

First Aid Log

For a council/district activity or event including day camps.
(Resident camps must use No. 33681.)

Council name/number: _____ District: _____

Activity/event: _____

Location: _____

Duration: _____ to _____
Date Time Date Time

Health officers/first-aid providers:

Name: _____ Scouting position: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ E-mail: _____

Name: _____ Scouting position: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ E-mail: _____



BOY SCOUTS OF AMERICA®

EMERGENCY TELEPHONE NUMBERS

Fire: _____

Police or Sheriff: _____

Hospital: _____

Rescue Squad/Ambulance: _____

Medical Practitioner(s): _____

Scout Executive: _____

Office: _____ Home: _____

Cell: _____ E-mail: _____

HOW TO USE THE FIRST AID LOG

- Print the time of day, name of each person seen, a brief summary of injury or complaint of illness, and pertinent comments. Information should include the nature of the activity engaged in at the time of the injury or illness and the specific location, such as swimming pool, troop campsite, or dining hall. Each treatment or disposition must be described and signed by the person rendering aid. Use as many lines as needed for each entry.
- If a complete page of the First Aid Log is not used on any one day, draw a line through the entire next space across both pages and enter the next day's date on the next line. This eliminates the possibility of false entries at a later date.
- The SOAP formula is recommended for recording in this log.
 - S—Subjective: what you are *told*
 - O—Objective: what you *see and measure*
 - A—Assessment: working diagnosis, what you *think* is the problem
 - P—Plan: what you *did to treat* the problem
- **IMPORTANT.** This record should be kept on file in the council service center, following council retention policies.