

Module 4

Safety and Legal The Environment



REVIVE²SURVIVE

1300 000 112

Managing an Emergency

Priorities

- Quickly assess the situation
- Ensure the safety of the rescuer, casualty and bystanders (this may mean moving the casualty if safe to do so)
- Send for help – call 000
- Be prepared to commence CPR if needed

General Principles of Management

After ensuring safety of those around, management of the casualty involves:

- Prevention of further harm or injury
- Checking responses of the casualty
- Care of airway and breathing
- Control of bleeding
- Reassurance
- Continued observation



When more than one person requires attention, the care of an unconscious person takes priority!

Managing an Emergency

A rescuer should move a person when needed to:

- Ensure the safety of the rescuer and casualty
- Protect from extreme weather conditions
- Enable evacuation for difficult terrain
- Enable the care of the airway and breathing (e.g. turning an unconscious breathing person into the recovery position or onto their back for to perform CPR)
- Enable the control of severe bleeding



When moving a casualty

- Avoid bending or twisting the casualty neck and back
- Try to have 3 or more people to assist in supporting the neck and back if possible
- A single rescuer may need to drag the casualty
- Ensure Triple 000 has been called

Managing an Emergency

Road Accidents

- Approach with caution and make the scene as safe as possible
- Do not touch vehicle or attempt to rescue casualty if power lines down until declared safe
- Use hazard lights/torches/bystanders to warn oncoming traffic
- Turn off ignition of a crashed vehicle and put hand brake on
- Only remove motorbike helmet from a casualty if necessary to assess and manage breathing or control bleeding
- If an unconscious breathing casualty can be managed from the vehicle do not remove unless there is a threat to life
- If the casualty is unconscious and not breathing normally remove from the vehicle as soon as possible and commence CPR



Managing an Emergency

Electric Shock

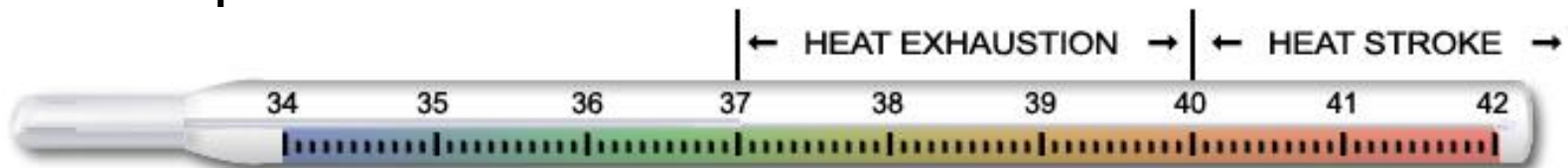
- Turn off electricity supply and if possible unplug the appliance from the power outlet.
- Until the power is off avoid direct skin contact with the casualty or any conducting material.
- If unresponsive and not breathing normally follow DRABC
- Other injuries may require treatment, burns are common and should be managed
- Promptly refer all who have suffered an electric shock for medical assessment



Hyperthermia

The two most common forms of hyperthermia are ***heat exhaustion*** and ***heat stroke***.

- **Heat Exhaustion** - is a warning that the body is getting too hot.
- **Heat Stroke** - can be **LIFE-THREATENING!** A person with heat stroke has a body temperature above 40° C.



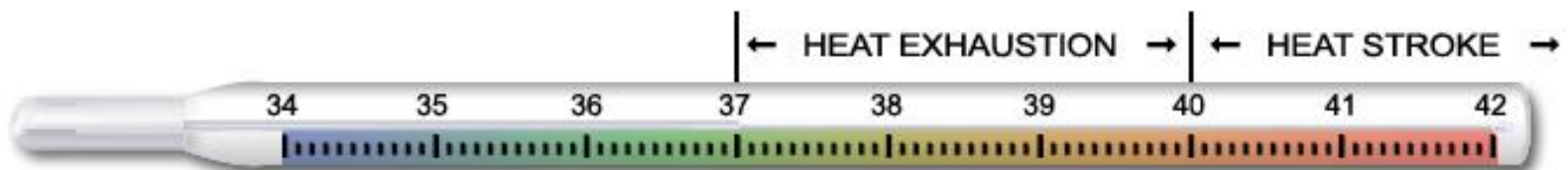
Heat Exhaustion

Signs / Symptoms

- Profuse sweating
- Weak, rapid pulse
- Nausea, vomiting
- Headache, dizziness
- Muscle cramps
- Thirsty

Management

- Rest casualty
- Sips of cool water
- Any available sports drink
- Cool casualty's body
- Seek medical advice



