Medical Emergency Plan

If a medical emergency occurs, every second counts!

Call Triple Zero (000) immediately and ask for an AMBULANCE

You will be asked a series of questions by the Ambulance call taker, which will assist to provide the most appropriate response to your emergency.



3

Complete the following details which will assist in an emergency.

ORGANISATION DETAILS

Organisation Name:

Address:

Phone:

• EMERGENCY ACCESS DETAILS

Nearest cross street:

Emergency vehicle access point:

• EMERGENCY CONTACT PERSONS

Medical emergency person in charge

Name: Phone:

First Aid Officer/Responders

Name: Phone: Phone: Name: Phone: Phone:

EMERGENCY FIRST AID EQUIPMENT

AED (Automated External Defibrillator) location/s:

First aid kit location/s:

Document date:



