

<p><b>1. DANGER</b></p> <p>Assess the situation. Are there any dangers?</p> <p><b>GLOVES</b></p> <p><b>DEAL WITH CATASTROPHIC BLEEDING FIRST</b></p> <p>Apply tourniquet Pack wound Press hard</p> <p> </p>	<p><b>2. RESPONSE</b></p> <p>Assess the casualty. Does the casualty respond?</p> <p>A – Alert V – Voice P – Pain U – Unresponsive</p> <p> </p>	<p><b>3. AIRWAYS</b></p> <p><b>Shout/phone for help 999 or 112</b></p> <p>Open the airway</p> <p>Tilt their head back so their mouth opens</p> <p>Lift and hold the chin to keep the airway open</p> <p></p>	<p><b>4. BREATHING</b></p> <p>Is the casualty breathing normally?</p> <p>Place your cheek just above the casualty's mouth and nose</p> <p>Listen, look, and feel for 10 seconds</p> <p> </p>	<p><b>5. CIRCULATION / CPR</b></p> <p>Perform CPR.</p> <p>30 x chest compressions 100-120 per minute</p> <p>2 x rescue breaths</p> <p>Repeat until:</p> <ol style="list-style-type: none"> <li>Professional help takes over</li> <li>They wake up, move, open eyes and breathe</li> <li>You become exhausted</li> </ol>
<p>Think safety first. Deal with any dangers. When safe, go to step 2.</p>	<p style="text-align: center;"><u>ROLL TO ¾ PRONE POSITION</u></p> <p><b>SECONDARY SURVEY (Head to Toe):</b></p> <ol style="list-style-type: none"> <li>Run hands over scalp looking for bleeding, swelling or indentations. Try not to move their head or neck.</li> <li>Look into each ear for blood, fluid or objects.</li> <li>Open their eyes and check their pupils for size and reaction to light. The pupils should be an equal and normal size and react quickly.</li> <li>Check their nose for blood, fluid or objects.</li> <li>Check the rate and depth of their breathing. Note any unusual odour on their breath.</li> <li>Check their mouth for anything that may block their airway. Do not remove dentures unless they are loose. Check for wounds.</li> <li>Look at their face for wounds or irregularities to the natural lines.</li> <li>Note the colour and temperature of their skin.</li> <li>Loosen clothing around their neck. Look for wounds or swelling to their neck tissues.</li> <li>Check for a medic-alert talisman, which is usually worn around the neck or wrist. <b>CHECK BREATHING</b></li> <li>Move your hands down their chest to check for swellings, irregularities or wounds. If the casualty is responsive, ask them to take a breath to assess the chest for equal movements and to listen for unusual lung sounds.</li> <li>Check the collar bones for deformities. <b>CHECK BREATHING</b></li> <li>Check each arm in turn for wounds or irregularities. If the casualty is responsive, ask them to bend and straighten their fingers and elbows if it doesn't cause pain.</li> <li>Check each hand and finger for injury. <b>CHECK BREATHING</b></li> <li>If there is a problem with movement or loss of feeling in their arms, do not examine their spine. If there is not, place your hands under the hollow of their back to check for swelling, tenderness or irregularity.</li> <li>Look at their abdomen for wounds or bruising, then place a hand on the casualty's abdomen. Press down gently, looking for tenderness or rigidity.</li> <li>Note any signs of incontinence or bleeding from the genital or anal areas. <b>CHECK BREATHING</b></li> <li>Examine each leg in turn for wounds and swelling. If the casualty is responsive, ask them to move each joint in turn.</li> <li>Check each foot and ankle for swelling, irregularity and movement. <b>CHECK BREATHING</b></li> </ol> <p>Treat any problems. Note any abnormalities: Deformities, Open Wounds, Tenderness, Swelling</p>			

