

What is First Aid?

First aid is the initial care of the injured or sick. It is the care administered by a concerned person as soon as possible after an accident or illness. It is this prompt care and attention prior to the arrival of the ambulance that sometimes means the difference between life and death, or between a full or partial recovery.

Immediate Action

As in most endeavours, the principle to be adopted in first aid is immediate action. If a person is sick or injured, then they need help — and they need it immediately.

It is important that any action taken by the first aid provider is commenced as quickly as possible.

Quick action is necessary to preserve life and limb. A casualty who is not breathing effectively, or is bleeding copiously, requires immediate intervention. If quick effective first aid is provided, then the casualty's has a much better chance of a good recovery.

It should be remembered though that any action undertaken is to be deliberate and panic by the first aid provider and bystanders will not be beneficial to the casualty.

Try to remain calm and think your actions through. A calm and controlled first aider will give everyone confidence that the event is being handled efficiently and effectively.

'MEDIC ALERT'

Some individuals suffer from certain medical conditions that may cause them to present with serious signs and symptoms at any time. As a form of assistance and notification, these people may wear a form of medical identification, usually a special bracelet, or less commonly, a necklace. These devices are commonly referred to as 'Medic Alert' bracelets, but other types are available, such as 'Vial of Life' and 'SOS Talisman'.

They are imprinted with the person's identity, the relevant medical condition, and other details which may include allergies, drugs required, or specialised medical contact. Medical conditions that may be notified vary from specific heart diseases, to diabetes, epilepsy, asthma, and serious allergies.

DRABC!

DRABC is the prime consideration for everyone involved in the care and treatment of casualties. Experienced first aid providers, ambulance crews, nurses and medical specialists, are all-aware of the importance of Danger, Response, Airway, Breathing and Circulation.

DANGER

- To yourself: don't put yourself in danger!
- To others: don't allow bystanders to be exposed to danger!
- To the casualty: remove the danger from the casualty, or the casualty from the danger!

RESPONSE

- Gently 'shake and shout' at the casualty. Do not shake young children or infants.
- Is the casualty alert?
- Is the casualty drowsy or confused?
- Is the casualty unconscious, but reacting?
- Is the casualty unconscious with no reaction?
- If unconscious, place the casualty in the stable side position

AIRWAY

- Is the airway open and clear?
- Is there noisy breathing?
- Are there potential obstructions such as blood?
- If so, open and clear the airway!

BREATHING

- Look to see if the chest rises!
- Listen for the sound of breathing!
- feel, by putting your hand on the lower part of the chest
- if not breathing give 2 effective breaths and commence EAR

CIRCULATION

- Is there a carotid pulse?
- Is it strong?
- Is it regular?
- Is there major blood loss?
- if no pulse present start CPR

If the casualty is conscious, then treat the injuries or illness according to the signs and symptoms. Remain with the casualty and call for assistance. If the casualty is unconscious and breathing spontaneously, leave him or her in the stable side position, and then treat any injuries.

Burns and Scalds

BURNS are caused by contact with flame, hot objects, chemicals, electrocution, radiated heat, frozen surfaces, friction or radiation.

SCALDS are caused by contact with boiling fluids or steam.

The results of either injury are disfigurement, scarring and severe pain. As with most potentially serious injuries, prevention is better than cure.

Burns are classified as either:

- SUPERFICIAL - reddening (like sunburn), outer layer of skin only
- PARTIAL THICKNESS - blistering, damage to deeper layers of skin
- FULL THICKNESS - whitish or blackened areas, damage to all layers of skin, plus underlying structures and tissues

The severity of burns is dependent on certain factors such as; the age of the casualty, the depth of the burns, the part of the body burnt, and the area affected.

