

First aid considerations Safety

- Assess the scene for safety
- Do not approach the person if it is unsafe to do so
- · Look for hidden dangers
- PPE use is recommended, examples include:
 - Gloves
 - · CPR pocket mask / CPR face shield
- · Wash your hands after removing your gloves
 - · 20-seconds with soap and water
 - Use alcohol hand sanitizer when water and soap are not available

Legal

Consent

- If an injured or ill adult is <u>responsive</u>, ask the adult for consent. An adult has the right to refuse medical attention
- Consent is needed from a parent/guardian if a child is injured or ill (Under the age of 18)

Implied Consent

 Assume the person wants your help if they are <u>non-responsive</u>, or under the age of 18 without a parent or guardian present.

Abandonment

- · Do not abandon the person or the scene
- If the scene is unsafe, get to a safe area, and if possible, move the person to a safe area

Good Samaritan Laws

Protect you, the first aid responder, if you

- · Act in good faith
- Do not accept or expect compensation
- · Are prudent in your care
- · Are not negligent in providing care

Calling for Help

- · Call or text 9-1-1 (all counties of Arizona)
- Grab a first aid kit, mini-trauma kit, and AED, if available
- Please follow your workplace emergency action plan

Be Prepared

AED (Automated External Defibrillator)

Using an AED combined with CPR can increase a person's chance of surviving cardiac arrest. Use an AED every time you provide CPR.

AEDs should be located in an open space where many people pass. Look for AEDs when you walk into a public building. Contact our AED specialist or visit our website for the latest FDA-approved AEDs for sale or lease.

A first aid kit is essential for assisting with injuries, be prepared by purchasing or making a first aid kit. Recommended contents for a basic first aid kit are listed on our website **lphealthdirections.com** under our **RESOURCES** tab.

A mini trauma kit is a light and compact pack that includes essential items to help in a medical emergency, including, stop the bleed items; quick clot, and a CAT tourniquet. Mini trauma kits are perfect for the car, cabin, trailer, home, and workplace. Visit our website to purchase the latest products.

Iphealthdirections.com - Click the SHOP tab.

Additional Resources

Poison control center

(800) 222-1222

Animal poison control

(888) 426-4435

LP Health Directions website

lphealthdirections.com

Primary Assessment for a Non-Responsive Person

- · Assess the scene for safety
- If it is not obvious that the person is responsive, check for responsiveness by shouting, and tapping or pinching the person's shoulder

If the person is responsive	If the person is non-responsive
Continue with your primary assessment, for the responsive person, on the next page	Assess the person for breathing, and follow the steps below



If the person is breathing	If the person is not breathing or displaying signs of agonal gasping
 Continue to assess for breathing Scan the person's body for signs of trauma. Look for medical jewelry Consider placing the person in the recovery position, to help maintain and protect their airway. (Your instructor will demonstrate this technique in your 	- Immediately start CPR (CPR skills are listed on the next column, your instructor will demonstrate these skills during the class) - Defibrillate immediately! (Your instructor will discuss the importance of defibrillation, and demonstrate the proper use of a defibrillator)

CPR Guidelines, 2020

Adult (Puberty and above)	Child (Age 1 - puberty)	Infant (Birth - age 1
30 compressions 2 rescue breaths Optional compressions only	30 compressions 2 rescue breaths	30 compressions 2 rescue breaths
Compression depth	Compression depth	Compression depth
- 2" depth - with full chest recoil	1/3 full depth of chestwith full chest recoil	1/3 full depth of chestWith full chest recoil
Compression rate	Compression rate	Compression rate
100 - 120 cpm	100 - 120 cpm	100 - 120 cpm

AED / Defibrillation

The purpose of the AED is to detect and potentially correct an abnormal heart rhythm that causes sudden cardiac arrest (Ventricular fibrillation). Your instructor will demonstrate the proper use of an automated external defibrillator.

