		First		
	formation about the person	-	-	
				Dis III ()
_		ge/_ D.O.	B// Month Day Year	Relationship to infant:
I W	/hat led you to respond?			
	Then the infant was found, we not breathing, did you witness			sponsive
De	Describe infant's appearance when found. No Yes Describe and specify location:			
a)	Discoloration around face/no	se/mouth		
b)	Secretions (foam, froth)		□ □ ⇒ _	
c)	Skin discoloration (livor mortis)	□ □ ⇒ _	
d)	d) Pressure marks (pale, blanching)			
e)	e) Rash or petechiae (small, red blood spots on skin, membranes or eyes)			
f)	f) Marks on body (scratch on nose)			
g)	Other		□ □ ⇒ _	
h)	Unknown		□ □ ⇒ _	
			to touch Rigid, sti	ff Limp, flexible
W	hat date and time were the	first resuscitative efforts g	iven?///	Year Military Time
I \//	/here were resuscitative effo	orts conducted?	Month Day	real Williary Time
	Where were resuscitative enorts conducted:			
_				
_	escribe what you did as par	t of the resuscitative effort	s (ex. pushed on chest and brea	thed into mounth and nose):
_	escribe what you did as par	t of the resuscitative effort	s (ex. pushed on chest and brea	thed into mounth and nose):
_	escribe what you did as par	t of the resuscitative effort	s (ex. pushed on chest and brea	thed into mounth and nose):
_	escribe what you did as par	t of the resuscitative effort	s (ex. pushed on chest and brea	thed into mounth and nose):
_	escribe what you did as par	t of the resuscitative effort	s (ex. pushed on chest and brea	thed into mounth and nose):
	escribe what you did as part			when://
	ave you ever received any F		g? □ No □ Yes ⇒	When://
	ave you ever received any F	irst Aid and/or CPR trainin	g? □ No □ Yes ⇒	When://
	ave you ever received any F	irst Aid and/or CPR trainin	g? □ No □ Yes ⇒	When://
	ave you ever received any F	irst Aid and/or CPR trainin	g? □ No □ Yes ⇒	When://

