

**FIGURE - G**

<b>PERSONAL PROTECTIVE EQUIPMENT QUESTIONNAIRE (con't)</b>	
Name:	Date of Mishap:
Rate/Rank:	Mishap Category:
Duty/Position:	Mishap Number:

**Mark with an X in the appropriate box. Note any irregularities in the remarks section.**

Designation	Required	Optional	Available	Utilized	Type/Model
Helmet/Neoprene					
PFD (personal flotation device)					
Survival vest					
Strobe light					
Signal Mirror					
Whistle					
Rain Gear					
Boat shoes					
Gloves/inserts/cold weather					
Goggles/sunglasses					
Knife					
Boots (insulated, safety, waterproof)					
Coveralls (anti-exposure)					
Balaclava					
Watch cap					
Personal EPIRB					
Underwear (reg, thermal, polar)					
Socks (reg, thermal)					
Dry suit/MSD900					
<b>Signaling Devices:</b>					
Mark 79					
Mark 124					
<b>Other Equipment:</b>					
Oxygen mask, regulator					
Life raft					
Survival Kit					
Restraint System (lap belts, shoulder harness)					

