

HIGH RISK WORKPLACE KIT (VFARCN) - REFILL

\$255.00



Size	46 x 73 x 16cm	
Person	Low Risk	1-100 Person
	High Risk	1-50 Person
DESIGNED FOR:		
Environments	Injuries	

Specifically designed for High Risk workplaces such as construction and building sites. This comprehensive kit features infection control equipment, diagnostic instruments and multiple dressings.

Includes an emergency draw to allow you to take emergency items to a patient.

Suitable for Construction, Forestry, Mining and Energy industries.



Phone 0488 405 605

PO Box 10, Drouin Vic 3818

info@victorianfirstaid.com.au

www.victorianfirstaid.com.au

**TURN OVER
FOR A FULL
CONTENT LIST
AND TO PLACE
YOUR ORDER**

HIGH RISK WORKPLACE KIT (VFARCN)- REFILL

ITEM

1 x Adhesive Fabric Strip (box 100)
1 x Adhesive Plastic Strip (box 100)
1 x Adhesive Fabric Knuckle dressings (box 50)
1 x Adhesive Fabric Fingertip dressing (box 50)
1 x Antiseptic - swabs (box 100)
1 x Apron - white disposable
2 x Bag - Clear Resealable (assorted x3)
4 x Bandage - Crepe 5cm
4 x Bandage - Crepe 7.5cm
4 x Bandage - Crepe 10cm
2 x Combine Dressing 20cm x 90cm
1 x CPR Face Mask
4 x Dressing - island 6cm x 8cm
5 x Dressing - low adherent 7.5cm x 5cm
5 x Dressing - low adherent 7.5cm x 10cm
5 x Dressing - low adherent 10cm x 10cm
6 x Dressing Pack - basic
10 x Eye Pads
1 x First Aid Instructions and contents list
4 x Forceps - plastic
3 x Gloves - Powder Free Nitrile (pkt 10)
1 x Glutose 15 Oral Gel - 37.5g
2 x Instant Ice Pack
1 x Notebook and pen
1 x Pen Light
1 x Safety Glasses - clear
1 x Safety Pins (bag 12)
50 x Saline - 15ml ampoule
4 x Scissors - Sharp/Blunt
30 x Swabs - Gauze 3pcs 7.5cm x 7.5cm
1 x Tape - Micro. Paper 1.25cm x 5M
1 x Tape - Micro. Paper 2.5cm x 5M
2 x Thermal Blanket 127cm x 180cm
1 x Thermometer - Digital
8 x Triangular Bandage - Nonwoven
1 x Universal Shears
4 x Wound Dressing No.13
4 x Wound Dressing No.14
4 x Wound Dressing No.15

The contents of kits may vary slightly from time-to-time, but the applicability of each kit to its purpose will remain.

ORDER FORM

Name: _____

Organisation: _____

Address: _____

_____ P/Code _____

Phone: _____

Mobile: _____

Email: _____

PAYMENT DETAILS

☐ Purchase Order ☐ Visa ☐ Mastercard

Purchase Order Number: _____

Credit Card Number:

□□□□ □□□□ □□□□ □□□□

Expiration Date: □□ □□ CCV: _____

Name on Card: _____

Signature: _____

Kit Cost: _____ Delivery: \$17.00

Quantity: _____

Total Cost: _____



Phone 0488 405 605

PO Box 10, Drouin Vic 3818

info@victorianfirstaid.com.au

www.victorianfirstaid.com.au