<p align="center"><b>ALLERGIC REACTIONS</b></p> <p>Recognition: Anxiety. Red, blotchy skin eruptions, rash. Swelling of the tongue and throat. Impaired breathing</p> <ol style="list-style-type: none"> <li>Dial 999 or 112</li> <li>Check whether the casualty has the necessary medication. If they do, help them use it.</li> <li>If the casualty is responsive, sit them in a position that helps them breathe.</li> <li>If the casualty is unresponsive, open their airway and check their breathing. If they are breathing, place them in the recovery position. If they are not, perform CPR.</li> <li>Be aware of the possibility of shock.</li> </ol>	<p align="center"><b>ANIMAL BITES</b></p> <ol style="list-style-type: none"> <li>Minimise the risk of infection by washing the bite wound thoroughly with soap and water.</li> <li>Raise and support the wound and pat dry with clean gauze swabs.</li> <li>Cover the wound with a sterile dressing.</li> <li>Take or send the casualty to hospital if the wound is large or deep or you suspect rabies.</li> </ol>	<p align="center"><b>ASTHMA</b></p> <p>Recognition: Difficulty in breathing and/or talking. Wheezing. Distress and anxiety. Coughing. Grey-blue skin. Exhaustion. Becomes unresponsive and stops breathing.</p> <ol style="list-style-type: none"> <li>Keep clam and reassure the casualty. Get them to take a dose of their inhaler, using a spacer if they have one.</li> <li>Let the casualty find a position that they find comfortable. Do not let them lay down.</li> <li>If attack isn't eased within a few minutes of using the inhaler, take one or two more puffs every two minutes until they have had 10 puffs.</li> <li>Dial 999 or 112 if the casualty's conditions get worse or their inhaler has no effect, or the casualty becomes exhausted or finds talking difficult.</li> </ol>	<p align="center"><b>BLEEDING – MINOR</b></p> <ol style="list-style-type: none"> <li>If it is dirty, clean the wound under running water or with an alcoholic-free wipe. Pat the wound dry using sterile materials.</li> <li>Cover the wound completely with sterile material, such as a gauze square or dressing.</li> <li>If possible, elevate and support the injured area above heart level.</li> <li>Clean the surrounding area, remove the wound covering and apply a sterile adhesive dressing.</li> <li>Advise the casualty to see their own doctor if there is a special risk of infection.</li> </ol>	<p align="center"><b>BLEEDING – SEVERE</b></p> <ol style="list-style-type: none"> <li>Control the bleeding by applying direct pressure to the wound.</li> <li>Dial 999 or 112.</li> <li>Apply an appropriate dressing to control the bleeding and minimise the risk of infection. It should not be so tight that it restricts the casualty's circulation.</li> <li>Treat for shock.</li> <li>If blood comes through the dressing, apply another dressing on top. If the blood seeps through these, remove both dressings and reapply a new sterile dressing using direct pressure to the wound.</li> </ol>
<p align="center"><b>BREAKS / FRACTURES</b></p> <p>Recognition: Pain. Swelling. Unnatural range of movement. Immobility. Grating noise or feeling. Deformity. Loss of strength. Shock. Twisting, shortening or bending of limb.</p> <ol style="list-style-type: none"> <li>If open: Cover the wound with a sterile dressing. Control the bleeding without pressing on any protruding bones.</li> <li>Support the injured limb.</li> <li>Immobilise the affected part.</li> <li>Dial 999 or 112</li> <li>Treat for shock</li> </ol>	<p align="center"><b>BURNS</b></p> <ol style="list-style-type: none"> <li>Do not touch the burned area.</li> <li>Leave in place any clothing stuck to the burn unless it is contaminated with chemicals.</li> <li>Leave any blisters intact.</li> <li>Hold the burn under cold running water for 10 minutes, or until pain eases.</li> <li>Remove any jewellery or other constrictions.</li> <li>Cover with a clean plastic bag, kitchen film or a sterile dressing.</li> </ol>	<p align="center"><b>CHOKING</b></p> <p>Recognition: Unable to cough or speak. Difficulty or absence of breathing. Grasping at the neck or throat. Pointing to the mouth or throat.</p> <ol style="list-style-type: none"> <li>Ask the casualty, "Are you choking?"</li> <li>Encourage the casualty to cough.</li> <li>If they cannot clear the object themselves, or cannot cough or breathe, support them with one hand while leaning them forwards. Give up to 5 back blows between their shoulder blades.