

Introduction

1. Content

1.1 Welcome



Notes:

1.2 Introduction



Progress (Slide Layer)

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MODULE PROGRESS

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The slide features a dark blue background with a woman in a blue polo shirt on the right. A white rounded rectangle with orange navigation arrows is on the left. Below it is a text box with a white background and orange border. At the bottom, there is a 'MODULE PROGRESS' indicator with a series of dots, the 'ELLISEDUCTION SERVICES' logo, and a set of orange navigation icons: a Creative Commons license icon, a refresh icon, a pause icon, a left arrow, and a right arrow.

1.3 Learning Outcomes

Learning Outcomes

- 1 Recognize the significance of injuries and medical emergencies.
- 2 Define first aid.
- 3 Identify legal considerations when providing emergency care.
- 4 Describe the Emergency Medical Services System.
- 5 Identify ways to reduce post traumatic stress felt by responders.

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The slide has a white background with a woman in a blue polo shirt on the right. On the left, there is a list of five learning outcomes, each in a white box with a blue border and a blue circle containing a number. At the bottom right, there is a set of navigation icons: a Creative Commons license icon, a refresh icon, a pause icon, a left arrow, and a right arrow.

Progress (Slide Layer)

Introduction to Standard First Aid - Learning Outcomes

Learning Outcomes

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1.4 The Importance of First Aid

Basic Life Support (BLS)



Clearing an Airway Obstruction for a victim who is choking.



Providing Cardiopulmonary Resuscitation (CPR) for a victim who is unresponsive and not breathing (or only gasping).

injuries and medical emergencies.



Using an Automated External Defibrillator (AED) to automatically correct specific electrical disturbances within the heart.

First aid is the immediate care provided to an ill or injured victim.




Progress (Slide Layer)

Introduction to Standard First Aid - The Importance of First Aid

Basic Life Support (BLS)

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1.5 Activating Emergency Medical Services (EMS)

Activating Emergency Medical Services (EMS)

- ✓ You play a major role in making the EMS system work effectively.
- ✓ The system works best when EMS personnel are summoned promptly.
- ✓ When a 9-1-1 call is placed, an emergency call taker (dispatcher) will request information from you such as:

✓ Whether you need police, fire or medical assistance.	✓ Your name.
✓ The phone number from which you are calling.	✓ The location of the emergency and accessibility.
	✓ The problem you are experiencing.



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Notes:

Progress (Slide Layer)


Introduction to Standard First Aid - Activating Emergency Medical Services (EMS)

Activating Emergency Medical Services (EMS)

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1.6 Legal Concepts


Legal Concepts That Apply to Emergency Care

Standard of Care

- ✓ Standard of Care refers to the reasonable degree of care that a person should expect from the individual who is providing that care.

"Does the care provided in this instance match what other care providers would do, assuming those providers have the same level of training and knowledge, access to the same resources and placed in the same setting?"

- ✓ If the care provided reasonably reflects what other providers would do under the same defined circumstances, the Standard of Care is considered to be maintained.



Notes:

Legal Concepts 2 (Slide Layer)


Legal Concepts That Apply to Emergency Care

Abandonment

- ✓ You can be held legally responsible for abandoning a person who requires ongoing care if you leave the scene or stop providing care.

Confidentiality

- ✓ While rendering care to a victim, you may learn something about the injured or ill person.
- ✓ This information should not be shared with anyone except authorized personnel directly associated with the person's care.




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Legal Concepts 3 (Slide Layer)

Legal Concepts That Apply to Emergency Care

Consent

- ✓ Verbally seek consent to provide care to a responsive victim in distress who needs first aid. This is referred to as informed consent.
- ✓ This does not apply to those who are unresponsive, confused or if they are a child who is in need of care but is without their parent or guardian. In such cases it is implied consent.
- ✓ If a child's parent or guardian is present, seek their verbal consent before beginning care.



