

FIRST AID SUBJECTS FOR LEADERS

(All information taken from the NHS website)

1. The Breathing Casualty

If someone is injured, you should:

- first check that you and the injured person aren't in any danger, and, if possible, make the situation safe
- if necessary, dial 112 for an ambulance when it's safe to do so
- carry out basic first aid

Assessing an injured person

The 3 priorities when dealing with a casualty are commonly referred to as ABC, which stands for:

- Airway
- Breathing
- Circulation

Airway

If the person appears unresponsive, ask them loudly if they're OK and if they can open their eyes.

If they respond, you can leave them in the position they're in until help arrives.

While you wait, keep checking their breathing, pulse and level of response:

- Are they alert?
- Do they respond to your voice?
- Is there no response to any stimulus (are they unconscious)?

If there's no response, leave the person in the position they're in and open their airway.

If this is not possible in the position they're in, gently lay them on their back and then try to open their airway.

To open the airway, place 1 hand on the person's forehead and gently tilt their head back, lifting the tip of the chin using 2 fingers. This moves the tongue away from the back of the throat.

Don't push on the floor of the mouth, as this will push the tongue upwards and obstruct the airway.

If you think the person may have a spinal injury, place your hands on either side of their head and use your fingertips to gently lift the angle of the jaw forward and upwards, without moving the head, to open the airway.

Take care not to move the person's neck. But opening the airway takes priority over a neck injury. This is known as the jaw thrust technique.

Breathing

To check if a person is still breathing:

- look to see if their chest is rising and falling
- listen over their mouth and nose for breathing sounds
- feel their breath against your cheek for 10 seconds

If they're breathing normally, place them in the [recovery position](#) so their airway remains clear of obstructions, and continue to monitor normal breathing.

Gasping or irregular breathing is not normal breathing.

If the person isn't breathing or is not breathing normally, call 112 for an ambulance and then begin [CPR](#).

Circulation

If the person isn't breathing normally, you must start chest compressions immediately.

Agonal breathing is common in the first few minutes after a sudden cardiac arrest (when the heart stops beating).

Agonal breathing is sudden, irregular gasps of breath. This shouldn't be mistaken for normal breathing and CPR should be given straight away.

If the person isn't breathing, call 112 for an ambulance and then begin [CPR](#).

2. The Breathing and Unconscious Casualty

- If someone is unconscious but breathing, and has no other injuries that would stop them being moved, place them in the recovery position until help arrives.
- Keep them under observation to ensure they continue to breathe normally.

The recovery position. Show video <https://www.nhs.uk/conditions/first-aid/recovery-position/>

3. If someone is unconscious and not breathing

If someone is not breathing normally, call 112 and start cardiopulmonary resuscitation (CPR) straight away.

Show video Vinny Jones Heart foundation advert.

4 Anaphylaxis

Symptoms of anaphylaxis

Anaphylaxis usually develops suddenly and gets worse very quickly.

The symptoms include:

- feeling lightheaded or faint
- breathing difficulties – such as fast, shallow breathing
- wheezing
- a fast heartbeat
- clammy skin
- confusion and anxiety
- collapsing or losing consciousness

What to do if someone has anaphylaxis

Anaphylaxis is a medical emergency. It can be very serious if not treated quickly.

If someone has symptoms of anaphylaxis:

1. **Use an adrenaline auto-injector if the person has one** – but make sure you know how to use it correctly first.
2. **Call 112 for an ambulance immediately (even if they start to feel better)** – mention that you think the person has anaphylaxis.
3. **Remove any trigger if possible** – for example, carefully remove any stinger stuck in the skin.
4. **Lie the person down and raise their legs** – unless they're having breathing difficulties and need to sit up to help them breathe. If they're pregnant, lie them down on their left side.
5. **Give another injection after 5 minutes** if the symptoms do not improve and a second auto-injector is available.

If you're having an anaphylactic reaction, you can follow these steps yourself if you feel able to.

Triggers of anaphylaxis

Anaphylaxis is the result of the immune system, the body's natural defence system, overreacting to a trigger.

This is often something you're allergic to, but not always.

Common anaphylaxis triggers include:

- foods – including nuts, milk, fish, shellfish, eggs and some fruits
- medicines – including some antibiotics and non-steroidal anti-inflammatory drugs (NSAIDs) like aspirin
- insect stings – particularly wasp and bee stings
- general anaesthetic
- contrast agents – dyes used in some medical tests to help certain areas of your body show up better on scans
- latex – a type of rubber found in some rubber gloves and condoms

In some cases, there's no obvious trigger. This is known as idiopathic anaphylaxis.

5. Severe Bleeding

If someone is bleeding heavily, the main aim is to prevent further blood loss and minimise the effects of shock.

First, dial 112 and ask for an ambulance as soon as possible.

If you have disposable gloves, use them to reduce the risk of any infection being passed on.

Check that there's nothing embedded in the wound. If there is, take care not to press down on the object.

Instead, press firmly on either side of the object and build up padding around it before bandaging to avoid putting pressure on the object itself.

Do not try to remove it because it may be helping to slow down the bleeding.

If nothing is embedded:

Apply and maintain pressure to the wound with your gloved hand, using a clean pad or dressing if possible. Continue to apply pressure until the bleeding stops.

Use a clean dressing or any clean, soft material to bandage the wound firmly.

If bleeding continues through the pad, apply pressure to the wound until the bleeding stops, and then apply another pad over the top and bandage it in place. Do not remove the original pad or dressing, but continue to check that the bleeding has stopped.

Always seek medical help for bleeding, unless it's minor.

6. Fractures

It can be difficult to tell if a person has a broken bone or a joint, as opposed to a simple muscular injury. If you're in any doubt, treat the injury as a broken bone.

If the person is unconscious or is bleeding heavily, these must be dealt with first by controlling the bleeding with direct pressure and performing CPR. See the section on bleeding heavily above.

If the person is conscious, prevent any further pain or damage by keeping the fracture as still as possible until you get them safely to hospital.

Once you have done this, decide whether the best way to get them to hospital is by ambulance or car.

If the pain isn't too severe, you could transport them to hospital by car. Get someone else to drive if possible so you can care for the person who is injured during the trip.

But call 112 if:

- they're in a lot of pain and in need of strong painkilling medication – call an ambulance and do not move them

- it's obvious they have a broken leg – do not move them, but keep them in the position you found them in and call an ambulance
- you suspect they have injured or broken their back – call an ambulance and do not move them

Do not give the person who is injured anything to eat or drink, as they may need an anaesthetic (numbing medication) when they reach hospital.

Broken Ankle.

You should:

- raise your ankle if possible
- If not in the mountains: gently hold an ice pack (or a bag of frozen peas) wrapped in a towel on your ankle for 15 to 20 minutes every 2 to 3 hours
- stop any bleeding – put pressure on the wound using a clean cloth or dressing
- wrap your ankle loosely in a bandage to help support it (if your ankle is not at an odd angle)
- remove any jewellery on your ankle or toes
- use painkillers such as paracetamol or ibuprofen gel (or ibuprofen tablets if needed)
- not eat or drink anything in case you need surgery
- not move or put weight on your ankle if possible