

FIRST-AID MATERIALS APPROVAL FORM

(Company Name)

This Company engages in: _____
(Type of Operation)

Consistent with the types of injuries that our employees might incur, we have assembled these materials in our first-aid kits:

Quantity	Product Description	Quantity	Product Description
1	40" Triangular Bandage	10	3" x 3" Sterile Gauze Pads
1	Spool ½" x 5 Yds. Waterproof Tape	10	Large Knuckle Bandages
1	3" x 5 Yds. Stretch Gauze Bandage	10	Large Fingertip Bandages
1	Bloodstopper Compression Bandage	10	Alcohol Wipes
1	2" x 5 Yds. Co-wrap Bandage	10	Tincture Green Soap Wipes
1	5" x 10" Instant Ice Pack	16	1" x 3" Bandages
1	5½" Bandage Scissors	1	8" x 8" x 5" Cordura Bag
1	Box Latex Gloves (100)	1	Poison Control Telephone Number Sticker (800-346-5922)
2	5" x 9" Lamino Trauma Pads		

To keep them sanitary, first-aid materials are stored in sealed containers.

First-aid kits are kept in buildings and company vehicles to allow immediate access by employees to them.

First-aid kits are inspected monthly so their contents may be replenished as necessary.

Approval by Physician of First-Aid Materials

I have reviewed the above list of materials in the company's first-aid kits and approve them as appropriate for the first-aid needs of its employees.

Physician's Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Physician's Signature _____ Date _____