Sign and Symptoms:

- red, blistered, white or blackened skin
- pain in superficial and partial thickness burns
- shock
- breathing difficulties
- hoarse voice and/or snoring sound when breathing

Care and Treatment

- DRABC
- Cool only with clean water if possible, and resist using other substances up to 20 minutes for thermal or radiation burns 20-30 minutes for chemical burns 30 minutes for bitumen burns
- Cover with a clean, non-adherent burn dressing (or plastic wrap etc.)
- Remove tight clothing and objects, eg. jewellery
- call 000 for an ambulance
- Treat for shock if the burn is severe.

- Ensure that contaminated clothing is removed unless it is adhering to the burn
- Flush chemicals from the skin, pay special attention to eyes
- DO NOT break blisters
- Ensure that the cooling process does not become excessive and cause shivering.

Electric Shock

The human body is an efficient conductor of electricity. When a casualty receives an electric shock from a household appliance or a power line, the electricity is conducted through the body. A casualty may receive significant burns or the electric shock may interfere with the heart's electrical system. Burns to the casualty may be greater than they appear on the surface.

When attending a casualty exposed to electricity, DANGER is the priority. Be alert for danger to yourself and to other rescuers, and approach the scene with caution.

Domestic voltage

Be alert for danger! It is urgent that the casualty be disconnected from the electrical source, either by:

- Turning off the power supply and disconnecting any plugs from the outlet, and isolating the electricity supply at the main powerboard if possible, or
- Removing the casualty from the electrical source by separation with non conducting materials, eg., wooden stick or board, rope, or blanket.
- Be careful not to touch the casualty's skin before the electrical source is disconnected, and be alert for the presence of water or conducting materials which may be in contact.

Signs and Symptoms

- Difficult, or absent breathing
- Absent, weak or irregular pulse
- Evidence of burns
- Evidence of fractures
- Entrance and exit wound burns
- Collapse and unconsciousness

Treatment

- DRABC
- Call 000 for an ambulance
- Inform electrical authorities if high voltage involved
- If in respiratory arrest - commence EAR
- If in cardiac arrest - commence CPR
- Cool and cover burns with non-adherent dressings
- Reassurance

Bleeding

Bleeding is a loss of blood from the blood vessels. Severe or continued bleeding may lead to collapse and death. Thus, the first aider must aim to control severe bleeding. The total quantity of blood in the human body varies according to size. An adult can lose 500 ml of blood without any harm, but the loss of 300 ml might cause death in an infant

Remember: severe bleeding is serious. The extent of bleeding may be hidden. Act quickly!

Treatment

- DRABC
- Lay casualty down if bleeding is severe
- Apply direct pressure to the wound. Use gloves if available
- Raise and rest the injured part when possible
- Loosen tight clothing and give nothing by mouth
- Seek medical aid urgently if bleeding is severe or persistent.
- Apply direct pressure to the wound with your fingers or hand.
- Encourage the casualty to do this (where practical).

Red back spider

The red back spider is small, normally black with a red stripe on the back. It is found:

- Throughout most parts of Australia
- In dark, unattended spots, e.g. under eaves, in old tyres, in garden sheds.

Prevention

- Clean out habitats and treat the area with a suitable pesticide
- Use gloves when handling old tyres, cleaning out sheds, or carrying out other tasks likely to involve contact with the red back spider.

Symptoms and signs

- A sharp sting may be felt
- Pain at the site of the bite, which then becomes general
- Nausea
- Dizziness and sometimes faintness
- Muscle weakness or spasm
- Sweating, sometimes profuse
- Swelling and localized sweating around the bite
- Rapid pulse.

Treatment

- DRABC
- Reassure the casualty
- Apply a cold pack or compress over the area
- Seek medical aid.

First Aid Review Question

What is First Aid?

Complete the acronym below:

D _____

R _____

A _____

B _____

C _____

List the three priorities with DANGER:

1) _____

2) _____

3) _____

List the three classifications of burns:

• _____

• _____

• _____

Describe on method of disconnecting a casualty from and source of domestic voltage.

List the treatment of severe bleeding:

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

List the treatment of a Red Back spider bite:

- _____
- _____
- _____
- _____