



MAFES Dawg Tracks

July 15, 2013



Basic First
Aid I



No matter how much time we spend on safety meetings, talking about staying safe, newsletters, and meetings, it is virtually impossible to work without an unforeseen accident or incident happening. In many instances, when one of these unplanned or unforeseen accidents or incidents happen, if we can administer first aid and CPR it gives the victim a better chance to decrease the degree of an injury or possibly save a death.

RESCUE BREATHING for an ADULT- If the victim is unconscious, perform rescue breathing. If their heart has stopped beating, start Cardiopulmonary Resuscitation (CPR). When there is a doubt whether they need assistance or not, arrange immediately to start CPR.

When breathing stops, and the lips, tongue and fingernails turn blue, the person needs immediate help. Again, if there is any doubt in your mind, tell the victim that you know CPR and can help them. Delaying rescue breathing if the victim needs it may cost the victim their life. Start immediately! Seconds count!

10 STEPS TO ASSIST AN ADULT WHO HAS STOPPED BREATHING-

- ✓ Does the person respond? Tap or gently shake them and ask "Are you okay?"
- ✓ Look around to see that the area is clear of obstacles that could cause further harm.
- ✓ Ask an individual to call 9-1-1 or you call, if there is no one else around.
- ✓ Get the victim on their back, very carefully- if they aren't in this position already.
- ✓ Tilt their head back and hold under the chin to open their airway. Check for any obstruction in the mouth that might need to be cleared.
- ✓ Check for a pulse in the side of the neck for approximately 5-10 seconds.
- ✓ If no pulse, give 2 full breaths (with head tilted and fingers pinching the nostrils to keep them closed).
- ✓ With one hand flat on top of the other and positioned at the base of the sternum, do 30 repetitions of hand depressions and look at the abdominal region for breathing.
- ✓ Repeat 2 full breaths and chest depressions until the victim regains the ability to breathe on their own or until the ambulance and the EMTs arrive (Emergency Medical Technicians).

Remember, if you need to clean their mouth, use a "log roll" to turn the victim on their side and also, if you need to go for help, move the arm in a "v" and the top leg in a "v" for use as a kick stand. The victim can remain in this position for about 30 minutes (long enough for you to get help). For infants and small children, follow the first 4 steps and on the fifth step, cover the child's mouth and nose and give 2 small breaths. Check for a pulse beat and call 9-1-1.

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MAFES/MSU-ES (662) 566-2201 2/11/2013
Excerpts: medicfirstaid.com
www.redcross.com

SHOCK-

Shock usually accompanies severe injuries or emotional stress. Signs of shock include cold and clammy skin, pale face, chills, confusion, frequent nausea or vomiting, and shallow breathing. Until emergency help arrives, have the victim lie down with their feet and legs elevated. Keep the victim covered to prevent chills or loss of body heat. If the victim is able to swallow or doesn't have an abdominal injury, give them non-alcoholic fluids.

BLEEDING-

Until emergency help arrives, try to control the bleeding when possible:

- Put on rubber or latex gloves. (If gloves aren't available, use a clean plastic bag to cover your hands).
- Control bleeding with hands or fingers at the nearest pressure point. Place a clean thick pad or bandage (if available) on the wound and apply pressure. If white cloth isn't available, use anything that is available and clean, but do not use paper products.
- If there are no apparent broken bones, raise the wounded part above the body to slow the bleeding and possibly avoid shock.
- Use pressure as far as possible to control bleeding. You should only apply a tourniquet as a last resort. The possibility of crushing tissue, damaging nerves, and blood vessels can cause permanent damage.
- Get the victim medical help as quickly as possible.

BURNS AND SCALDS-

Until medical help arrives:

- Immerse the burned area in tap or cool water, or apply cool, moist towels. (Refrain from using ice as it might do more damage to the affected area).
- Continue this pattern until help arrives. (Avoid bursting any blisters). Do not use ointments, powders, or greases.
- For more severe burns, keep the victim quiet, and treat them for shock.
- If any clothing is stuck to the body or body parts, remove it slowly and carefully.
- Chemical burns – Flush the area with plenty of water and keep the exposed area covered with a clean cloth.
- Give the victim plenty of water or non-alcoholic fluids, assuming that they can swallow.
- Get the victim medical attention as quickly as possible.

Other factors involved in first aid shall be discussed in the next weekly issue. Any of the items discussed above could occur at one of our facilities. Obviously, we don't anticipate this happening and hope it never does, but if these practices are put into use they will be a great help in mitigating an incident, if one should arise.

SAFETY IS THE LIGHT

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LET IT SHINE!!