when listening Keep confident to casualty instructions simple 2. Make area safe reassuring Don't speak Use Effective Communication too quickly 3. Give emergency aid Get down Don't interrupt Check the to their Use body the casualty level casualty language (e.g. understands nod & smile) 4. Get help Consciousness & Breathing **POSSIBLE CAUSES:**

Calm and

1. Assess situation

999

the call

Location/address &

postcode if known

Type of emergency

(what has happened &

Name of person making

Heart attack; shock; severe bleeding; drowning; choking; stroke; head injury; electric shock; alcohol poisoning; hypoglycaemia; etc. WHAT TO DO FIRST: INFORMATION TO GIVE Are they conscious or not - gently shake shoulders speak to them.

Eve contact

SEV ERITY: Life threatening if unconscious/not breathing; If breathing severity depends on nature of injury.

Unresponsive/no movement if unconsciousness; Shallow, rapids breath & unconscious: Responds

number of casualties) normally to sound/touch-conscious. Age, Gender & current **SEQUENCE:** condition of casualty Conscious → Check for injuries & (conscious/breathing/aw recovery position ake or not & if any

SYMPTOMS:

Unconscious→Check airway & serious bleeding or chest breathing if not breathing shout pain) 'help' call 999 & start CPR Details of injury & how Breathing→ Check for injuries & it happened recovery position Think not breathing → Open airway,

Fire/leaking gas or other hazard

Name of casualty

Airway **KEY TERMS** Pulse Severity Hypoglycaemia **Emergency** First aid **Rationale** Casualt y DR ABC Consent CPR (30:2) Recovery position Conscious

compressions first) until emergency services arrive & take over. **RATIONLE:** Prevent unconsciousness: enable breathing/keep airway open; detect shock, no choking; transfer to hospital.

look/listen (10secs), check pulse.

use AED if available, CPR (chest

Not breathing & no pulse → Obtain &

Choking **POSSIBLE CAUSES:** A foreign object stuck in throat, blocks it & prevents breathing. **SEVERITY:** Mild - casualty may be able to clear blockage; Severe casualty won't be able to speak, breath, cough & will eventually lose consciousness. SYMPTOMS: Coughing, spluttering & gasping for breath; Difficulty speaking,

coughing & breathing. **SEQUENCE:** Encourage to cough; Up to 5 back slaps: Up to 5 abdominal thrusts; Repeat (call emergency); May lose consciousness. **RATIONALE:** Dislodge object; Enable breathing; Transfer if thrusts unsuccessful: re-start breathing

Asthma Attack **POSSIBLE CAUSES:** Triggers can be allergies; a cold; cigarette smoke; poor air quality. SEVERITY: Mild - inhaler: Severe - casus exhaustion; If worsens - may

consciousness. SYMPTOMS: Difficulty breathing (esp. out);

stop breathing & lose

(CPR)

Wheezing & diff. speaking; Cyanosis; Distress & anxiety. SEQUENCE: Support use of inhaler: Encourage slow breaths; Call emergency help; Loss of consciousness-CPR. **RATIONALE:** Ease breathing: detect shock:

Prevent unconsciousness:

Transfer to hospital if necessary.

Burns or Scalds

POSSIBLE CAUSES: Dry burn -fire, hot object contact (e.g. saucepan, oven, cigarette). friction (rope burn e.g.); Scald - boiling water, steam, hot liquids/fat; Electrical burns; Cold injury frostbite, freezing metals or vapours like nitrogen; Chemical burns - paint stripper, oven cleaner; Radiation burns - sunburn, sunlamp overexposure. SEVERITY: May range from minor burns/scalds to major life threatening burns/scalds. SYMPTOMS: Pain;, Reddening, swelling, blistering; Skin damaged area: Breathing difficulties if airway affected; Signs of shock

SEQUENCE: Cool burn; Call emergency help; Remove constrictions: Cover burn. RATIONALE:

Stop burning/remove pain; Minimise infection risk: Minimise shock risk: Transfer to hospital if necessary.

POSSIBLE CAUSES:

Bleeding

Incised wound (from sharp object such as knife); Stab wound (knife penetrating body); Puncture wound (standing on nail, pricked by needle); Graze (caused by fall). SEVERITY: Incised wound - straight, deep cut;

stitches needed; blood vessel cut (profuse bleeding); tendons/nerves may be damaged. Stab wound - danger of injury to vital organs/life threatening. Puncture - may be deep, dirt & germs may be introduced, high infection risk Graze - usually superficial, raw & tender; any embedded particles may cause infection. SEQUENCE:

Apply pressure; Raise & support; Lay

casualty down; Bandage in place; Apply direct pressure; Call emergency help. RATIONALE: Control bleeding & blood flow; Detect/minimise shock; Minimise crossinfection: No food/drink (in case of anaesthetic); Transfer to hospital if necessary.

Shock **POSSIBLE CASUES:**

Circulatory system fails so vital organs are deprived of oxygen; Severe trauma (e.g. severe burns), severe blood loss (external or internal), allergic reaction, sever vomiting & diarrhoea (causing fluid loss), hyperthermia, heart attack, acute heart failure & drug overdose. **SEVERITY:**

Can be life threatening, as vital organs don't get enough oxygen due to reduced blood

SYMPTOMS:

circulation re trauma.

Rapid pulse & sweating; pale skin, cold & clammy. Other possible symptoms - greyblue skin (cyanosis); Rapid & shallow breathing; fingernail/earlobe when pressed won't regain colour immediately; low bp; weak pulse; nausea/vomiting; thirst; loss of consciousness. **SEQUENCE:**

Treat cause (e.g. bleeding, etc.); Loosen tight clothing; Keep them warm; Call emergency help; Monitor vital signs until help arrives. RATIONALE:

Treat cause appropriately; Improve blood flow/Minimise risk of shock; Reduce risk of unconsciousness: No food/drink in case of anaesthetic.