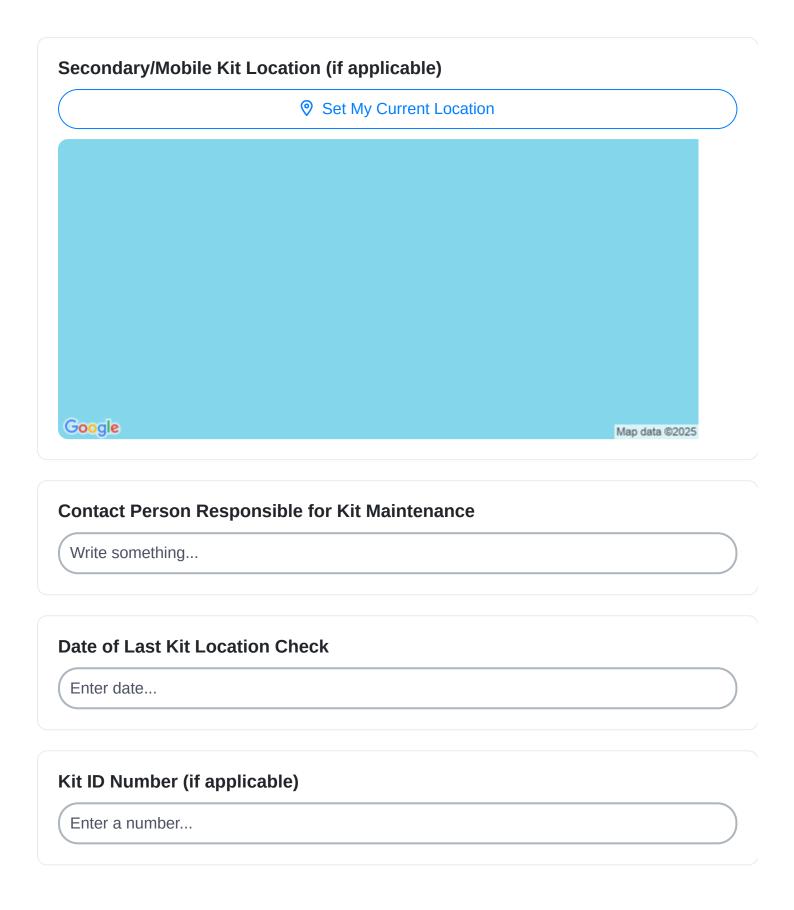


First Aid Kit Inventory and Restock Checklist

Kit Identification & Location

Ensures the kit is easily identifiable and its location is known to all personnel.

Write something		
Primary Kit Locat	ion	
	Set My Current Location	
Google		Map data ©2025



Inventory - General Supplies

Checking and restocking common first aid supplies.

Bandages - Adhesive (assorted sizes) Enter a number	
Effici a fluffiber	
Gauze Pads (various sizes)	
Enter a number	
Medical Tape	
Enter a number	
Antiseptic Wipes	
Enter a number	
Sterile Gloves (non-latex)	
Enter a number	
Triangular Bandages	
Enter a number	
Safaty Dine	
Safety Pins	
Enter a number	

Scissors (small, sharp)	
Enter a number	
Inventory - Agricultural Hazard Specifics	
Focuses on supplies needed for injuries common in agricultural environments chemical exposure, animal bites).	(e.g.,
Quantity of Chemical Burn Gel	
Enter a number	
Quantity of Eye Wash Solution (Flush Bottles)	
Enter a number	
Type of Eye Protection (Safety Goggles, Face Shield)	
Safety Goggles	
Face Shield Both	
Potential Animal Bite Considerations (Select all that apply)	
Antibacterial Wipes	
Gloves (Heavy-Duty)	
☐ Tetanus Booster Information	
Pressure Bandage	

Write something	
Notes on Bosont Evnoure Incidents (if any)	
Notes on Recent Exposure Incidents (if any)	
Write something	
Availability of Antivenom (if applicable)	
Available	
Not Applicable Unknown	
CDS (Sofaty Data Shoot) for Common Chamicala (O	intional)
SDS (Safety Data Sheet) for Common Chemicals (O	puonai)
4 Upload File	
xpiration Date Checks	
•	plies.
kpiration Date Checks ifies expiration dates of all medications and sterile sup	plies.
•	plies.
ifies expiration dates of all medications and sterile sup	plies.
ifies expiration dates of all medications and sterile sup Check Expiration Dates on Bandages & Gauze	plies.
ifies expiration dates of all medications and sterile sup Check Expiration Dates on Bandages & Gauze	

Check Expiration Date	s on Pain Relievers (if applicable)	
Enter date		
Check Expiration Date	s on Burn Cream/Gel	
Enter date		
Number of Expired Iter	ns Found (Total)	
Enter a number		
	s needing replacement (reason for replacement)	
	s needing replacement (reason for replacement)	

Identifying items needing replacement and initiating the reordering process.

Quantity of Bandages Needed (estimate)

Enter a number...

Quantity of Antiseptic Wipes Needed	
Enter a number	
Quantity of Pain Relievers Needed (e.g., Ibuprofen)	
Enter a number	
Quantity of Burn Cream Needed	
Enter a number	
Supplier for Restock?	
Existing Supplier A	
Existing Supplier B	
New Supplier Research Required	
Notes on Potential Supplier Changes	
Write something	
).
Date of Next Restock Order	
Enter date	
Order Number (if applicable)	
Write something	

Write something	
ocumentation & cords of inventory checks a	Training nd ensures personnel are trained in first aid and kit use.
Date of Last Inventory Che	eck
Enter date	
Date of Next Scheduled In Enter date	ventory Check
Notes on Inventory Status	dissues
Write something	
Number of Personnel Train	ned in First Aid
Enter a number	
Date of Last First Aid Train	ning

Type of First Aid Training Provided Basic First Aid CPR/AED Chemical Exposure Response Animal Bite Response
Summary of Training Content/Updates Write something
Signature of Person Completing Inventory & Training Verification