



## Government of Karnataka

No. LD 90 KABANI 2023

Karnataka Government Secretariat,  
Vikasa Soudha,  
Bangalore, Dated: 02-01-2025.

### **NOTIFICATION**

In exercise of the powers conferred by Section 45(3) of the Factories Act 1948, Government of Karnataka hereby notifies the criteria for recognition of First Aid Training Institutes in the State of Karnataka for the purpose of Factories Act 1948 as follows;

1.	The institute shall be registered under Companies Act or Partnership Firm Act or Societies Act, Indian Trust Act (Charity Commissioner) etc.
2.	The Institute shall have at least one trainer with following educational qualification.
a.	Qualification included in the appendix of Indian Medical Degree Act, 1916 or Indian Medical Council Act, 1956.
b.	Diploma in Industrial Health(DIH) or AFIH
c.	At least 5 years training experience in First Aid
3.	The Institute shall have at least two First Aid training assistants having medical knowledge.
4.	The Institute shall have owned or rented space, in Karnataka, sufficient for accommodating at least 30 trainees at a time with required furniture and facilities. Factory Management shall not be charged more than Rs. 1000/- per candidate if training is conducted in the Institute & Rs. 1200/- per candidate if training is conducted in the factory premises.
5.	Equipments necessary for training (e.g. Overhead Projector, Sound system, Mannequins, Automated External Defibrillator(AED), etc and necessary books about first aid) shall be available in the Institute.
6.	Syllabus for First Aid training course shall be as per Appendix B.
7.	Application for recognition of First Aid training Institute is as per Appendix C.
8.	The Institute shall pay Rs.10, 000/-(Rupees Ten thousand only) as registration fees & Rs.10, 000/-(Rupees Ten thousand only) as registration renewal fees <u>which is non refundable</u> . Renewal has to be done after every 2 years.
9.	Training Programme shall be conducted for a minimum of three days. Successful candidates will be issued certificates with validity of 3 years.

10.	First Aid training shall be imparted to the Factory workers as per following conditions.
a.	Each batch should have a maximum of 30 Trainees.
b.	Training period shall be for a minimum of three days. Successful candidates will be issued certificates with validity of 3 years.
c.	The Officers of the Directorate of Factories, Boilers, Industrial Safety & Health are empowered to inspect the Training Centers/Training Programme surprisingly.
d.	On request of Factory Management, Institute shall arrange the training programme in the factory premises.
e.	Director of Factories, Boilers, Industrial Safety & Health, with prior consent from the Government, will have the right to cancel the registration if any First Aid Training Institute is found violating the regulations regarding such training programme.
<b>Note :</b>	
1.	First Aid Training Institute applying for recognition should pay the fees online and the fees are non refundable
2.	Application shall be submitted to the following office; Address :- Director of Factories, Boilers, Industrial Safety & Health 2nd Floor, Kalyana-Suraksha Bhavana, Dairy Circle, Bannerghatta Road, Bengaluru – 560 029 Tel: 080-26531200 Email: directorfbish@gmail.com

By Order and In the Name of the  
Governor of Karnataka,

*Venkatarama J.T.*  
**(Venkatarama J.T)** 21/2025

Under Secretary to Government,  
Labour Department,  
(Factories & Boilers).

**To,**

1. The Compiler, Karnataka gazette, Bengaluru with a request to publish this in the next issue of Karnataka Gazette and to send 50 copies of Gazette publication to this office.
2. The Director, Department of Factories, Boilers, Industrial Safety and Health, Karmika Bhavana, Bannerugatta Road, Bengaluru.

**Copy for information:**

1. The Private Secretary to Hon'ble Minister for Labour, Vidhana Soudha, Bengaluru.
2. The Private Secretary to the Secretary to Government, Labour Department, Vikasa Soudha, Bengaluru.
3. The Deputy Secretary to Government-2, Labour Department, Vikasa Soudha, Bengaluru.
4. Spare Copies/ Section Guard file.

## Appendix B

### Syllabus for First Aid Training of Industrial Workers

1. Introduction to Factories Act, 1948  
(Provisions relating to First Aid Appliances, Ambulance room, Medical Examination, Accident Reporting etc.)
2. Introduction to First Aid; Basic Principles of First Aid
3. Emergency Scene Management; Action on emergency
4. Dressings & Bandages
5. Fracture & immobilization of fracture
6. Management of medical shock
7. Wounds – Types & management
8. Introduction to Cardiovascular system & CPR
9. Introduction to respiratory system; methods of removing airway obstruction, asphyxia, poisoning etc.,
10. Head & Spinal injury; Management of spinal injury
11. Burns & Scalds,
12. Electrocution,
13. Effect of heat & cold and management,
14. Handling & transport of the injured person
15. Drowning, Bites & Stings, poisoning, convulsion & epilepsy

**Duration of Training Course – 2 Days theory, ½ day Practical followed by assessment through written examination.**

## Appendix C

### Application form for registration and approval of the First Aid Training Institutes (See Section 45(3) of the Factories Act, 1948)

