FIRST AID MANAGEMENT GUIDE FOR HSE PROFESSIONALS

A Practical Reference for Establishing, Implementing, and Sustaining Effective Workplace First Aid Systems

HSE EXCHANGE

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Each organisation remains responsible for:

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- Ensuring that first aiders are adequately trained and certified.
- Maintaining full compliance with national legislation and internal HSE policies.

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1.INTRODUCTION

Purpose of this Guide

This guide provides HSE professionals with a **step-by-step framework** for developing and managing a workplace first aid system that aligns with Nigerian legislation and international best practice.
It translates regulatory and technical requirements into *practical, field-ready actions* for planning, implementation, supervision, and continual improvement.

The goal is to help HSE professionals:

- Design a fit-for-purpose first aid program suited to their organisation's risk profile.
- Implement robust inspection, documentation, and monitoring systems.
- Train and coordinate first aiders effectively.
- Evaluate readiness using performance indicators and audits.

Why First Aid Readiness Matters

In all workplaces, from depots and construction sites to corporate offices, medical help is often minutes away. Those minutes can decide whether an injured worker lives or dies, recovers or becomes permanently disabled.

As an HSE professional, **your responsibility is to close that gap** by ensuring every site under your supervision can deliver immediate care before emergency medical services arrive.

Legal and Organisational Context

This comprehensive guide aligns with Nigerian statutory requirements and international best practices to ensure a safe and healthy workplace. It references key Nigerian regulations such as the Factories Act (CAP F1 LFN 2004), which mandates the provision of first aid boxes and the placement of trained first aid personnel in workplaces.

Additionally, it adheres to the NMDPRA Health, Safety, and Environment (HSE) Guidelines, tailored explicitly for oil and gas operations, ensuring compliance with industry-specific safety standards.

The guide also incorporates the Lagos State Safety Commission (LSSC) Occupational Safety and Health Standards, addressing occupational safety within workplaces in Lagos State.

Beyond national laws, the guide emphasises principles aligned with international standards, including emergency preparedness and response procedures, as guided by ISO 45001:2018. It advocates for risk-based planning, thorough documentation, and a commitment to continuous improvement in workplace safety management systems, fostering a safer and healthier working environment.

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2. HSE PROFESSIONAL'S ROLE AND OBJECTIVES

As an HSE professional, your responsibilities extend beyond merely stocking first aid boxes. You are tasked with designing a comprehensive system that guarantees preparedness, accountability, and compliance.

Your Core Objectives:

1. **Assess:** Evaluate the site's risk exposure and determine first aid requirements.
2. **Plan:** Develop a comprehensive first aid implementation plan.
3. **Implement:** Procure kits, train first aiders, establish first aid posts, and communicate arrangements.
4. **Monitor:** Conduct inspections, drills, and audits.
5. **Review:** Analyse incident trends, measure performance, and improve the system continuously.

3.FIRST AID SYSTEM PLANNING

Conducting a First Aid Needs Assessment

Your initial task is to carry out a structured needs assessment. This identifies the type, size, and amount of first aid resources necessary.

You should consider the following assessment factors:

- Nature and complexity of operations (e.g., chemical handling, lifting, hot works).
- Number of workers and shift patterns.
- Workforce distribution (single site, multiple sites, or remote work).
- Historical data on incidents, injuries, and near misses.
- Availability and distance of external medical services.
- Special considerations — pregnant workers, contractors, visitors, lone or night workers.

Your deliverable is a comprehensive and well-structured First Aid Needs Assessment Report that thoroughly identifies and details the following key elements:

- The required number of first aid kits, along with their specific types, to cater to various potential emergencies.
- Appropriate locations for the installation of these kits to ensure quick and easy access in different areas.
- The necessary number of trained first aiders required per shift to provide adequate coverage and response capability.
- Any additional or special provisions that may be necessary, such as critical injury packs, eye wash stations, emergency showers, and other specialised first aid equipment.

This report aims to provide clear guidance for implementing an effective first aid response plan tailored to the specific needs of the environment or organisation.

