BUG-OUT BAG INVENTORY & READINESS

A practical, personalized evacuation assessment | Prepping Communities

Bag owner / household member

Primary evacuation destination

Alternate destination / meeting point

Out-of-area contact

Bag storage location

Date packed / next review

HOW TO USE THIS WORKSHEET

Complete one inventory per person. Record required and packed quantities, then identify gaps. Adapt supplies to the route, climate, transportation, health needs, dependents and realistic carrying ability.

READINESS PRIORITIES

Essential: needed for safety or individual health. Conditional: needed for a specific climate, route or risk. Optional: useful only if space and carrying capacity permit.

PERSONAL NEEDS AND LIMITATIONS

Additional medical, mobility, family or environmental requirements

WATER & FOOD

Plan for safe drinking water, nutrition and replenishment

EQUIPMENT INVENTORY

ITEM / PURPOSE	QTY	PACKED	NEED
☐ **Carried drinking water** Record volume; leakproof containers			
☐ **Water treatment method** Suitable for expected source and hazards			
☐ **Treatment backup / spare parts** Compatible tablets or replacement parts			
☐ **Refill container** Compact bottle or collapsible container			
☐ **Ready-to-eat meals** No cooking required			
☐ **High-energy snacks** Fit dietary requirements			
☐ **Electrolytes if needed** Based on heat, exertion and personal needs			
☐ **Cup / eating utensils** Lightweight and washable			

PRACTICAL CHECK

Filters do not necessarily remove viruses or chemical contaminants. Verify limitations and source safety.

MISSING SUPPLIES / REPLACEMENT NOTES

SHELTER, CLOTHING & WEATHER

Prevent exposure without excessive pack weight

EQUIPMENT INVENTORY

ITEM / PURPOSE	QTY	PACKED	NEED
☐ **Weatherproof outer layer** Rain jacket or suitable poncho			
☐ **Insulating clothing layers** Season-appropriate warmth			
☐ **Emergency bivvy / shelter** Compact protection from wind and rain			
☐ **Ground insulation** Lightweight pad or alternative			
☐ **Spare socks / underwear** Keep dry and protected			
☐ **Hat / gloves** Cold or sun protection			
☐ **Footwear / traction** Suitable shoes; seasonal aids			
☐ **Seasonal accessories** Sun protection or insect protection			

PRACTICAL CHECK

Check fit and seasonality. Never use fuel-burning heaters inside tents or enclosed shelters.

MISSING SUPPLIES / REPLACEMENT NOTES

COMMUNICATION, LIGHT & NAVIGATION

Maintain independent information and contact options

EQUIPMENT INVENTORY

ITEM / PURPOSE	QTY	PACKED	NEED
☐ **Flashlight / headlamp** Test; carry spare compatible power			
☐ **Emergency radio** Reception and charging verified			
☐ **Phone charging kit** Cable, charged bank and adapter			
☐ **Whistle / visible signal** Accessible without unpacking			
☐ **Paper map / route details** Current primary and alternate routes			
☐ **Compass / offline navigation** Practice without internet			
☐ **Printed emergency contacts** Family and out-of-area contact			
☐ **Two-way radio if applicable** Range, channels, licensing and power			

PRACTICAL CHECK

Internet apps may all depend on the same infrastructure. Test at least one genuinely different fallback.

MISSING SUPPLIES / REPLACEMENT NOTES

FIRST AID & PERSONAL MEDICAL

Tailor supplies to each person and their medical needs

EQUIPMENT INVENTORY

ITEM / PURPOSE	QTY	PACKED	NEED
☐ **Basic first aid supplies** Dressings, bandages, gloves			
☐ **Prescription medication** Legal reserve and storage guidance			
☐ **Medication / allergy list** Dosage and care contacts			
☐ **Specialized medical equipment** Only if needed and trained to use			
☐ **Glasses / hearing supplies** Spare lenses or batteries			
☐ **Mobility / personal care supplies** Necessary aids and consumables			
☐ **Respiratory protection** Suitable for anticipated hazard			
☐ **Soap / sanitizer** Hand hygiene supplies			

PRACTICAL CHECK

Follow clinician guidance for medications, storage temperature, expiry dates and specialized equipment.