Key points

- An AED should be administered quickly if sudden cardiac arrest is suspected. Start and continue CPR until an AED is obtained and ready to administer.
- The chest should be exposed, bare, and dry for proper pad placement

Choking

(Your instructor will demonstrate effective techniques to remove an object from an obstructed airway)

Partial airway obstruction - The person experiences coughing, and difficulty clearing the airway

• Encourage the person to continue coughing, the person will eventually cough object out of the airway

Full airway obstruction - The person choking makes no sounds, and experiences silent coughing. The person may clutch their neck, and blue tissue around the lips may be noticed *Adult*

- The abdominal thrust is the most effective technique
- Back slaps should be considered as an alternative Infant
- 5 back slaps
- · 5 chest thrust

class)

<u>Primary Assessment for a Responsive</u> Person

If an injured or ill person is **responsive**, continue your primary assessment to determine what action to take next.

Scan the area

- Assess for safety
- Look for clues
 - What happened
 - O Who was involved

Scan the person's body

- Look for medical jewelry
- Look for obvious signs of trauma
- If you notice obvious signs of trauma, Call for help and initiate your emergency action plan

Ask the person questions

- Ask if they're taking medication
- Ask about any medical history
- Assess the person's mental status
- If the person is experiencing an altered mental status, immediately call for help and initiate your action plan

Assess the person's breathing

- Look and listen for difficulty in breathing
- Assist with prescribed medication if appropriate
- If the person is experiencing difficulty in breathing, immediately call for help and initiate your action plan

Assess the person's skin/tissue

- The tissue should be pinkish
- The skin should be warm and dry
- An injured or ill person experiencing a change in tissue color or skin temperature may be experiencing shock. If you suspect that the person is experiencing shock, call for help and Initiate your action plan

Assess for pain

- Call for help and initiate your action plan if a person is experiencing
- Debilitating pain
- Pain in the chest
- Pain in the left arm, left shoulder, or jaw
- Or if a pregnant woman experiences pain in the abdomen

First Aid care for a Responsive Person

- · Calm and reassure the person
- · Ensure the person is comfortable and safe
- · Cover the person if they are cold
- · Do not provide anything to eat or drink
- · Stop any bleeding
- Assist with immobilization of limb or spine if the person is injured

If the person you are helping becomes non-responsive, follow the steps for a **non-responsive person** on the first page of your packet.

Injuries

External Bleeding

Stop the bleeding! Blood transports oxygen to your cells, and disruption in blood flow can cause serious harm. (Your instructor will demonstrate proper techniques to control or stop the bleeding)

- Apply direct pressure to the wound to stop or control the bleed
- · Consider using a commercial tourniquet (CAT)
 - As a primary measure, if there is obvious bleeding that you can't control with pressure
 - As a secondary measure, if applying pressure does not control or stop bleeding
- Consider the use of hemostatic dressings
 - If bleeding cannot be controlled by direct pressure, and the injury is located where a tourniquet cannot be applied effectively

Impaled object

- · Do not remove an impaled object
 - · Stabilize the impaled object
 - · Keep affected body parts immobilized
 - Look for any serious bleeding and control it with pressure

Amputation

- · Activate EMS/Grab first aid kit or trauma kit
- Stop the bleed by applying direct pressure, or by using a tourniquet
- · Protect the amputated body part
 - · Cover with gauze or clean dressing
 - · Place in a sealed plastic bag

Internal bleeding

Suspect internal bleeding if a person

- · Was injured in a car crash or hit by a car
- · Fell from a height
- Experiences pain in the chest, or abdomen after an injury
- Experiences symptoms of shock after the injury

Shock

Losing a large amount of blood from a bleeding wound can lead to a condition called shock. Shock can occur when the body's tissues and organs do not get enough blood.

Signs of shock include

- · Feeling weak, faint, or dizzy
- · Feeling nauseous
- · Feeling very thirsty
- · Tissue that becomes pale or grayish
- · Feeling restless, agitated, or confused
- · Skin that is cold, or clammy to the touch

Treatment for shock

· Initiate your action plan

- Help the person lie down on their back, or make sure that the person is in a comfortable position
- · Cover the person with a blanket if cold
- Continue to assess the person's breathing
- Provide nothing to eat or drink

Nose bleed

- Pinch the soft portion of the nose to control the bleed
- Tilt the person's head forward while applying pressure, and hold for at least five minutes
- Do not put tissue or gauze into the nostrils

Head and neck injury

What to do:

- Initiate your action plan
- · Scan the person's body for excessive bleeding
- Try not to move the injured person
- Consider stabilizing and immobilizing the person's head and neck (Your instructor will demonstrate techniques on how to assist with stabilization)

Concussion

A concussion is a type of head injury.