Professional Tip: *For petroleum or construction environments, base your evaluation on the worst credible injury scenario (e.g., severe burns, crush injuries, amputations). Your preparedness must match that level of severity.*

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Categorising Workplace Risk Levels

Category	Description	Examples
Low Risk	Primarily administrative, minimal physical hazards.	Offices, banks, schools, retail shops.
Medium Risk	Moderate potential for injury from manual or machine operations.	Warehouses, factories, assembly areas, light engineering.
High Risk	High potential for serious injuries (burns, crush, amputation, explosion).	Fuel depots, refineries, construction, heavy manufacturing.

Once you categorise the risk, use it to determine kit sizes and staffing ratios (see Section 4).

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4. EQUIPMENT AND PERSONNEL REQUIREMENTS

Kit Sizing and Distribution

Each work area should be equipped with kits tailored to the size of its workforce and the level of hazards present in that area. These kits should be carefully selected and organised to ensure they meet the specific needs of the staff and adequately address potential risks. Use the following guidelines as a planning benchmark to help you select and organise these kits effectively.

Risk Level	Workforce Size	Minimum Kit Requirement
Low risk	Up to 25	1 small kit
Low risk	25–100	1 medium kit
Low risk	Over 100	1 large kit per 100 persons
High risk	Up to 5	1 small kit
High risk	5–25	1 medium kit
High risk	Over 25	1 large kit per 25 persons

Always position kits within **30 meters** of work areas, ensuring they are clearly visible and accessible during emergencies.

Standard Kit Composition

Each kit must contain **sterile, individually packaged medical items** for handling minor injuries and providing temporary stabilisation. While contents may be adjusted for local conditions, the following are core essentials for every workplace:

- Adhesive plasters (assorted sizes)
- Sterile wound dressings (medium and large)
- Triangular bandages
- Eye pads and saline eye wash
- Adhesive tape rolls
- Cleansing wipes (alcohol-free)
- Disposable nitrile gloves (pairs)
- Safety pins, scissors, tweezers
- Burns dressing and gel

- Foil blanket
- CPR face shield with one-way valve
- First aid guidance leaflet

Critical Injury Packs (for high-risk areas) should include:

- Trauma dressings (large and medium).
- Haemostatic gauze or bandage for rapid bleeding control.
- Tourniquet with mechanical locking device.

Item	Small	Medium	Large
Sterile Dressings (medium/large)	2 / 2	4 / 3	6 / 4
Triangular Bandages	2	3	4
Eye Pads	2	3	4
Adhesive Plasters	40	60	100
Cleansing Wipes (alcohol-free)	20	30	40
Adhesive Tape Roll	1	2	3
Nitrile Gloves (pairs)	6	9	12
Finger Dressings	2	3	4
Burns Dressings	1	2	2
Foil Blanket	1	2	3
Shears & Resuscitation Shield	1 each	1 each	2 each
Conforming Bandage	1	2	2

⚠️ *All components must be sterile, individually wrapped, and stored in a clean, dust-proof container marked with a **white cross + "FIRST AID"**, conforming to BS EN ISO 7010*

***Additional Tip:** For remote or field operations, include additional bottled water, a torch, and emergency contact cards.*

Additional Facilities

For medium to large industrial sites, comprehensive first aid and emergency response preparations are crucial to ensure the safety of workers and comply with safety regulations.

The site should be equipped with a well-stocked **First Aid Room** that contains essential medical supplies such as a stretcher for transporting injured persons, a comfortable couch or seating area, a sink with running water for washing wounds and hands, a dedicated first aid bed for treatment, and a refrigerator to store medications that require cool temperatures to remain effective.

Additionally, **Eye Wash Stations** should be installed at all points where chemical handling occurs. These stations are vital for immediate rinsing of the eyes in the event of chemical splashes or exposure, helping to prevent serious injuries.

Emergency Showers are essential in areas where operations involve hazardous substances, such as acids, fuels, or corrosives. These showers enable rapid decontamination by flushing chemical contaminants from the body, thereby minimising injury severity.

