

# First Aid Record

To be completed for every injury or exposure to contaminants that required treatment, even if it is not reportable to WorkSafeBC. All first aid records must be kept at the workplace for at least three years.

## Workplace information

Clinic name:

Clinic address:

## Worker and incident information

Injured worker:  
(name, position)

Date of incident\*:

Time of incident\*:

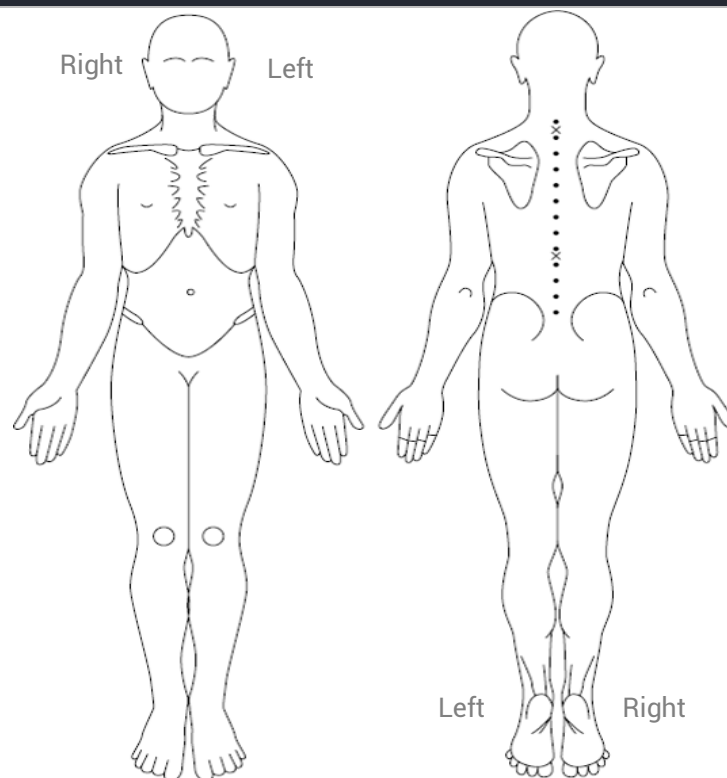
\* Date and time the worker **reported** the injury, exposure, disease, or illness to the employer, manager, or first aid attendant.

## Witness information (if available)

1.

2.

## Mark injured or exposed areas:



**Description of how the injury, exposure, or illness occurred:**

What happened?

**Description of the nature of injury, exposure, or illness:**

What did you see? (i.e., signs and symptoms)

**Description of the treatment given:**

What did you do?

**Arrangement(s) made relating to the worker**

e.g., return to work/medical treatment/ambulance/follow-up.

**First aid attendant (or employer representative)**

Name, position:

Signature:

Date:

**Injured worker**

Signature:

Date: