

■ **Sports Injury** All sport injuries need medical aid as serious injuries can occur during sport. If requiring a stretcher, or loss of consciousness, at any time, no matter how brief, an ambulance should be called & game halted.

■ **Sunburn** For adults: cool showers or compresses. For children: a cool compress or body temperature bath (do not over cool). For both, rest in a cool place and have non-alcoholic drinks. Seek medical attention if blistering occurs or if very painful.

■ **Wounds** Do not remove embedded objects. Pad around the wound and seek medical aid. Clean small wounds with an antiseptic solution and sterile gauze swab. Apply povidone-iodine solution for minor grazes (allow it to dry before clothing rubs against it) or a sterile dressing for larger wounds. Seek medical aid, particularly if a wound is deep, gaping, dirty and/or caused by puncturing (e.g. nail, metal...). The person may require stitches, on-going medical treatment and/or an injection to protect against tetanus.

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Workcover (NSW) first aid pamphlet approval number P0419.

Learn first aid. First Aid is better performed by a competent person with First Aid training. For first aid training contact ANFAS :



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Ph:(08) 85368000
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Web: www.wadd.com.au Email: wadd@wadd.com.au
First Aid Kits & Supplies TGA Aust L77294 Sponsor ID 32134
Free updates: <http://www.wadd.com.au/files/BasicFirstAidNotes.html>

BASIC FIRST AID NOTES

Emergency Contact Numbers:

Ambulance } Dial 000 in Australia
Fire } (or Mobile 112)
Police }

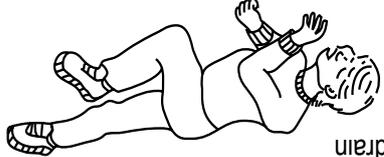
Poisons Information Centre (24hrs) 131126

Doctor

Hospital

School

- **Bleeding**
 - Wear gloves if possible. Stop bleeding by applying pressure on or near the wound with a dressing or improvised barrier (e.g. clothing)
 - or ask the victim to apply pressure to their own wound. Secure dressings with firm pressure (e.g. bandage) but beware of restricting blood circulation in limbs. Do not remove a foreign body but apply pressure around, not directly to foreign body. If severe, life threatening bleeding from a limb, not controlled by pressure, apply an arterial tourniquet above the bleeding point, if trained in its use. Call for an ambulance.
 - Be alert to internal bleeding by looking for further wounds, discoloration, swelling, deformity and/or the onset of shock (could include paleless, thirst, coldness). Maintain body heat. Seek medical aid.
 - For bruising to a limb & no external bleeding, use cold pack & pressure.
 - Nose bleed: Advise the person to pinch their nose and bow head. Avoid blowing. Seek medical aid if bleeding continues after 20 mins.
- **Unconsciousness**
 - An unconscious person is one who is breathing and has a heart beat but does not respond to speech or touch. To maintain a clear airway, the person should be placed on the side, with head tilted back and face downwards, so that fluids drain freely. Keep the person warm (to maintain body heat), away from danger. Call an ambulance.
- **Traffic Accidents**
 - Check for any danger (e.g. power lines, traffic...)
 - Park between the scene and approaching traffic. Light scene with headlights. Switch on hazard lights. Count the injured.
 - Dial 000 or digital mobile 112 and state: Emergency services needed (Ambulance, fire, police...)
 - Location (number, street, suburb, landmarks).
 - Number of injured and nature of emergency.
 - Place people to warn other motorists.
 - If there is no danger, turn off the ignition of the crashed vehicle(s). Assist the injured - **DRSABCD**.



Basic Life Support

For the sick/injured, always remember/commence with **DRSABCD**

D Check for dangers to you, other people and victim. If possible, wear gloves.

R Check victim is conscious by touching and shouting. "Are you OK? Squeeze my hand"

S If no response, call for help. Dial 000 (Digital Mobile 112)

A Clear airway. If foreign matter in mouth, turn victim onto side & use fingers to clear mouth.

B Look and listen for normal breathing - ear near mouth and watch chest/abdomen.

C If YES: Leave on side (see Unconsciousness - next page) If NO: Roll person onto back & give 30 chest compressions (almost 2 per sec./100 per min. approx. 4-5cm deep for child, 5cm+ for adult) then 2 breaths.

D Attach an AED (Automated External Defibrillator) as soon as available & follow the prompts.

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D Defibrillator (AED)

C Start CPR 30 : 2

B Normal Breathing?

A Open Airway

S Send for Help

R Responsive?

D Dangers?