What to look for:

- Headache
- Dizziness
- Nausea
- · Change in mood or personality
- Fatigue
- · Loss of memory
- Confusion
- Blurred vision

Symptoms for children can appear up to 48 hours after injury

What to do:

- · initiate your action plan
- Ensure the person is comfortable and safe
- · Calm and reassure the person
- · Allow the person to sleep
- · Continue to assess for breathing

Limb injury

If the arm is injured, a person may hold the injured arm close to their body

- Do not touch the arm
- Have the person sit down
- Place a cushion under the arm to assist with stabilization and immobilization
- · Stop bleeding if needed
- Assess the person for signs of shock

If the leg is injured

- · Make sure the person does not move the leg
- · Assist with immobilization of the leg
- · Stop bleeding if needed
- Assess the person for signs of shock

Epinephrine is prescribed for people who may experience a severe allergic reaction to something they eat, touch, or smell. *Epinephrine* administration is prescribed medication that is injected into a person's outer thigh using an epinephrine auto-injector. Epinephrine can help with the effects of a severe allergic reaction, and prevent anaphylactic shock. A person will need their prescribed epinephrine when experiencing:

- · Difficulty breathing/shortness of breath
- Noticeable swelling of the upper body
- · Tissue discoloration

(Your instructor will demonstrate the proper use of an epinephrine auto-injector)

A prescribed inhaler contains medication used when a person with asthma suddenly experiences difficulty breathing. A prescribed inhaler should only be used for the person it's prescribed for. Call for help if breathing has not improved within a couple of minutes, after administration of the prescribed inhaler

Consider administering naloxone for an opioid-associated emergency.

If the person is unresponsive and breathing

- Administer naloxone and continue your assessment for breathing
- Immediately place the person in the recovery position

If the person is unresponsive and not breathing

 Immediately start CPR with high-quality chest compressions and effective rescue breaths, and administer naloxone. Your instructor will demonstrate proper naloxone administration.

Over-the-counter medication

Aspirin

Naloxone

can be offered to someone who may be suffering from a heart attack. Aspirin is chewed until it is dissolved, no fluids should be administered to assist

- · One 325 mg, tablet, or
- Two to three 81mg. (baby aspirin) tablets

Sudden Illness

ACS (Acute Coronary Syndrome)/ Heart Attack

What to look for:

- Pain in the chest, jaw, left arm, left shoulder, or between the shoulder blades
- · Nausea, or stomach pain
- · Shortness of breath
- Fatique
- · Cool, clammy skin
- · Excessive sweating

If you suspect a heart attack, immediately initiate your action plan.

What to do:

- Calm and reassure the person
- · Assist with nitroglycerin if prescribed

Emergency Medication

- · Loosen tight clothing
- Offer aspirin if available (please follow your workplace protocol in the administration of over-thecounter medication)

Heart attack symptoms in Women

Women can experience chest pain as a symptom of heart attack, but women tend to experience other symptoms, such as feeling lightheaded, fatigued, pain in the upper back, nausea, and shortness of breath. For more information visit: heart.org

Seizure

What to do during the seizure

- Do not move the person
- Move items away from the person to prevent injury to the body
- · Do not restrain the person
- Consider log rolling the person to their side if their airway is compromised
- · Do not place anything into the person's mouth
- Document the time during the seizure

What to do after the seizure

- Immediately place the person in the side-laying recovery position
- Calm and reassure the person during and after the seizure
- · Consider covering the person

When to call for help

- The person has no history of seizures or you're not sure
- · The seizure lasts more than five minutes
- · The person experiences multiple seizures
- An injury occurs during the seizure
- The person is pregnant

For more information on seizures visit

epilepsy.com

Fainting

Fainting is a loss of consciousness caused by a quick drop in blood pressure, resulting in temporary blood flow loss to the brain. Fainting is temporary and symptoms should pass quickly.

What to do

- · Have the person sit or lie down
- Instruct the person to cross, and tense their legs, and make a fist with both hands to increase blood pressure. This technique can prevent another fainting episode.

Call for help

- · If the person does not wake up
- · Continues to experience fainting episodes

Stroke

A stroke occurs when the blood supply to the brain is interrupted by a clot or a weak artery that bursts. Damage to brain tissue can occur quickly. Here is a

simple stroke assessment that may help with early detection.