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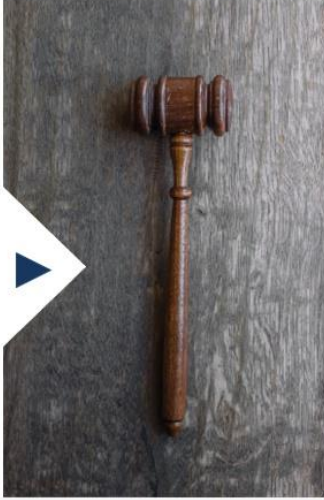
Legal Concepts 4 (Slide Layer)

Legal Concepts That Apply to Emergency Care

Duty to Act

Negligence

- Most laypersons do not have a legal duty to act in an emergency. But this
- When a victim is injured or suffers additional harm because of your actions or inactions (with reasonable consideration of the circumstances of the care scene), you may be found to be negligent.
- designated company responder.
- Negligence may include failure to prevent or control any behaviors that could result in further harm, failure to provide appropriate care, and/or rendering care beyond the scope of your training.



Legal Concepts 5 (Slide Layer)



Legal Concepts That Apply to Emergency Care

Good Samaritan Laws

- State laws enacted to protect responders from legal actions that might arise from emergency care provided while not in the line of duty. These laws vary from state to state.

Refusal of Care

- Sometimes, those who are injured or sick may refuse assistance even though they desperately need it. If this occurs, try to convince them why care is necessary.



Progress (Slide Layer)

Introduction to Standard First Aid – Legal Concepts That Apply to Emergency Care


Legal Concepts That Apply to Emergency Care

Standard of Care

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"Does the care provided in this instance match what other care providers would do, assuming those providers have the same level of training and knowledge, access to the same resources and placed in the same setting?"

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1.7 Reduce Post-Traumatic Stress

Reduce Post-Traumatic Stress

- ✓ Reflect on the positive steps that you took during the event.
- ✓ Prepare for media coverage, but do not comment.
- ✓ Speak to others who can provide a support system such as family and friends.
- ✓ Exercise to help reduce your stress level, and resume your familiar routines.
- ✓ Take advantage of any support counselors or trained mental health professionals available, and consider long-term counseling services.



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1.8 Summary



Key Terms

- ✓ EMS
- ✓ Consent
- ✓ Confidentiality
- ✓ Liability
- ✓ Basic Life Support
- ✓ Refusal of Care
- ✓ Negligence
- ✓ Standard of Care
- ✓ First Aid

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When you're ready continue to the knowledge check for this module.

Progress (Slide Layer)

Introduction to Standard First Aid - Summary

Key Terms

- ✓ EMS
- ✓ Consent
- ✓ Confidentiality
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- ✓ Basic Life Support
- ✓ Refusal of Care
- ✓ Negligence
- ✓ Standard of Care
- ✓ First Aid



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Caring for Injuries

1. Content

1.1 Welcome




Notes:

1.2 Learning Outcomes

Learning Outcomes

- 1 Recognize open and closed wounds, including burns and impaled objects.
- 2 Demonstrate how to control bleeding using a pressure bandage and commercial or improvised tourniquet.
- 3 Recognize the signs of soft muscle, bone, and joint injuries.
- 4 Describe how to care for muscle, bone, and joint injuries, including open and closed fractures.
- 5 Describe how to care for head, spine, chest, and abdomen injuries.
- 6 Recognize the signs of shock.



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Notes:

1.4 Wounds

Wounds TYPES OF BLEEDING

ARTERIAL BLEEDING

- ✓ Providing emergency care for injuries involving wounds can minimize the damage, reduce the chance of infection, and even save lives for those with
- ✓ Blood spurting from an artery with each heartbeat.
- ✓ When an artery is damaged, it can bleed quickly, causing rapid blood loss that is harder to control than venous or capillary bleeding.
- ✓ This bleeding is easily controlled.



The illustration shows a close-up of a person's forearm with a deep, jagged laceration. Bright red blood is spurting out of the wound in several distinct jets, indicating arterial bleeding. The surrounding skin is pale and shows some bruising.