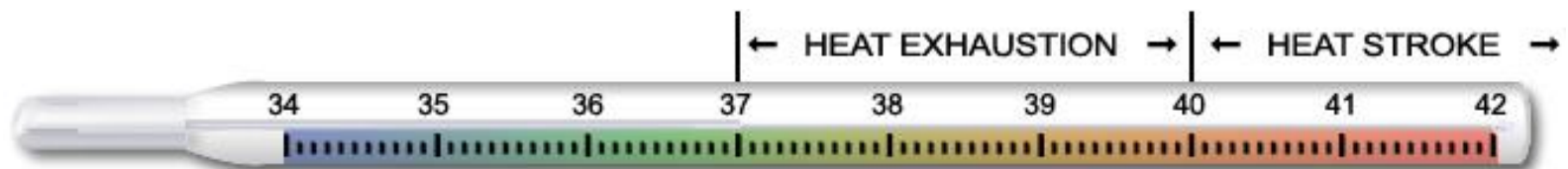
Heat Stroke

Signs / Symptoms

- DRY red hot skin
- Weak, rapid pulse
- Fits / seizures
- Semi / unresponsive

Management

- Call 000
- Move out of sun/heat
- Cool body with iced water soaked towels between armpits and groin
- Fan vigorously to cool down
- Give small sips of water
- Monitor vital signs



Hypothermia

Mild Hypothermia - 35° to 33°

- Maximum shivering
- Pale, cool skin
- Poor coordination
- Slurred speech

Moderate Hypothermia - 33° to 30°

- Shivering may stop
- Muscle stiffness
- Slow pulse and breathing
- Lower level of responsiveness

Severe Hypothermia - Below 30°

- Pupils fixed and dilated
- Slow irregular pulse
- Slow breathing
- Semi/unresponsive



Management of Hypothermia

- If moderate or severe – call 000
- Prevent further heat loss
- Give warm sips of sweet fluids
- Replace wet clothing with dry
- Warm the casualty gradually
- Do not expose to excessive heat



Eye injuries

Embedded object in the eye

- Do not try to remove it
- Place covering over injured eye/s
- Seek medical aid



Foreign body in the eye

- Reassure the casualty
- If small, gently remove with damp tissue
- If unsuccessful, flush eye with clean water/saline
- Pad the eye/eyes
- Seek medical aid



Swimmers Ear

Some of the symptoms of swimmers can be:

- Pain in the ear
- Itchiness
- Odour from ear
- Reduced hearing



Management

- Monitor for pain, if pain persists seek medical help as antibiotics may be required
- Painkillers
- Keep ear dry using earplugs or shower cap when showering

Venomous Bites



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All snakes are potentially dangerous!

What should we do?

- Keep injured person calm, talk to them to slow heart rate.
- Lay them flat and keep them still – very important!

This technique is all about trying to slow the circulation of the venom around the body via the lymphatic system.

- P.I.T.....Pressure immobilisation technique



Funnel web



Snakes



Pressure Immobilisation Bandage



Pressure bandage on the bite site



Pressure bandage the length of the limb from the fingertips



Immobilise the limb and rest the casualty until medical help arrives





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Do not...

- Do not - Use a tourniquet
- Do not - Wash the bite site
- Do not - Elevate the limb
- Do not - Move the casualty
- Do not - Cut and suck the wound
- Do not - Remove the bandages



Insect Bites and Stings

Land/Sea Animal	First Aid
Snakes	Pressure Immobilisation Technique (PIT)
Funnel Web Spider	
Blue Ringed Octopus	
Cone Shell (Tropics)	
Red Back Spider/other	COLD COMPRESS (PIT if allergic to bite/sting)
Bees, wasps, ants	
Box Jelly Fish	VINEGAR – minimum of 30 seconds salt water if vinegar is not available
Blue Bottles	HOT WATER – use cold compress if no pain relief with hot water
Fish stings	

Jellyfish Stings

Tropical Australia

- Remove casualty from the water
- If feeling unwell, call 000 and seek assistance from a lifeguard
- Douse with Vinegar for 30 seconds or sea water if vinegar not available and remove tentacles
- Apply cold pack



Non-Tropical Australia

- Rest and reassure
- Do not rub area
- Remove Stingers
- Place area under hot water for 20 minutes (no hotter than the person can tolerate)
- If no relief, apply cold pack

Contact Poison Information Line 13 11 26 or
Australian Venom Research Unit 1300 760 451

Poisons

Ingestion – Inhalation – Injection - Absorption

Signs and Symptoms

- Pale, clammy skin
- Vomiting, Nausea
- Headache or confusion
- Burns to the mouth
- Seizures
- Puncture marks
- Stomach pain



National Poisons Information Centre

13 11 26

What do they need to know?

- What has happened?
- To whom did it happen?
- How much does the casualty weigh?
- What substance is involved?
- How much was the casualty exposed to?
- When did it happen?
- Does the casualty have any symptoms?
- What treatment has been given already?
- Your telephone number.

