



Em~sub dive log sheet
In an emergency contact 07831 151523 (England, Wales, Northern Ireland) / Scotland 0345 408 6008
Remember C.O.A.S.T: Concentration, Observation, Anticipation, Safety, Time

Date	Dive Site	Dive Site				Dive manager				Boat & skipper				
NAME (DIVE ORDER INTO WATER)		CYL NITRO	NITROX	Pony?	Pony? PLANNED		ACTUAL		DECO STOPS (metres)		Gas			
(DIVE OR	DER INTO WATER)	CYL SIZE	YL NITROX ZE %	Y or N	DIVE TIME	DEPTH	AM / PM	DIVE TIME	DEPTH	9	6	3	IN	OUT
														_

This form (& dive computer & buddy if applicable) should accompany the casualty to medical facilities

CASUALTY ASSESSMENT

BSAC #	1
Dive with us	

N-4		

Casualty name: Age: yrs Male/female:

Onset of symptoms: Description:	Time:		
43.			

	ord observati ualty's conditi	ons every 15 r	nins an	d when			
Highest level	of respo	nse		Voice, Pain, esponsive			
BLS	Note times st stopped	arted and			 		
AED	Note times ap Note if shock						
Orientation	Day	✓ normal	X	abnomal	Î	ľ	6
	Place	✓ normal	X	abnormal		×	
	Person	✓ normal	X	abnormal		×	Ĵ
Personality c	hange	✓ absent	Х	present			
Chest pains		✓ absent	X	present			8
Respiratory r	ate		(brea	ths/minute)		2	e e
Pulse rate			(bea	ats/minute)			
Vision				rmal, Tunnel, ırred, Double		ő	e e
Head & neck ✓ normal	Tingling/ Facial we	numbness		t/Right/Both			
Upper limb ✓ nomal	2.000.55500.555	numbness	Lef	t/Right/Both t/Right/Both t/Right/Both			
Trunk ✓ normal	Tingling/	numbness	Lef	t/Right/Both			
Lower limb ✓ normal	Tingling/ Weaknes	numbness s		t/Right/Both t/Right/Both			
Eye/hand cod	ordination	1 ✓ nor	mal	X abnomal			
Oxygen thera		time started & sed. Note O ₂ %					
Fluid adminis	tered	Note time and	į.				

Assessor name: Contact name:
Tel: Vessel call sign:

INCIDENT PROCEDURE

TAKE CONTROL

- ASSESS THE SITUATION
- DELEGATE ACTION

CONTACT THE EMERGENCY SERVICES

Tell them: Who you are - Type of emergency - Location



EMERGENCY SERVICES - UNITED KINGDOM

At sea All incidents: Coastguard VHF DSC (or Channel 16)
Lives in immediate danger: Mayday (distress button)

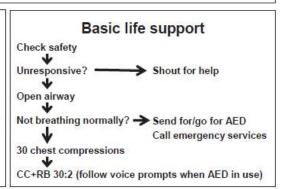
Decompression illness: Pan Pan

On land Decompression illness: BHA / RN Diver Helplines

England, Wales, Northern Ireland: 07831 151523
Scotland: 0345 408 6008
Near drowning: Ambulance 999 or 112
Lost diver: Coastguard/Police 999 or 112

Decompression illness

Keep the casualty quiet Lie casualty flat on back Do NOT raise legs Administer 100% oxygen Administer fluids



DIVE DETAILS Casualty name:

Ascent	Normal Y/N	Rapid Y/N	Missed stops min			
Use separate s	heet for buddy	Incident dive	cident dive Previous dives (most recent first)			
Gas mix (if re	ebreather write RB and	19				
Surface inte	rval (since previous dive)					
Depth (m) & surface, or 1st	Dive time (surface to stop if taken)					
Stop 1 (mins @ m) & deco mix						
Stop 2 (min	s @ m) & deco mix					
	Is (Record dives with >3 arate piece of paper)					
Surfacing ti	me (and date if needed)					