1.	Name of the Training Institute	
	Address of the Training Institute	Pin-code
	Tel. No. of the Training Institute	
	FAX No. of the Training Institute	
	Email address	
2.	Name the Chairman/ Director	
	Correspondence address of Chairman/ Director	Pin-code
	Mobile No of Chairman/ Director	
	Email of Chairman/ Director	
3.	Registration of Institute (attach relevant documents about registration of the Institute)	
4.	Details about faculties (First Aid Trainer) (Submit attested documents regarding Education Qualification, Experience & Letter of consent.)	
	Name	
	Education Qualification	
	Experience	
	Letter of consent as First Aid Trainer	Yes/No
	Mobile No.	
5.	At least two First Aid training assistants having medical knowledge & undergone training in first aid. (Submit attested documents regarding Educational Qualification & Training )	1.Name
		2.Name
6.	Location plan, with building and class room layout (Hall should be minimum 30.0 sq. m. with sufficient light, ventilation and emergency exit facilities)	Yes/No

7.	Facilities available	
	i) LCD Projector	Yes/No
	ii) Sound & Public Address System	Yes/No
	iii) White Board and marker	Yes/No
	iv) Toilet for the participants-separately for Male/Female	Yes/No Yes/No
	v) Practical training facilities Mannequins, Automated External Defibrillator(AED), etc	Yes/No
	vi) Training Videos	Yes/No
	vii) Posters	Yes/No
8.	Details of the course - structure/syllabus/ topics covered (attach separate sheet)	Yes/No
9.	Course duration	
10.	Medium of instruction	
11.	Level of Participants (Workers/Supervisor/Managers)	
12.	Library( Necessary books about first aid. Give details)	Yes/No
13.	Whether any examination would be conducted at the end of the course.	Yes/No
14.	Whether sufficient case study bank is generated for illustration, give details.	Yes/No
15.	Amount of registration fee paid (Attach Online payment challan copy)	

**Name, Signature & Stamp of the  
Chairman/Director**

**Place :**

**Date :**

(affidavit should be submitted on Rs.100/-stamp paper and should be certified by Notary or Executive magistrate)

### **AFFIDAVIT**

I, Sri/Smt ..... Chairman /  
Director of .....( Name of Institute )..  
Aged..... years, .....  
.....Address.....  
.....hereby submit on oath in writing as follows.

1. I have applied on behalf of ..... (Name of Institute) .....for recognition as First Aid Training Institute.
2. Institute is registered with .....
3. Institute has at least one trainer with following educational qualification & experience
  - i. Qualification included in the appendix of Indian Medical Degree Act, 1916 or Indian Medical Council Act, 1956.
  - ii. Diploma in Industrial Health/AFIH.
  - iii. At least 5 years experience in training in First Aid.
4. Institute has at least two First Aid training assistant having medical knowledge & undergone training in first aid.
5. Institute has its own / rented place of minimum 30 sq. m. hall and can accommodate 30 participants at a time.
6. Following Equipment's/ facilities necessary for training are available in the Institute.
  - i) LCD Projector facility
  - ii) Sound system and Public Address System
  - iii) White Board and marker
  - iv) Toilet facility to the participants (individual for male/Female)
  - v) Facilities for Practical training such as Mannequins, AED, etc
  - vi) Training Videos
  - vii) Posters
  - viii) Library

I submit that the above said information is true & correct as per my knowledge and if any information furnished in this affidavit is found to be false, I shall be liable for action against me.

Date :

Place :

Deponent  
**Name, Signature & Stamp of the  
Chairman/Director**

Witness:

## **Consent Letter** **(Format)**

I the undersigned Dr. ....(Name).....  
possessing MBBS/MD/MS and DIH/AFIH qualification. I am associated with  
..... (Name of Institute) .....  
as a First Aid Trainer. I shall be giving First Aid Training organized by the Institute,  
as per guidelines of Government of Karnataka.

The Institute has applied as per section 45 (3) of the Factories Act 1948,  
for getting recognition from Government of Karnataka.

Signature & Stamp  
(IMC/KMC registration number)

### Check-List

Name of the Institute: .....

Sl. No.	Items	Applicants Response
1	Sign & Date on Application Form	Yes/No
2	Relevant documents about registration of Institute	Yes/No
3	Faculties /First Aid Trainer Attested papers regarding Educational Qualification, experience & Letter of consent	Yes/No
4	First Aid training assistants having medical knowledge && undergone training in first aid Attested documents regarding Educational Qualification and training	Yes/No
5	Location plan along with building and class room layout, emergency exit	Yes/No
6	Details about the course - structure/syllabus/ topics covered	Yes/No
7	Library details -necessary books about first aid	Yes/No
8	Details about case study bank	Yes/No
9	Affidavit	Yes/No
10	Registration fees – Online payment	Yes/No

**Note : All the documents pertaining to the educational qualification / experience or any other relevant document shall be submitted in two copies duly attested.**

**Name, Signature & Stamp of the  
Chairman / Director**