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1.5 External Bleeding

External Bleeding

DRESSINGS

- Use a roll of gauze to wrap a bandage in a spiral pattern over the entire dressing. The bandage should be snug but not too tight that it constricts all circulation. This will help maintain blood flow to the wound.
- For an amputated body part, such as a finger, toe, or larger limb, stop the bleeding with pressure and bandage.
- If bleeding continues and the gauze becomes soaked, apply a new dressing.
- Retrieve the severed part with a gauze pad, place it in a container such as a plastic bag, and keep the part cool if possible. Then provide the severed part to EMS personnel when they arrive.
- Leave the object in place and stabilize it until EMS personnel arrive. This can be done by holding it in place or by placing rolls of gauze around the object and bandaging it to restrict movement.

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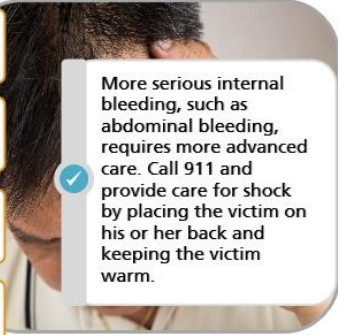
Notes:

1.6 Internal Bleeding

Internal Bleeding from common injuries to extremities, such as a bruised leg or twisted ankle, is best cared for by:

- R** Rest. Stop using the injured body part.
- I** Ice. Apply ice for up to 20 minutes.
- C** Compression. Apply an elastic bandage for several hours when possible.
- E** Elevation. Raise an injured limb.

More serious internal bleeding, such as abdominal bleeding, requires more advanced care. Call 911 and provide care for shock by placing the victim on his or her back and keeping the victim warm.



Notes:

Progress (Slide Layer)

Caring for Injuries: Internal Bleeding

Internal Bleeding from common injuries to extremities, such as a bruised leg or twisted ankle, is best cared for by:

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1.7 Burns

Burns **ASSESSING THE EXTENT**

- Victims may suffer all three levels of severity during the same incident.
- Burns are more serious on certain parts of the body, such as the head, neck, chest, genitals, hands, and feet.
- Burns are more serious for young children and the elderly.
- damage by counting the approximate number of hands it would
- Care for any burn based on the type of burn, the highest level of severity, and the extent of the burn.


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Chemical Burns (Slide Layer)

Caring for Burns **CHEMICAL**

- ✓ Acids and alkalis are examples of caustic or corrosive chemicals that can result in burns.
- ✓ Organic compounds, including petroleum products can also cause chemical burns.
- ✓ Follow the instructions for care provided on any Safety Data Sheets (SDS) you may have for the chemical.
- ✓ Flush the burned area with a large amount of water. Flush continuously for up to 20 minutes, or until EMS personnel arrive if summoned.
- ✓ If the chemical is a dry powder, brush the powder from the skin, and flush with water.




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Electrical Burns (Slide Layer)

Caring for Burns **ELECTRICAL**

- ✓ Exposure to electric current can disrupt normal heart function and cause internal injuries as well as burns. A victim with an electrical burn may have more than one burn. This situation is known as an entrance and exit wound.
- ✓ Always make sure the source of any electric burn has been controlled.
- ✓ Check responsiveness and breathing and provide CPR and AED if needed. To verify that the power is off, wait until the appropriate safety personnel arrive.
- ✓ Look for entry and exit wounds. If found, cover the wounds loosely with dry, nonstick gauze pads and bandage loosely.
- ✓ Call 9-1-1.



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Progress (Slide Layer)

Caring for Injuries: Caring for Burns

Caring for Burns THERMAL

SECOND DEGREE BURNS: BUBBLES ON THE SKIN AND OIL BOILS DEGREE BURNS

- ✓ Stop the burning process and reduce the pain by applying cool water.
- ✓ Stop the burning process and reduce the pain by applying cool water.
- ✓ Loosely cover the burn with a sterile dressing and bandage, taking care not to wrap it too tightly.
- ✓ Do not attempt to remove any clothing stuck to the skin.
- ✓ Cover the burn with a cool, moist dressing and bandage loosely.
- ✓ Care for shock.
- ✓ Call 9-1-1.