Lastly, **Emergency Transport** arrangements, such as a dedicated vehicle or partnerships with local ambulance providers, should be in place. Quick and reliable transportation is crucial for providing injured workers with prompt medical attention, especially in remote or large-scale site layouts where standard emergency services may take longer to reach.

First Aider Staffing

The recommended ratios for first aid responders vary depending on the level of risk present in the environment:

- In low-risk settings, it is advisable to have at least one trained first aider for every 25 employees to ensure prompt assistance in case of an emergency.
- In high-risk situations, the required ratio increases to one trained first aider for every 10 employees or per shift, depending on the specific operational demands.
- Additionally, it is crucial to guarantee the presence of at least one trained first aider at each site and during every shift, to maintain continuous emergency response capability.

Every first aider should:

- Hold a valid certification from a recognised institution (e.g., Nigerian Red Cross).
- Attend refresher training every 24 months.
- Be equipped with identification (badge or vest) for easy recognition.

Maintain a First Aider Register that includes the name, location, training date, and certificate expiry date.

The training level required for each category of personnel is indicated below.

Training Type	Content	Recommended For
Basic First Aid (BFA)	Bleeding control, burns, shock, choking, CPR.	All staff (entry level).
Advanced First Aid (AFA)	Fracture management, spinal injury care, chemical burns.	Supervisors and field leads.
Emergency Medical Response (EMR)	Advanced trauma care, evacuation, and emergency coordination.	HSE professionals and site medics.

5.IMPLEMENTATION STRATEGY

Phase 1 – Planning

To effectively promote safety and preparedness within your organisation, it's essential to develop a comprehensive First Aid Implementation Plan that aligns with your organisation's Health, Safety, and Environment (HSE) objectives. This plan should clearly define the goals and standards for first aid response, ensuring they support your overall safety policy.

Securing management approval is a critical step. Present the plan to leadership to obtain their endorsement, demonstrating the importance of being prepared for first aid. Additionally, allocate a dedicated budget to ensure the availability of necessary resources such as first aid kits, appropriate signage to guide and inform employees, and training programs to equip staff with vital first aid skills.

Finally, determine and define the coverage zones within your facility or site. These zones could include areas such as office spaces, maintenance sections, and tank farms. By clearly delineating these zones, you ensure that first aid provisions are strategically placed and accessible, providing rapid assistance wherever it is needed most.

Phase 2 – Execution

- Procure necessary equipment and install first aid kits throughout the facility to ensure quick access during emergencies.
- Conduct comprehensive induction sessions for all employees to familiarise them with first aid arrangements, procedures, and locations of emergency kits.
- Publicise emergency contact numbers prominently within the workplace and clearly display the locations of all first aid kits to ensure accessibility.
- Additionally, train selected staff members in first aid skills and issue them identification badges to easily identify them as first aid responders in case of an emergency.

Phase 3 – Communication

To ensure quick and practical assistance in the event of an emergency, it is essential to place clear and visible first aid signs and directional arrows throughout the site.

These signs should be strategically located in areas that are easily seen by all personnel, guiding them promptly to first aid stations or supplies when needed.

In addition to physical signage, it is vital to raise awareness about first aid among all workers. This can be achieved by incorporating first aid topics into toolbox talks, safety inductions, and regular safety meetings. Doing so helps to reinforce the importance of first aid, educates staff on how to respond to injuries, and ensures everyone knows the location of first aid supplies.

Furthermore, the site's Emergency Response Plan (ERP) should comprehensively include procedures for responding to medical emergencies. This involves detailing the steps workers should follow in the event of an emergency, providing contact information for emergency services, and specifying the location of first aid kits. Including these procedures in the ERP ensures a coordinated, quick, and effective response, ultimately helping to minimise health risks and improve safety outcomes.