Learn CPR by enrolling in a training course - see back page.
Continue CPR until responsiveness or normal breathing return

Sudden Illnesses

■ **Anaphylaxis** Anaphylaxis is a severe allergic reaction requiring urgent medical aid. Characterised by airway &/or breathing &/or circulation problems usually associated with skin and mucosal changes triggered by foods (e.g. nuts, eggs, seafood), drugs or from venomous stings/bites. Follow their prescribed Plan. If no prescribed Plan, lay victim flat - if breathing is difficult, allow to sit (if able). Prevent further exposure to triggering agent if possible. Administer adrenaline auto-injector into thigh (child under 5yrs 0.15mg, older than 5yrs 0.3mg. Repeat after 5 mins if no response. Call for an ambulance and administer oxygen if available and trained to do so. Follow **DRSABCD** if breathing stops.

■ **Asphyxia/Suffocation from Position &/or Restraint** Obstructed breathing and death can quickly result from a person's position and/or being restrained. Never apply pressure to the back, spine or abdomen. Struggling, body mass &/or medical/substance/mental conditions can quicken death. Warning signs include person saying they can't breathe, gurgling, gasping, sudden passiveness &/or blue or changed facial colouration. Quickly provide a comfortable position. If victim becomes unconscious, call for an ambulance and follow **DRSABCD**.

■ **Asthma** Sit the person comfortably upright. Follow their personal written Asthma plan. If no plan, give 4 to 6 separate puffs of a "reliever" inhaler with spacer if available. Use victim's own inhaler, first aid inhaler or one borrowed from someone else. Wait 4 to 6 minutes. If no improvement, repeat giving 4 to 6 puffs & call for an ambulance. **Thunderstorm Asthma** usually involves pollen. Go indoors for clean, comfortably air conditioned air and follow same response above.

■ **Chest Pain** Treat all acute chest pain as heart attack. Place in comfortable position, loosen tight clothing & assist if victim has prescribed medication for a known heart condition. If pain worsens &/or lasts 10 minutes, call for an ambulance.

■ **Choking** Choking is a frightening experience. Remain calm and follow **DRSABCD**. If unable to cough, give up to 5 separate sharp blows between the shoulder blades. If no improvement, give up to 5 separate chest thrusts and call ambulance. If victim becomes unconscious, follow **DRSABCD**.

■ **Convulsions (Infant)** Convulsions occur in young children up to 5 years and are associated with infection and fever. Follow **DRSABCD**. Remove excess clothing and keep the child exposed until the temperature falls. Fan but do not over cool. **Dial 000 in Australia (or Mobile 112) & follow DRSABCD.**

■ **Diabetes** Diabetes is a pancreas disorder causing blood sugar levels to go too low or too high. Follow person's management plan. If no plan, always treat for low blood sugar - give the conscious person 3 to 6 teaspoons of honey or sugar. If recovery is slow or unconsciousness occurs, call ambulance and follow **DRSABCD**.

Injury Treatments

■ **Bats/Flying Foxes** Bats/flying foxes are known to carry Australian Bat Lyssavirus (ABLV - similar to rabies) and Hendra virus. Do not handle bats. If contact made, immediately and thoroughly wash any wound with soap and water, apply an antiseptic and seek immediate medical attention as a vaccine may be of the utmost importance. If bat saliva contacts eyes, nose or mouth, flush with water & seek immediate medical attention.

■ **Bee, Wasp, Ant, Mosquito & Plant Stings or Tick Bite** For bee sting, scrape sting away fast - avoid squeezing venom sac. Apply a cold compress to help reduce pain and swelling. For tick bite, if no history of tick allergy, immediately remove the tick. If victim has a history of tick allergy, kill the tick and do not attempt to remove it. If victim has a history or any signs of allergy, treat for Anaphylaxis & seek urgent medical aid, particularly for mouth & facial stings. Follow **DRSABCD**

■ **Box, Irukandji & Bluebottle Jellyfish** Follow **DRSABCD** & flood with vinegar for at least 30 seconds. For bluebottle, pick off tentacles whilst rinsing in sea water, then immerse in tolerable hot water for 20mins. If more than a localized single sting &/or victim looks/feels unwell, call Triple Zero 000.

■ **Bruising** Bruising results from bleeding under the skin. Bandage firmly over bruising on limbs with a wide conforming bandage, making sure circulation is not impaired (fingers and toes should continue to have normal colour & temperature). Apply a cold pack for 10 minutes. Use a damp towel between the pack and the skin. Seek medical attention if bruising is extensive or if joint, head or neck injuries involved.

■ **Burns (dry heat) / Scalds (wet heat)** Cool burns and scalds immediately with cold water for up to 20 minutes. Remove jewellery and clothing from affected area if not stuck to skin. Cover loosely with sterile, non-adherent dressing, clean polythene burns sheet or clean cling film. Do not apply any lotions, creams or sprays. Hydrogel (e.g. Burnaid) may be considered only if water not available. For hazardous substance burns, brush off solid particles, remove contaminated clothing and flood area with cold water for at least 20 minutes & do not apply hydrogel or sheet/cling film. Seek urgent medical aid.