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1.9 Head Injuries

Head Injuries SKULL FRACTURES

SIGNS OF SKULL FRACTURE

- ✓ A Skull Fracture is any break in the cranial bone, also known as the skull, due to significant force.
- ✓ Check responsiveness and breathing and provide care as needed.
- ✓ Place a sterile dressing (gauze pad or other clean item) over the wound. Fragments.
- ✓ Apply pressure along the edges of the dressing, not directly over any weak area of the skull.
- ✓ Restrict movement of the victim's head.
- ✓ Call 9-1-1.

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Notes:

Concussion (Slide Layer)


Head Injuries **CONCUSSION**

SIGNS FOR CONCUSSION

- ✓ Concussion is a brain injury, often caused by a blow to the head, that causes a temporary loss of brain function.
- + Loss of consciousness.
- + Loss of memory.

As long as the victim is not complaining of neck pain, position the victim on his/her back with the head and shoulders slightly elevated. If neck pain is present, avoid movement of the neck. Call 9-1-1.

- + Ringing in the ears.




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Scalp Wounds (Slide Layer)

Scalp Wounds

CARE FOR SCALP WOUNDS

- ✓ Place a sterile gauze pad (or other clean dressing) over the wound. Scalp wounds do not affect the brain.
- ✓ Apply direct pressure over the wound to stop the bleeding.
- ✓ Bandage the wound whenever possible.
- ✓ Position the victim on his/her back with the head and shoulders slightly elevated.
- ✓ Call 9-1-1 if bleeding cannot be controlled or the wound is large or deep.



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Eyes (Slide Layer)

Eye Injuries **ONBIRGEMISINURIE&YE**

EYE INJURY	DESCRIPTION	CARE
Blow to the eye	A blow to the eye can result in swelling and discoloration (black eye), or more severe damage that threatens eyesight.	<ul style="list-style-type: none"> Have the victim close the eye and then apply ice or a cold pack to reduce pain and swelling Seek medical care if there is significant pain, vision problems, or discoloration of the eyeball
Eye Avulsion	A significant blow to the eye can knock the eyeball from its socket.	<ul style="list-style-type: none"> Cover the injured eye loosely with a moist sterile dressing (gauze pad or other clean dressing). Do not place pressure on the eyeball or attempt to replace the eyeball in the socket A paper cup can be held in place over the dressing to further protect the eyeball from injury Have the victim close the uninjured eye Call 9-1-1
Penetrating Eye Injury	A sharp object can easily penetrate the eyeball. The object may have been withdrawn or	<ul style="list-style-type: none"> If the object remains in the eyeball, apply dressings around the object to movement, and hold the object still




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Cheek Nose Mouth (Slide Layer)

Mouth Injuries **KONGHEID&UP(AVULSED) TOOTH**

- Place a folded gauze pad in the socket to control bleeding.
- Locate the missing tooth, hold it by the crown, and rinse it gently.
If a closed wound is present, apply ice or a cold pack to reduce swelling.
- Keep the tooth moist until the victim can get to the dentist or to a hospital.
- If reinsertion is not possible, place the tooth in an emergency tooth preservation kit such as Save-a-Tooth®, Hanks Balanced Salt Solution, coconut water, milk, or a saltwater solution (1 teaspoon salt in 1 quart of water).
- If no other fluids are available, have the victim spit into a small cup or plastic bag. Place the tooth in the saliva. Take note, it does not matter if there is blood mixed with the saliva.
contributing to the bleeding.
- Get the victim to a dentist promptly so the tooth can be successfully replaced in its socket. If more serious injuries exist, call 9-1-1.