FAST

F - Face droop

Look for face droop on one side of the face

A-Arm weakness

Look for arm weakness or arm drift

S - Speech

Look for slurred speech or changes in speech pattern ${\bf T}$ - Time

Time to call 9-1-1 and document the time when symptoms appeared. Getting the person to the hospital as soon as possible can decrease the chance of greater damage to the brain.

For more information, visit stroke.org

Heat-related illness

	What to look for	What to do
Heat Exhaustion	 Heavy sweating Flushed, cool, clammy skin Headache Dizziness Fatigue / feeling weak Nausea / vomiting 	 Get the person into a cool area Fan the person Provide plenty of fluids that contain electrolytes and potassium, hot, pale discolored skin
Extreme Heat Exhaustion	 Loss of ability to sweat Altered mental status Rapid, shallow breathing Loss of consciousness 	 Activate EMS Get the person into a cool area Soak the person's clothing in water Moisten exposed skin Place ice packs at the pressure points If possible, place the person in a body of cold water up to their neck

Prevention of heat-related illness is important. Do not stay in the heat for a long period. Hydrate before, during, and after exposure to heat.

Hypoglycemia

Diabetes is a disease in which the body cannot effectively use sugar for energy. Hypoglycemia, low blood sugar, is a diabetic condition that can rapidly become life-threatening.

What to look for:

- Shakiness
- Irritability
- · Extreme sweating
- Fatique
- Extreme hunger
- Extreme thirst
- The skin may become pale, cool, and sweaty What to do:
- · Provide 15 to 20 grams of oral glucose
- Juice, non-diet cola, hard candy, soft candy Call for help and initiate your emergency action plan if:
- · The person has lost the ability to eat or drink
- The person loses consciousness
- If the person is unconscious, breathing, and laying on their back. Place the person in the side-lying recovery position to help maintain and protect their airway

Insulin is not considered an emergency medication and should not be used by a first aid provider. For more information, visit:

diabetes.org

First aid scenarios questions

A 5-year-old child is suffering from a severe allergic reaction and experiencing signs of anaphylactic shock. Epinephrine has been administered into her outer thigh with the use of her epi auto-injector. EMS has been activated and will arrive in 6 minutes. Before help arrives, the child loses consciousness and begins gasping for air. What action should you take next as a first-aid provider before help arrives? (Circle all answers that apply)

- **A.** Place the child in the side-lying recovery position to help maintain and protect their airway
- **B.** Wait for help to arrive, gasping should be sufficient for breathing
- C. Administer the second epi auto-injector into the opposite thigh
- **D.** Immediately start CPR with effective chest compressions and an emphasis on rescue breathing

A 65-year-old adult suddenly collapses at an event. He is non-responsive and gasping for air. EMS has been activated and will arrive in 7 minutes. You decide to start CPR, but PPE is unavailable and you are uncomfortable with providing mouth-to-mouth rescue breathing. What action should you take?

A. Do not provide CPR and wait for help to arrive

- **B.** Provide compressions only until someone takes over, or paramedics take over
- C. Wait for a defibrillator to arrive and focus on defibrillation
- **D.** Panic and pass out because it's easy to do

Your friend is a known diabetic and experiencing symptoms of hypoglycemia. You consider providing him with a can of non-diet cola to sip. Your friend is now having difficulty talking and is confused. What action should you take next?

- **A.** Slap your friend's face to keep them alert
- B. Force your friend to drink the cola
- C. Inject your friend with their prescribed insulin
- **D.** Activate EMS and wait for help to arrive. Do not give anything to eat or drink

A 7-month-old infant is eating and suddenly begins to cough. The infant is unable to make any noise shortly after. You pick up the infant and begin shouting for help. You have determined that the infant is responsive and choking with severe airway obstruction. How do you relieve the obstruction?

- A. Begin with chest compressions
- B. Give 5 sets of back slaps and 5 chest thrusts
- C. Encourage the infant to cough
- D. Give abdominal thrusts

The choking infant becomes unresponsive, Which action do you perform to relieve choking in an unresponsive infant?

- **A.** Perform CPR, and look in the mouth for the obstructing object before you give each breath
- B. Give 5 sets of back slaps and 5 chest thrusts
- **C.** Attempt a blind finger sweep when giving breaths to remove the obstructing object
- D. Give abdominal thrusts