

Backcountry Injury Report

A written message will enable rescuers and/or medical personnel to respond appropriately with proper equipment, supplies, and transportation.

Victim Information:

Full Name: _____
Address: _____
Phone Number: _____
Age: _____ Sex: _____
Height: _____ Weight: _____

Incident Information:

Date & Time of injury: _____
Exact Location: (mark on a map and describe how to reach victim)

Pulse: _____
Body Temperature: _____
Breathing Rate: _____
Victim is: Conscious Unconscious
Victim is: Hot Cold
Breathing: Quickly Slowly
Breathing: Shallowly Deeply
Skin is: Normal Pale Flushed Sweating Clammy
Symptoms: (details of injury or illness, victim's complaints, severity)

Treatment Given: (describe what has been done for the victim)

Other Information: (anything else that might be helpful)