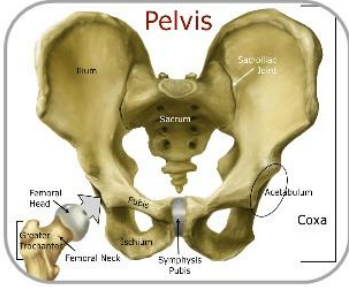
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Progress (Slide Layer)

Caring for Injuries: Pelvic and Hip Injuries

Pelvic and Hip Injuries

- ✓ Pelvic injuries can range in severity from minor to life-threatening. A pelvic fracture can occur as a result of a high impact injury, such as a motor vehicle collision or fall from a height.
- ✓ Support the victim in the most comfortable position. This may be with the legs bent or straight.
- ✓ Loss of feeling in the
- ✓ Do not attempt to move the legs if the victim complains of pain within the pelvis.
- ✓ rotated inward, or the
- ✓ Call 9-1-1.
- ✓ susceptible to hip dislocation if the head of the femur (large bone in the upper leg) is displaced out of the joint. This can compromise important nerves in the lower limbs.



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1.13 Chest Injuries

Chest Injuries

- ✓ Control any significant bleeding present in the chest.
- ✓ If a sucking chest wound is present and a dressing and direct pressure are required to stop bleeding, care must be taken to ensure that a blood saturated dressing does not inadvertently occlude the wound.
- ✓ If there is little bleeding with a sucking chest wound, leave the wound exposed.
- ✓ Sucking chest wound. This is recognized by the sound of air being sucked
- ✓ Call 9-1-1.




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Progress (Slide Layer)

Caring for Injuries: Chest Injuries

Chest Injuries

- Control any significant bleeding present in the chest.
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- sucking chest wound. This is recognized by the sound of air being sucked
- Call 9-1-1.



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1.14 Abdomen Injuries

Abdomen Injuries

- Though rare, injuries that penetrate the abdomen can result in organs protruding from the abdomen. This is a serious condition, known as an abdominal evisceration, that requires immediate care.
- object. The injured area may appear bruised, painful, tender, or tight.
- Place the victim on his or her back with knees bent.
- Place the victim in a comfortable position. This is often on the back or side.
- Gently cover the protruding organs loosely with a moist, sterile dressing. Do not try to reinsert the organs.
- Care for shock by keeping the victim warm.
- Care for shock by keeping the victim warm.
- Seek medical care and call 9-1-1 for incapacitating injuries.
- Call 9-1-1.




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Bone Injuries (Slide Layer)

Bone Injuries **ESSENTIAL CARE STEPS**

- Apply an ice or cold pack if possible, to help reduce the swelling and pain.
- If an open fracture is present, do not apply pressure to any protruding bone. Cover the area with a dressing and bandage loosely.
- Call 9-1-1 for any open fractures.
- A sling can also be fashioned using the victim's clothing and a safety pin.
- Do not be able to move the affected limb or bear weight or walk on an injured leg or foot.




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Muscle Injuries (Slide Layer)

Muscle Injuries

- Strain** - A strain is an overstretched or partially torn muscle. This occurs to muscles such as the back when heavy objects are lifted improperly. Other common muscle strains involve the legs caused by running.
- Bruise**. A bruise that results from a direct blow to the muscle.
- Cramp**. A cramp is an uncontrolled muscle spasm that can be quite painful.



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Progress (Slide Layer)

Caring for Injuries: Joint, Bone, and Muscle Injuries

Joint Injuries

- ✓ Injuries to joints can be sprains or dislocations. A sprain occurs when the ligaments surrounding the joint are stretched or torn. The most common sprains involve the ankles, wrists, and knees.
- ✓ If you believe the joint is dislocated, splint the injured limb as you would a fracture and call 9-1-1.
- ✓ out of the joint, such as the shoulder, elbow, knee, ankle, finger, or toe.
- ✓ If you suspect the joint is only sprained, use the RICE mnemonic described earlier.

+ Deformity.

+ inability to use the affected limb normally.



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1.16 Shock

Shock

- ✓ Position the victim on his or her back whenever possible.
- ✓ If breathing problems exist, the victim will likely need to be supported in a seated or slightly reclined position to make breathing easier.
- ✓ Maintain normal body temperature.
- ✓ Call 9-1-1.




