 every 10 sec), followed by 1 minute pause. Repeat.

4. HELICOPTER LANDING SITE (LS)

LS SETUP RULES

- Clear 30×30m (100×100ft) flat area.
- Secure all loose gear/clothing.
- Indicate wind direction to pilot (stand with back to wind).
- NEVER approach from rear. Wait for crew signal.

Alert crew to clear zone or danger



SIGNAL: 'Y' - YES:
HELP / LAND HERE
(Both arms raised in
a 'V' shape)



SIGNAL: 'N' - NO:
NO HELP NEEDED /
DO NOT LAND (One
arm raised, one arm
down)

TRAUMA FIRST AID KIT

MARCH PROTOCOL AIDE-MÉMOIRE



FORTURUS