</li> <li>Give up to 5 abdominal thrusts.</li> </ol>	<p align="center"><b>COLD</b></p> <p>Recognition: Shivering. Cold, pale, dry skin. Irrational or uncharacteristic behaviour. Disorientation. Lethargy or impaired response.</p> <ol style="list-style-type: none"> <li>Move the casualty to a sheltered place.</li> <li>Remove wet clothing. Provide them with dry clothing or blankets and cover their head.</li> <li>Put them in a dry sleeping bag / cover them in blankets or newspaper</li> <li>Dial 999 or 112.</li> <li>Give them warm drinks and high energy foods.</li> </ol>	<p align="center"><b>HEAD INJURY / CONCUSSION</b></p> <ol style="list-style-type: none"> <li>Help the casualty to sit down in a comfortable position.</li> <li>Apply a cold compress to their head.</li> <li>Monitor breathing and level of response regularly.</li> <li>When they have recovered ask responsible adult to look after them.</li> <li>Seek medical help if any of the following apply: worsening headache. Difficulty in speaking or walking. Vomiting. Double vision. Seizure. Previous brain injury. Taking anti-clotting medication. Intoxicated.</li> </ol>
<p align="center"><b>HEAT</b></p> <p>Early Recognition: Headache. Dizziness. Confusion. Loss of appetite. Nausea. Pale, clammy skin and sweating. Muscle cramps. Pulse and breathing rapid &amp; weakening.</p> <ol style="list-style-type: none"> <li>Help casualty to cool place.</li> <li>Lay the casualty down.</li> <li>Raise and support legs.</li> <li>Encourage them to drink plenty of water. If available, rehydration salts and an isotonic sports drink.</li> </ol> <p>Serious Recognition: Dry skin that is hot and flushed. Restlessness. Strong, bounding pulse. High body temperature.</p> <ol style="list-style-type: none"> <li>Dial 999 or 112</li> <li>Wrap in a cold, wet sheet/clothing.</li> <li>When temperature normal, wrap in a dry sheet.</li> </ol>	<p align="center"><b>INSECT STINGS</b></p> <p>Recognition: Site of the sting is painful. Redness and swelling of the skin around the sting.</p> <ol style="list-style-type: none"> <li>Reassure the casualty. If the sting is visible, brush or scrape it off sideways with your fingernail. Do not use tweezers.</li> <li>Raise the affected part and apply a cold compress to minimise swelling.</li> <li>Keep the compress in place for at least 10 minutes.</li> <li>If pain and swelling persist tell the casualty to seek medical advice.</li> <li>Monitor vital signs and watch for signs of an allergic reaction.</li> </ol>	<p align="center"><b>SHOCK</b></p> <p>Recognition: Rapid pulse. Pale, cold, clammy skin. Sweating. Grey-blue skin. Weakness and dizziness. Nausea and vomiting.</p> <ol style="list-style-type: none"> <li>Treat any possible causes of shock first, like serious burns or bleeding.</li> <li>Lay the casualty down on a blanket. Constantly reassure them.</li> <li>Raise and support their legs to improve blood supply. Do not raise an injured leg.</li> <li>Dial 999 or 112.</li> <li>Loosen tight clothing at the neck, chest and waist.</li> <li>Keep the casualty warm and reassure them. Do not let them eat or drink.</li> </ol>	<p align="center"><b>SPRAINS &amp; STRAINS</b></p> <p>Recognition: Difficulty moving the affected part. Severe pain and tenderness. Distortion. Swelling. Bruising.</p> <ol style="list-style-type: none"> <li>Rest the injured part</li> <li>Ice pack or cold compress for 10 minutes</li> <li>Comfortable support should be applied</li> <li>Elevate the injury, if possible. Advise the casualty to get medical advice, if necessary</li> </ol>	<p align="center"><b>OBSERVATIONS</b></p> <p>Monitor the casualty regularly. If possible, record the results so they can be handed over to the emergency services; in particular, note any changes.</p> <p>Breathing: Check the casualty's breathing rate and listen for breathing difficulties or unusual noises. Adult rate: 12-16 breaths per minute.</p> <p>Check their pulse Check their pupils Check the colour of their skin</p>