Phase 4 – Maintenance

- Conduct monthly inspections and record results using a standardised checklist.
- Replace expired or used items immediately.
- Check container integrity, labelling, and accessibility.
- Ensure all kits are sealed and tamper-evident after inspection.

Phase 5 – Continuous Improvement

- Review incident data every quarter to identify any emerging trends, patterns, or recurring issues that may need addressing.
- Investigate any delays, incorrect responses, or equipment failures thoroughly to determine root causes and implement corrective actions.
- Conduct comprehensive mock drills every six months that simulate realistic scenarios such as chemical burns, falls, or electrocution, to ensure preparedness and proper response protocols.
- Regularly update your First Aid Needs Assessment whenever there are new processes, personnel changes, or newly identified risks to maintain an accurate and effective response plan.

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6. DOCUMENTATION AND RECORD CONTROL

As an HSE professional, documentation is your evidence of compliance and due diligence. You should maintain controlled copies of:

1. First Aid Policy Statement
2. Needs Assessment Report
3. Kit Inspection Checklists and Registers
4. First Aid Logbook / Treatment Register
5. Training and Competence Records
6. Emergency Contact Directory
7. Incident Investigation Reports and Corrective Actions

All records should be retained for a minimum of five years and stored both physically and electronically.

7.MONITORING AND AUDITING

Monitoring ensures that your first aid system remains functional and responsive. The following are key aspects you should monitor.

Key Performance Indicators (KPIs)

The following KPIs are key to your effectiveness:

- 100% of work areas equipped with complete kits.
- 100% of trained first aiders available during operations.
- Average response time < 3 minutes during drills.
- 0% expired or missing first aid materials.
- Reduction in minor injury escalation incidents.

Audit Activities

You should also include first aid in your routine HSE inspections and internal audits. The following are some of the activities you can incorporate:

- Random kit inspections during walkthroughs.
- Verification of first aider certificates.
- Review of logbooks for completeness and trend analysis.
- Interviews with employees to assess awareness.

Evaluation and Reporting

Lastly, prepare and submit a quarterly **First Aid Readiness Report** summarising:

- Number of treatments administered.
- Nature of injuries.
- Items used and replenished.
- Training and refresher status.
- Observations and recommendations.

This report should be shared with Top Management as part of the review of the workplace safety management system.

8. BEST PRACTICES AND FIELD INSIGHTS

1. **Localisation:** Customise first aid signage and communication materials using local dialects where appropriate.
2. **Gender Sensitivity:** Maintain gender balance among first aiders for privacy in treatment situations.
3. **Contractor Compliance:** Include first aid requirements in contractor onboarding and audits.
4. **Environmental Adaptation:** In humid regions, store sterile supplies in airtight boxes.
5. **Community Preparedness:** Where facilities are close to residential areas, consider extending first aid support to the local community during emergencies.
6. **Link with Clinics:** Establish a Memorandum of Understanding (MoU) with nearby hospitals for emergency care.
7. **Aftercare:** Follow up on all treated cases and maintain return-to-work documentation.

Case Example: At a manufacturing company, a worker sustained a deep leg injury from a pressurised hose. The on-site trauma pack and trained first aider applied a pressure bandage within two minutes, preventing severe blood loss before transfer to the hospital. The company later integrated trauma care simulation into monthly HSE drills.

9.REVIEW AND CONTINUAL IMPROVEMENT

After each incident or on an annual basis, the following actions should be taken:

- Review the adequacy of emergency kits, assess the availability and readiness of personnel, and ensure that facilities are appropriate and functional.
- Evaluate current training programs to identify any gaps or additional needs, and update emergency contact information to ensure accuracy.
- Document lessons learned from incidents or drills and incorporate these insights into toolbox talks or sessions to promote continuous learning.
- Benchmark safety procedures and performance against peer operations to identify areas for improvement and implement best practices.

Review Cycle:

- Conduct minor updates every quarter to keep procedures current.
- Perform comprehensive reviews annually or immediately following any major incidents to ensure continual improvement and preparedness.