MISSING SUPPLIES / REPLACEMENT NOTES

TOOLS, FIRE & HYGIENE

Keep compact equipment useful and safe

EQUIPMENT INVENTORY

ITEM / PURPOSE	QTY	PACKED	NEED
☐ **Multitool / repair kit** Only tools you can safely use			
☐ **Cordage / repair tape** Small practical quantities			
☐ **Work gloves** Protect hands from rough surfaces			
☐ **Ignition kit if appropriate** Only where fire is permitted and safe			
☐ **Toilet supplies / waste liners** Safe containment and disposal plan			
☐ **Personal hygiene supplies** Toothbrush, wipes, menstrual needs			
☐ **Quick-dry towel / cloth** Separate clean and used items			
☐ **Dry bags / protective bags** Keep sensitive supplies dry			

PRACTICAL CHECK

Waste bags do not by themselves provide safe human-waste disposal. Follow local instructions.

MISSING SUPPLIES / REPLACEMENT NOTES

DOCUMENTS, FAMILY & PETS

Protect access, identity and dependents

EQUIPMENT INVENTORY

ITEM / PURPOSE	QTY	PACKED	NEED
☐ **Identification / copies** Water-resistant and protected			
☐ **Emergency cash / payment backup** Small denominations if practical			
☐ **Insurance / contact details** Essential reference information			
☐ **Keys / access information** Home, vehicle and destination			
☐ **Child-specific supplies** Diapers, comfort and age needs			
☐ **Pet leash / carrier** Suitable restraint for each animal			
☐ **Pet food / water / medicine** Portions and containers			
☐ **Special care instructions** Dependents, pets and accessibility			

PRACTICAL CHECK

Protect personal information. A bag can be lost or stolen; account for all dependents.

MISSING SUPPLIES / REPLACEMENT NOTES

VEHICLE & SEPARATE SUPPLIES

Keep bulky gear out of the wearable bag

EQUIPMENT INVENTORY

ITEM / PURPOSE	QTY	PACKED	NEED
☐ **Vehicle emergency equipment** Seasonal traction, tools and spare tire supplies			
☐ **Extra water and bulk food** Secure separately; verify access			
☐ **Large shelter / stove / fuel** Only when safe and transportable			
☐ **Mobility or care equipment** Who transports and sets it up			
☐ **Extra clothing / bedding** Vehicle or destination cache			
☐ **Pet crate / large supplies** Secured and accessible			

STORAGE LOCATION AND PERSON RESPONSIBLE

Location / assigned person

IF THE VEHICLE BECOMES UNAVAILABLE

Alternate plan

MISSING SUPPLIES / REPLACEMENT NOTES

72-HOUR FOOD & WATER ASSESSMENT

Calculate needs and identify realistic resupply options

WATER PLANNING

Number of people / planned travel days

Planning litres per person per day

Total estimated water = people x days x litres

Water actually carried (litres)

Water accessible in vehicle / at destination

Reliable refill source and treatment plan

FOOD PLANNING

Daily energy and special dietary needs

Total person-days planned

Ready-to-eat food packed / days supported

Food resupply or destination arrangements

ASSUMPTIONS AND GAPS

These are planning estimates, not universal consumption minimums. Climate, exertion, age and illness change needs. Carrying all calculated water for 72 hours may be impractical; identify realistic refilling and treatment options.

