WORKPLACE FIRST AID GUIDE

1 IMPORTANT INFORMATION

All the information contained in the guide has been produced to assist you and your colleagues in your first aid with a trained person arrives. Please read this frequently to equip yourself for any possible emergencies.

Always Remember: Should first aid who is the appointed person or first aider within your work area and if there is a procedure for calling an ambulance.

Occupational Health:

First Aider / Appointed person's extension:

Location of nearest first aid dispenser:

Location of nearest eyewash station:

Other useful numbers:

2 INCIDENT MANAGEMENT

LOOK OUT FOR:

- TRAFFIC
- ELECTRICITY
- FUMES/GASES
- MOVING MACHINERY
- FALLING DEBRIS
- FIRE

When approaching an incident always ensure that this area is safe for you to carry out first aid and that the casualty is safe. Aim to control or neutralise any threats or hazards.

Remember that moving the casualty is a last resort only.

EXAMPLE BUILDING EVACUATION

Action:

1. Find out how many casualties are involved.
2. Discover if anyone present is First Aid trained.
3. Get reinforcements to call the Emergency Services and comfort the casualties.
4. Most important of all, stay calm.

3 GETTING HELP

Dial 999 or the UK 112 or Europe).

Once connected you will be asked which service you require, once you have asked for ambulance you will be connected to Ambulance Control. You will then be asked a series of questions.

BE PREPARED TO:

1. Confirm your telephone number.
2. Accurately describe the incident and the condition of the casualties.
3. Confirm your exact location.
4. Help the emergency services by arranging for a colleague to meet them outside your main gates.

PHONE NOTE Do not hang up at any point of the conversation. The operator will end the call when appropriate.

CALL FOR HELP

If you are alone with the casualty then call for help. If someone responds call them to stay with you whilst you assess the casualty.

Never leave an unconscious casualty who is not breathing. One of you should then wait with the casualty while the other calls the emergency services.

4 RESPONSE

Correctly assessing the casualty's level of response will increase their chances of survival. You must be done rapidly to allow effective treatment to be carried out and will also help in giving the ambulance service accurate information about the casualty.

Gently shake the casualty's shoulders and speak loudly and clearly.

"CAN YOU HEAR ME?"

"ARE YOU ALRIGHT?"

5 AIRWAY

TO OPEN THE AIRWAY

WHEN A CASUALTY IS UNRESPONSIVE

Lift the chin and tilt the head to open the airway. This frees the tongue from the back of the throat.

6 BREATHING

IS THE CASUALTY BREATHING?

Look for movement. Listen for signs of breathing. Is there an airflow?

If casualty is breathing normally

1. Place them in the recovery position.
2. Make sure that there is continuous breathing.
3. Send someone to get help, or if you are alone leave the casualty and go to find help yourself.

If casualty is not breathing

1. If you are alone leave the casualty briefly to call for help then return to them.

Now follow instructions in sections 7 and 8.

7 ADULT BASIC LIFE SUPPORT

8 CHEST COMPRESSIONS

1. Make sure that the casualty is on a solid flat surface.
2. Place the heel of your hand in the centre of the casualty's chest. Place the heel of the other hand on top of that hand then interlock the fingers and ensure that no pressure is ever applied over the casualty's ribs. Do not apply any pressure over upper abdomen or bottom end of the sternum.
3. Compress the chest by a minimum depth of approximately ½ time, 30 times at a rate of approximately 100–120 compressions per minute and give 2 rescue breaths.
4. Repeat above - 30 compressions and 2 rescue breaths.

9 UNCONSCIOUS

RECOVERY POSITION

The casualty should be placed in the recovery position. This allows the tongue to fall forward, keeping the airway clear.

1. Remove the casualty's glasses.
2. Kneel beside the casualty and make sure that their legs are straight.
3. Move the arm nearest to you at right angles to their body, elbow bent with the hand palm uppermost.
4. Bring their far arm across the chest and hold the back of the hand against the casualty's cheek nearest to you.
5. With your other hand (your far leg) pull above the knee and pull it up, keeping the foot on the ground.
6. Keeping the hand pressed against the cheek pull on the far leg to roll the casualty towards you on their side.
7. Adjust the upper leg so that both the hip and knee are bent at right angles.
8. Tilt the head back to make sure the airway remains open.
9. Adjust the hand under the cheek, if necessary, to keep the head tilted.
10. Check breathing regularly.

10 BLEEDING

1. Put on gloves, if available.
2. Sit the casualty down and examine the injury.
3. When dealing with a limb, keep the affected part raised.
4. Apply and secure the dressing.
5. Place on one dressing at a time, up to a maximum of 3. If blood soaks through, but these dressings remove them and apply a new dressing.
6. Be aware that if your casualty has lost a large amount of blood they will possibly be showing signs of shock.
7. Help your casualty lie down, conserve body heat and raise the legs.
8. If any foreign objects are present leave them where they are and dress around them.

11 FRACTURES

1. Make sure that the casualty remains still.
2. Do not try to move the injured part.
3. Treat any bleed (see sound) the injury first.
4. If there is bone protruding from the injury do not touch it. If there is blood then build up the dressings around it rather than over it.
5. The casualty will find his/her own most comfortable position and will not want the injury to be touched.
6. If the casualty cannot keep a stable position for himself or herself you can provide help or stabilise the injury with your hands.
7. Call 999 or 112 in Europe.

SUPPORT THE INJURED ARM

12 BURNS

1. Make sure that the situation presents no danger. If it does, minimise or neutralise the hazard.
2. For a chemical burn wash the affected area for a minimum of 20 minutes with plenty of water, making sure that you do not accidentally wash any of the chemical onto unaffected parts - you must wash outward.
3. Non-chemical burns must be run under cold water for a minimum of 10 - 15 minutes and any non-constricting items such as watches should be removed.
4. Once cooled the burn should be covered with a sterile dressing (non-fluffy) or loosely covered with cling film.
5. Dispose fingers or toes.
6. Refer to medical aid.

DO NOT:

- Prick any large fully dressings on the burn.
- Place any lotions, ointments or creams on the dressing.
- Remove damaged skin or burnt blisters.
- Apply butter, margarine or fats.

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Please note that information outlined in this guide is for reference only and does not replace formal First Aid Training