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Progress (Slide Layer)

Caring for Injuries: Shock

Shock

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1.17 Summary

Key Terms

- ✓ Bandage
- ✓ Closed Wound
- ✓ Concussion
- ✓ Dislocation
- ✓ DOTS
- ✓ Dressing
- ✓ Fracture
- ✓ Hemostatic Gauze
- ✓ Open Wound
- ✓ Primary Check
- ✓ RICE
- ✓ Rule of the Hand
- ✓ Scene Safety
- ✓ Secondary Check
- ✓ Shock
- ✓ Splinting
- ✓ Sprain
- ✓ Strain
- ✓ Sucking Chest Wound
- ✓ Tourniquet
- ✓ Spinal Motion Restriction (SMR)



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Notes:

Caring for Sudden Illnesses

1. Content

1.1 Welcome




Notes:

1.2 Learning Outcomes

Learning Outcomes

- 1 Recognize the signs of sudden illnesses.
- 2 Describe how to care for sudden illnesses.
- 3 Using a training injector, demonstrate how to use an epinephrine auto injector.



Navigation icons: CC, Refresh, Pause, Previous, Next

Notes:

1.4 Epinephrine Auto-Injectors

Using Epinephrine Auto-Injectors

- Hold the device firmly so that your fingers are not near the needle end of the device and remove the safety cap.
- Massage the injected area for several seconds.
- Place the victim in a recumbent position and hold the base firmly.
- Monitor the victim for improvement. If the victim does not improve in five minutes give a second dose if available.
- Following its use, the auto-injector must be properly discarded in a marked "sharps" container. This can be done by providing the used device to arriving EMS personnel.
- Press the device firmly in place and hold for several seconds according to the manufacturer's instructions.



Progress (Slide Layer)

Caring for Sudden Illnesses: Epinephrine Auto-injectors

Using Epinephrine Auto-Injectors

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1.5 Breathing Emergencies

Breathing Emergencies **RECOGNITION**

- ✓ Call 9-1-1.
- ✓ Help the victim move into a comfortable breathing position, which is often a seated position.
- ✓ If the condition involves a victim hyperventilating as a result of anxiety, attempt to calm the victim and have the victim hold his or her breath for several seconds and exhale slowly.
- ✓ Victims experiencing breathing difficulty may have a condition such as asthma and have an inhaler for use. Assist the victim in using their prescribed inhaler.
- ✓ Provide supplemental oxygen support, if available, to any victim experiencing significant breathing problems.



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Notes:

1.6 Cold Emergencies

Hypothermia RECOGNITION

- ✓ Hypothermia is a condition of abnormally low body temperature.
- ✓ Warm the victim gradually, replacing any wet, cold clothing with dry clothing and insulation, and cover the head.
- ✓ confusion and slowing movement.
- ✓ If the victim is alert, provide a sugary, non-alcoholic beverage such as hot chocolate.
- ✓ Call 9-1-1 if the victim's condition is not improving.
- + Exhaustion.
- + Cold skin, even under clothing.



Notes:

1.7 Heat Emergencies

Heat Cramps **RECOGNITION**

- ✓ Heat cramps are the least serious of the three heat emergencies. Heat cramps are sudden, painful muscle cramps most often occurring in calf or
- ✓ Have the victim stop any strenuous activity.
- ✓ Stretch the affected muscle.
- ✓ Provide water or an electrolyte drink.




Notes:

Heat Exhaustion (Slide Layer)

Heat Exhaustion RECOGNITION

- ✓ Care for heat exhaustion is aimed at cooling the body and replacing lost water and electrolytes.
- ✓ Have the victim rest in a cool environment.
- ✓ Provide water or a commercial sports drink if the victim is not nauseated.
- ✓ Cool the victim by applying water-soaked towels and a fan if available.
- ✓ Call 9-1-1 if the victim's condition is not improving.




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Heatstroke (Slide Layer)

Heatstroke RECOGNITION

- ✓ Rapidly cool the victim by any means possible. This can include applying towels saturated with cold water, or applying cold packs to the head, neck, armpits and groin.
- ✓ Call 9-1-1.
- ✓ If the victim is unresponsive and not breathing (or only occasionally gasping), begin CPR.
- ✓ Provide supplemental oxygen support if available.