EVACUATION PLAN & BACKUPS

Routes, destinations and independent communication

DESTINATION AND ROUTE

Primary destination / contact

Alternate destination / contact

Primary route and travel mode

Alternate route / closure plan

Family reunification point

Check-in schedule / out-of-area contact

Transport, fuel and accessibility dependencies

PACE COMMUNICATION FALLBACK

Primary method

Alternate method

Contingency method

Emergency / last-resort method

CONDITIONS REQUIRING A DIFFERENT PLAN

Trigger / alternative action

BAG WEIGHT & CARRY TEST

Confirm the load can be carried safely

MEASURED LOAD AND TEST CONDITIONS

Empty bag weight / loaded bag weight

Loaded weight including water (kg or lb)

Target distance / terrain / elevation

Actual test distance and duration

Weather / temperature / footwear

Discomfort, pain or fatigue observed

CAPABILITY ASSESSMENT

CAPABILITY	VERIFIED	IMPROVE	NOT TESTED
Shoulder and hip comfort	☐	☐	☐
Balance and safe movement	☐	☐	☐
Urgent items can be accessed	☐	☐	☐
Stairs and uneven terrain	☐	☐	☐
Route distance can be sustained	☐	☐	☐
No unsafe pain or exhaustion	☐	☐	☐

LOAD REDUCTION / FIT ADJUSTMENTS

Notes and follow-up

REALISTIC EVACUATION EXERCISE

Conduct a controlled drill without creating hazards

EXERCISE DETAILS

Exercise date / participants

Scenario / destination / weather

Time to locate and put on bag

Time to depart / reach transport

Equipment missing, failed or inaccessible

Communication or navigation failures

CAPABILITY ASSESSMENT

CAPABILITY	VERIFIED	IMPROVE	NOT TESTED
Bag accessible and packed	☐	☐	☐
Food and water usable	☐	☐	☐
Navigation backup tested	☐	☐	☐
Communication fallback tested	☐	☐	☐
Medical / dependent needs supported	☐	☐	☐
Safe carrying demonstrated	☐	☐	☐

LESSONS LEARNED / NEXT EXERCISE

Notes and follow-up

CORRECTIVE ACTION REGISTER

Document each deficiency until retested

PRIORITY IMPROVEMENTS

ACTION 1

Deficiency / consequence

Required improvement

Owner / priority / target date

Retest date / result / verified by

ACTION 2

Deficiency / consequence

Required improvement

Owner / priority / target date

Retest date / result / verified by

ACTION 3

Deficiency / consequence

Required improvement

Owner / priority / target date

Retest date / result / verified by

ACTION 4

Deficiency / consequence

Required improvement

Owner / priority / target date

Retest date / result / verified by

MAINTENANCE & SEASONAL REVIEW

Keep the bag usable as circumstances change

CAPABILITY ASSESSMENT

CAPABILITY	VERIFIED	IMPROVE	NOT TESTED
Food expiry and replacement	☐	☐	☐
Medication expiry and storage	☐	☐	☐
Battery / power bank charge	☐	☐	☐
Water filter / treatment condition	☐	☐	☐
Clothing size and seasonal fit	☐	☐	☐
Maps, contacts and destination current	☐	☐	☐
Pet / child supplies still suitable	☐	☐	☐
Pack weight and physical ability	☐	☐	☐

UPCOMING REPLACEMENT DATES

Food and water replacement

Medication and medical equipment review

Batteries / power bank check

Seasonal kit change

Next full carry test

ADDITIONAL MAINTENANCE NOTES

Notes

FINAL READINESS DECISION

Base readiness on demonstrated capability, not ownership

CAPABILITY ASSESSMENT

CAPABILITY	VERIFIED	IMPROVE	NOT TESTED
Essential supplies packed	☐	☐	☐
Water and food plan workable	☐	☐	☐
Medical and dependent needs covered	☐	☐	☐
Bag weight / carry test passed	☐	☐	☐
Navigation and evacuation route tested	☐	☐	☐
Communication fallback tested	☐	☐	☐
Equipment inspected and usable	☐	☐	☐
Corrective actions completed	☐	☐	☐

READINESS DETERMINATION

☐ **VERIFIED** ☐ **NEEDS IMPROVEMENT** ☐ **NOT TESTED**

Verified means essential capabilities were demonstrated. Needs improvement means important gaps remain. Not tested means the capability has not yet been demonstrated.

EVIDENCE, REMAINING LIMITATIONS AND NEXT STEPS

Evidence / action

SIGN-OFF AND NEXT REVIEW

Assessed by / date

Next review or retest date