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10. SUMMARY CHECKLIST

Action Area	Key Deliverable	Status Check
First Aid Needs Assessment	Documented and approved report	☐
Procurement and Installation	Kits and signage in place	☐
Training and Certification	Up-to-date first aider list	☐
Inspection and Maintenance	Monthly checklist completed	☐
Communication	Notice boards and awareness posters	☐
Recordkeeping	Treatment and inspection registers filed.	☐
Emergency Integration	ERP updated with medical response procedures	☐
Review and Audit	Annual review completed	☐

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11. CONCLUSION

The role of an HSE professional in first aid management is both strategic and operational in nature.

Your effectiveness is measured not only by compliance, but also by readiness - how swiftly your team can respond when seconds matter.

A well-structured first aid system reflects professional excellence, protects lives, and strengthens organisational resilience.

When designed and implemented correctly, it ensures that every incident, no matter how sudden, meets an equally prepared response.

Final Note:

First aid readiness is the first visible proof of an HSE system that truly values life. Build it, maintain it, test it, and improve it — every single day.

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Appendix

This section contains tools that can assist you in managing first aid in your organisation. You are free to use or modify these to suit your peculiar workplace requirements.

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FIRST AID NEEDS ASSESSMENT FORM

Section A – Site Information

Company / Site Name	
Department / Unit	
Site Location	
Type of Operation	
Total No. of Employees (on-site)	
No. of Shifts / Workers per Shift	
Distance to Nearest Hospital (km/min drive)	
Date of Assessment	
Assessed By (Name/ Designation)	

Section B – Risk Profile

Potential Hazards	**Likelihood (H/M/L)**	**Severity (H/M/L)**	**Comments / Notes**
Slips / Trips / Falls			
Electrical Hazards			
Fire / Explosion			
Chemical Exposure			
Manual Handling/ Ergonomic Risk			
Machinery Operation			
Confined Spaces			
Vehicle / Traffic Movement			
Heat Stress / Dehydration			
Other (specify)			

Section C – First Aid Requirements

Category	**Observation**	**Recommended Action / Resources Required**
No. of trained first aiders required		
No. of first aid kits required (by size)		

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Requirement for first aid room (Y/N)	
Requirement for eye wash/shower	
Emergency transport available (Y/N)	
Nearest hospital/clinic details	

Assessor's Signature:	**Date:**
HSE Manager Approval:	**Date:**

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FIRST AID KIT INSPECTION CHECKLIST

Inspection Details

Location / Department	
Kit Type (Small / Medium / Large / Vehicle / Critical Injury)	
Date of Inspection	
Inspected By (Name / Designation)	
Next Inspection Due	

Checklist Item	**Qty Required**	**Qty Available**	**Condition (Good /Expired/Missing)**	**Remarks / Action Taken**
Adhesive Plasters (Assorted)				
Medium Sterile Dressings				
Large Sterile Dressings				
Triangular Bandages				
Eye Pads				
Cleansing Wipes (Alcohol-free)				
Adhesive Tape Roll				
Nitrile Gloves (Pairs)				
Burns Dressings				
Conforming Bandage				
Safety Pins				
Scissors / Shears				
Foil Blanket				
Resuscitation Face Shield				
First Aid Guide Leaflet				

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Trauma Dressing / Tourniquet (if applicable)	

General Condition of Kit Container:
☐ Good ☐ Damaged ☐ Contaminated

Action Taken: _____

Inspector's Signature: _____ *Date:* _____

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FIRST AID TREATMENT REGISTER/LOGBOOK

Purpose: To document every treatment or first-aid intervention provided at the workplace.

Date / Time of Incident	*Employee Name / ID*	*Department / Location*	*Nature of Injury / Illness*	*Treatment Given*	*Items Used from Kit*	*First Aider Name & Signature*	*Further Action Taken (e.g., hospital referral)*	*Remarks / Follow-Up*

Note: Review entries weekly to identify injury trends and recurring causes.