■ Drowning / Lightning Strike / Bad Weather

Follow **DRSABCD** and seek urgent rescue & medical aid. Person can be safely touched after lightning strike. Seek safe indoor shelter if bad weather. **NEVER** : ●swim alone, ●hyperventilate, ●ignore the urge to breathe ●play breath-holding/choking games ●stay outside in wet, dusty &/or turbulent/bad weather.

■ Epileptic Seizure

Epileptic seizures range from minor petit mal to grand mal seizures. Protect the person from injury and follow **DRSABCD**. Do not restrict movement or place anything in the person's mouth. After the seizure, place the person on the side, check for injuries and seek medical aid. If the person is **known to have epilepsy**, seek medical aid only if the seizure lasts for more than 10 minutes, or a second one follows.

■ Fainting and Shock

Fainting is caused by low blood pressure in the brain and usually improves when the person is lying down. Follow **DRSABCD** and check for any injury. Raise both feet and suspect other causes unless full recovery is seen within a few minutes. Seek medical aid.

Shock is a loss of effective circulation leading to organ failure caused by trauma or sudden illness. Signs may include collapse, pale sweaty skin, rapid breathing, confusion, bleeding, rapid pulse, vomiting. Control visible bleeding. Call for an ambulance. If unconscious, manage with **DRSABCD**. Give oxygen if available and trained in its use. Maintain body temperature and reassure the victim.

■ Heat Induced Illness - Hyperthermia

Rest the person in a cool place and loosen/remove excessive clothing. Moist skin with moist cloth or atomizer spray and fan. Give water to drink if fully conscious. If skin hot & dry or victim not quickly improving, call for an ambulance and apply wrapped ice packs to neck, groin & armpits if heat stroke.

■ Hyperventilation / Over Breathing

Reassure the person and encourage slow, regular breaths by counting them down until the symptoms subside. Under no circumstances should the victim be asked to re-breathe their waste products using a paper bag.

■ Poisoning

Poisons may enter the body by mouth (swallowed), lungs (inhaled) and skin (absorbed or injected). They may be solid, liquid or gas. Contact the poisons hotline (open 24 hours), stating the substance, the person and time factors.

Australian Poisons Information Centre: Dial 13 11 26. If the person is showing signs of being seriously ill such as vomiting, drowsiness or seizures, call for an ambulance - **dial 000 in Australia (or Mobile 112) & follow DRSABCD.**

■ Stroke

Think and act **FAST** : **F** – Facial weakness, **A** – Arm weakness, **S** – Speech difficulty, **T** – Time to act fast, call for an ambulance as prompt hospital treatment within 3 hours may reduce long-term disability.

■ **Dental Injury** Except for baby teeth, knocked out teeth can be replaced and saved. Ask the victim to suck their tooth clean. Replace it in the socket and hold there for 2 minutes. Mould a piece of aluminium foil over it and 2 teeth on each side. The person must bite onto the foil splint to hold the tooth in place. Alternatively, the tooth or teeth can be placed in the injured person's mouth between the cheek and the gum. Seek immediate dental aid for all tooth injuries.

■ **Eye Injury** If an eye has received a blow, or is bleeding, rest the person, cover the eye and seek medical aid. To remove dirt or chemicals, irrigate the eye with sterile saline solution or water. Seek medical aid if pain or vision problems persist. Do not attempt to remove a foreign body from the coloured part of the eye.

■ **Fractures, Sprains and Strains** Look for symptoms and signs such as pain, swelling, deformity, bruising and/or the inability to move. An ambulance may be needed. Keep the person rested and comfortable. Lower limb fractures can be supported by padding. Seek aid.

■ **Head Injury** Call for an ambulance if any loss of consciousness, at any time, no matter how brief. All head injuries should be assessed by a doctor.

■ **Red-Back Spider Bite** Reassure the person bitten. Apply a cold pack/compress over the bitten area. Seek urgent medical aid especially if a baby or child is bitten.

■ **Snake, Funnel-Web Spider, Blue-Ringed Octopus, Cone Shell, Sea Snake** Symptoms may include headache, double vision, difficulty breathing, nausea, chest pains & numbness. Follow **DRSABCD**. Keep person calm, **still** & call for help. Apply a folded pad over bite, then pressure bandage the **whole limb**, commencing over bitten area & immobilize/splint to localise poisons. Seek urgent medical aid. If possible, supply creature details.

■ **Spinal Injury** If spinal injury is suspected, call for an ambulance. If it is necessary to move the victim from danger, care must be taken to support the injured area and minimize movement of the spine in any direction.