# Foster City CERT

## Victim Data Form

| Victim Name & Description (age, sex, body build, estimated height) | Date | Time in | Date | Time out |
|---|---|---|---|---|
| | Brought in by: | | Sent to: | |

**Primary Assessment**

| TIME | TRIAGE | RESPIRATION (1) | | PERFUSION Blanch (2) | PERFUSION Pulse (3) | | MENTAL ALERTNESS | OTHER |
|---|---|---|---|---|---|---|---|---|
| Hours | Minor, Delayed, Immediate | Rate/min. | Deep, Shallow, Noisy, Labored | Less than 2 seconds, okay | Rate/min. | Strong, Weak, Absent | Alert, Confused, Unresponsive | Pain, Anxiety, Thirst, Etc. |
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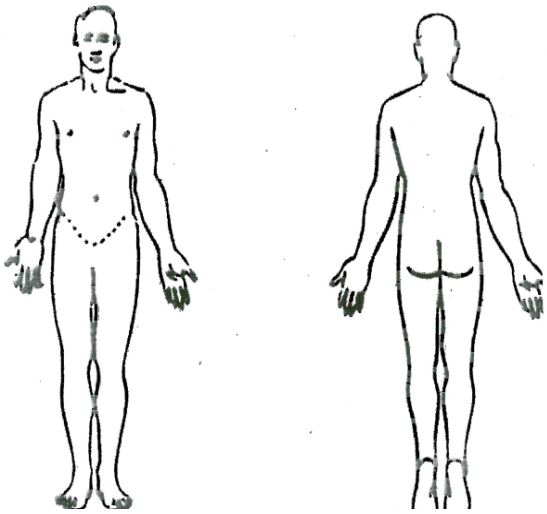
1) Respiration: 12 to 20 per minutes is Normal. 2) Perfusion: Less than 2 sec is Normal; More than 2 sec. treat for Shock 3) Pulse: 50 to 100 is Normal.

Other Notes



| Head to Toe Assessment |
|---|
| 1. Deformation |
| 2. Contusions |
| 3. Abrasions |
| 4. Punctures |
| 5. Burns |
| 6. Tenderness |
| 7. Lacerations |
| 8. Swelling |

Place number on site of injury/pain

FC CERT revision date: 3/26/2014