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FIRST AIDER TRAINING AND CERTIFICATION REGISTER

Name of First Aider	*Employee No. / Department*	*Date of Training*	*Training Provider*	*Certificate Expiry Date*	*Level of Training (Basic / Advanced / EMR)*	*Current Posting / Shift*	*Refresher Due Date*	*Remarks*

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CRITICAL INJURY PACK CONTENTS CHECKLIST

Item	*Qty Required*	*Qty Available*	*Condition*	*Remarks*
Trauma Dressings (large)	2			
Trauma Dressings (medium)	2			
Haemostatic Gauze / Powder	2			
Tourniquet (windlass type)	1			
Emergency Foil Blanket	1			
Burn Dressing (large)	1			
Nitrile Gloves (Pairs)	2			
Shears / Scissors	1			
CPR Face Shield	1			
Instruction Card (Trauma Steps)	1			

Inspection Frequency: *Monthly*
Responsible Person: _____

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FIRST AID ROOM EQUIPMENT AND INSPECTION CHECKLIST

Item / Facility	***Condition (Good / Needs Repair / Missing)***	***Remarks / Action Required***
Examination Couch / Bed		
Clean Linen / Pillow / Blanket		
Sink with Running Water		
Hand Wash / Sanitiser		
Lighting and Ventilation		
Lockable Cabinet for Medicines		
Waste Bin (Bio-hazard marked)		
Stretcher / Wheelchair		
Refrigerator (for medical supplies)		
Communication Line (Phone / Radio)		
Updated Emergency Contact List		
Poster of First Aid Procedures		

Inspection Date: _____
Inspected By: _____
Signature: _____

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FIRST AID PERFORMANCE REPORT TEMPLATE

Period Covered: _____

Department/Location: _____ |

Indicator	**Target**	**Actual**	**Variance**	**Comments / Corrective Action**
% Work Areas with Functional Kits	100%			
% Trained First Aiders per Shift	≥ 90%			
Average Response Time (mins)	≤ 3 min			
No. of First Aid Cases Handled				
% of Cases Referred to Clinic / Hospital				
% of Kits Inspected Monthly	100%			
No. of Drills Conducted This Period	≥ 2 per year			

Prepared By: _____

Reviewed By: _____

Date: _____

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EMERGENCY CONTACT DIRECTORY

Emergency Service	*Contact Person / Institution*	*Phone No. / Hotline*	*24-Hr Availability (Y/N)*	*Remarks*
Ambulance Service				
Nearest Hospital / Clinic				
Fire Service				
Police				
Company Security Control Room				
HSE Manager / Coordinator				
Facility Manager / Supervisor				
NEMA / FRSC Hotline				

Last Updated: _____

Next Review Date: _____

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MONTHLY FIRST AID SYSTEM AUDIT SHEET

Audit Criteria	***Yes/No***	***Comments/ Evidence***
First aid policy approved and communicated		
Needs assessment completed and up to date.		
Sufficiently trained first aiders on each shift		
Kits are adequately stocked according to the risk level.		
Kits are inspected monthly with records.		
Critical injury pack available in high-risk areas		
Eye wash stations/showers are functional.		
The first aid room is clean and equipped.		
First aid training records are valid.		
Emergency contact list displayed		
First aid incidents are properly logged.		
Performance reports submitted to management.		

Auditor's Name: _____

Designation: _____

Date: _____

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DEFINITIONS (FOR CLARITY IN APPLICATION)

- **First Aid:** Immediate care provided to an injured or ill person before professional medical help becomes available.
- **First Aider:** A trained individual with valid certification who can provide emergency medical care and stabilize victims.
- **Appointed Person:** A worker designated to oversee first aid arrangements but who may not have full first aid training.
- **First Aid Kit:** A collection of essential medical items used to treat minor injuries and sustain life during emergencies.
- **Critical Injury Kit:** A specialized pack for managing catastrophic injuries such as severe bleeding, amputation, or trauma.
- **First Aid Room:** A designated and equipped space for administering first aid in large or high-risk workplaces.
- **Workplace:** Any environment where people engage in paid employment or organizational activities.