

7. SPINAL INJURIES

Spinal injuries are serious and must be treated with extreme care to maintain paralysis. Signs of spinal injury may be pain at or below site of injury or loss of or altered sensation such as tingling in feet or hands or loss/impaired movement below site of injury.

CALL 000 (111 FOR NZ) FOR AMBULANCE

IF CONSCIOUS

- Reassure casualty help is on the way
- Support casualty's head and neck at all times.

IF UNCONSCIOUS (UNRESPONSIVE)

- Turn casualty onto their side in the Recovery Position supporting the neck and head if possible.
- Follow **1. Unconscious (Unresponsive)** procedure (DRSABCD) in this pamphlet.
- A clear and open airway always takes priority over any possible injuries, including a spinal injury.

8. SNAKE AND SPIDER BITE

Snake, Funnel Web, Mouse Spider, Blue-Ringed Octopus and Cone Shell.

- 1. Calm the casualty** and put at total rest. This will slow down the absorption of venom and reduce the effects of shock.
- 2. Check breathing and circulation**
If casualty unconscious, follow **1. Unconscious (Unresponsive)** procedure (DRSABCD) in this pamphlet.
- 3. Call 000 for an Ambulance.**
- 4. Apply pressure immobilisation** bandage such as crepe or conforming roller bandage around the bite site firmly. The apply a firm crepe or roller bandage over the whole limb starting at the toes or finger tips. Bandage needs to be firm as for a sprain but not too tight.
- 5. Immobilise the limb** using a splint. Use bandage to hold in place. Keep limb level with rest of body. Check toes/fingers for circulation.

DO NOT remove bandage or splint once applied.

DO NOT allow casualty to move. Bring help to the casualty.

REDBACK SPIDER BITE

- Apply wrapped ice pack to bitten area.
- Raise limb to limit swelling.
- **SEEK MEDICAL HELP QUICKLY**

9. SPRAINS AND STRAINS

- **Calm and rest** the casualty
- **Firmly apply a supporting bandage** (crepe/compression/elastic bandage)
- **Apply an icepack/cold compress** wrapped in a cloth and elevate injured part.
- **SEEK MEDICAL HELP QUICKLY**

10. EMERGENCY PHONE NUMBERS

AUSTRALIA

AMBULANCE,
FIRE BRIGADE, POLICE

000

POISONS INFORMATION

13 11 26

NEW ZEALAND

AMBULANCE,
FIRE BRIGADE, POLICE

111

POISONS CENTRE

0800 764 766

Site Emergency: _____

Doctor: _____

Hospital: _____

11. NOTES

FastAid

112 Old Bathurst Road
Emu Plains NSW 2750 AU
Code: FFLB001



Approved by WorkCover NSW, Approval No. Po520

First Aiders Name: _____

First Aiders Phone: _____

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1. UNCONSCIOUS (UNRESPONSIVE)

NO SIGNS OF LIFE = UNCONSCIOUS (UNRESPONSIVE), NOT BREATHING NORMALLY AND NOT MOVING.

WHEN THERE ARE NO SIGNS OF LIFE PRESENT THEN THE RESCUER SHOULD COMMENCE CPR (rescue breathing and chest compressions)



2. BURNS AND SCALDS

Burns can be extremely painful and the main objectives are to cool the burned area and prevent infection. Also ensure the casualty does not go into shock or respiratory/ cardiac arrest.

DO NOT prick or break blisters.

DO NOT apply ointments, lotions or oily dressings.

- Cool the burn under cold running water for at least 10 minutes. (or 20 minutes for chemical burns)
- Remove clothing and jewellery from burnt area (unless sticking to the burn) because of the risk of swelling.
- Cover the burn with a sterile, non-stick dressing or special burn dressing or wet clean dressing.
- Reassure the casualty and

SEEK MEDICAL HELP QUICKLY.

3. POISONING

Poison can be ingested, inhaled, absorbed or injected into the body in the form of liquids, solids, or gas and vapour fumes.

DO NOT make the person vomit. If involuntary vomiting, send vomit with casualty to hospital.

IF CONSCIOUS, reassure the casualty. Determine nature of substance if possible and record. Call poisons information Centre 13 11 26 (0800 704 766 FOR NZ) or 000 (111 FOR NZ) for an ambulance.

IF UNCONSCIOUS (UNRESPONSIVE) follow the **1. Unconscious (Unresponsive)** procedure (DRSABCD) in this pamphlet. Call 000 (111 FOR NZ) for an ambulance.

4. FAINTING

Fainting is when a person loses partial or full consciousness caused by blood pooling in the legs and not reaching the brain.

- Lay the person on back and raise and support legs. Manage any injuries.
- Ensure plenty of fresh air and loosen any tight clothing.
- If person does not recover follow the **1. Unconscious (Unresponsive)** procedure (DRSABCD) in this pamphlet.

5. BLEEDING

Severe bleeding is a major threat to life and requires urgent attention to prevent serious blood loss. Wear disposable gloves to avoid direct contact with victim’s blood or other body fluids.

1. Apply direct pressure to the wound

- Any clean material may be used e.g. clothing or wound dressing, to be placed against the wound.
- Bandage pad firmly in place but make sure blood circulation is not restricted to limbs.

2. Elevate the injured part

- While keeping pressure on the wound, raise the bleeding part to reduce blood flow to the injured area.

3. If bleeding continues, apply further pressure.

- Do not remove the original pad and bandage.
- Apply additional dressings or pressure over the wound if bleeding continues.

EMBEDDED OBJECTS

- Do not remove embedded foreign objects.
- Apply pressure with pads around the wound but not directly onto the foreign object.

SEEK MEDICAL HELP QUICKLY

Large wounds generally need medical treatment such as stitching and tetanus injection.

6. EYES

- **DO NOT** remove any object embedded in or protruding from the eye.
- Warn casualty **NOT** to rub eye as it may damage the cornea or others parts of the eye.
- **IF LARGE EMBEDDED OBJECT**, place pads around the object and bandage in place. Call 000 for ambulance.
- **IF SMALL FOREIGN OBJECT** and not embedded, wash eye using a gentle stream or sterile saline or clean water. If object visible, remove using corner of a clean moist cloth. If unsuccessful, cover eye with eye pad and seek medical attention.