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Progress (Slide Layer)

Caring for Sudden Illnesses: Heat Emergencies

Heat Cramps RECOGNITION

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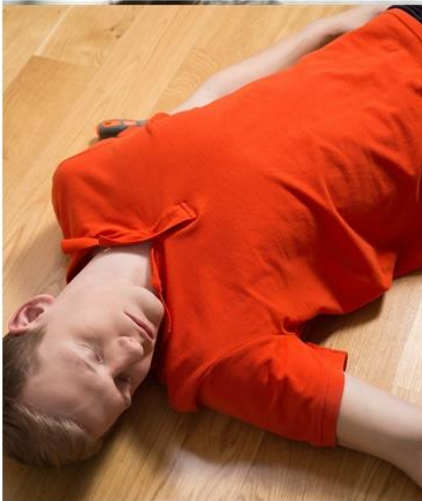
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1.8 Fainting

Fainting CABGES

- Position the victim on his or her back on a flat surface.
- Maintain normal body temperature.
- Provide supplemental oxygen support if available.
- Call 9-1-1 if the victim does not quickly regain consciousness, has repeat fainting episodes, or if the victim fainted for no apparent reason.
- Loosen any restrictive clothing.



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Notes:

Progress (Slide Layer)

Caring for Sudden Illnesses: Heart Attack

Heart Attack RECOGNITION

- Call 9-1-1.
- Help the victim to rest in the most comfortable position.
- Breathing difficulty, Chest pain, Sweating
- If the victim has prescribed heart medication, such as nitroglycerin, assist the victim with its use.
- If the victim is not allergic to aspirin and is not taking a blood thinner, provide one regular aspirin or two low dose aspirins if available.
- Provide supplemental oxygen support if having trouble breathing.



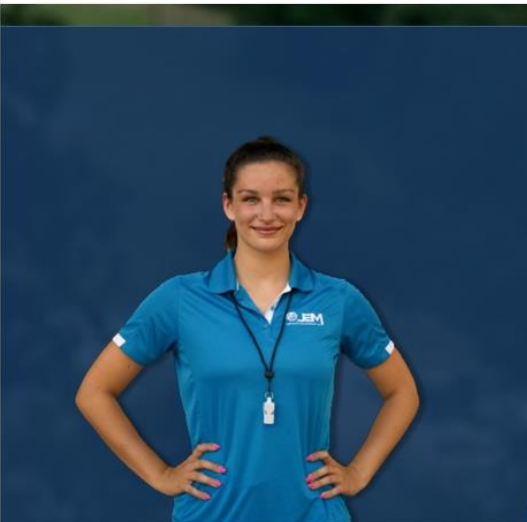
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1.10 Recap and Preview



So far you have learned...

- ~~Identifying emergency~~ emergencies
- ~~Identifying emergency~~ breathing emergencies
- ~~Poisoning~~ Poisoning
- ~~Hypothermia, frostbite,~~ hypothermia, frostbite,
- ~~And stroke.~~ And stroke.
- Fainting and heart attack

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Progress (Slide Layer)

Caring for Sudden Illnesses: Recap and Preview



So far you have learned...

- Diabetic emergencies
- Dying and near-drowning breathing emergencies
- Poisoning
- Hypothermia, frostbite, and stroke.
- Fainting and heart attack

MODULE PROGRESS


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1.11 Diabetic Emergencies

Diabetic Emergencies **HYPERGLYCEMIA**

- If you are caring for a responsive diabetic, and you are not sure if the victim is hypoglycemic or hyperglycemic, give sugar. Glucose tablets or gel are often used by diabetics for such an emergency.
- Other items, such as a can of fruit juice, soda, packets of sugar, or sugar candy can also be used.
- If hypoglycemia is present, and you have given sugar, the victim's condition often improves in a few minutes.
- In cases of hyperglycemia, the victim's condition will remain unchanged and the extra sugar will not be harmful.
- Call 9-1-1 for any unresponsive victim, or for any victim whose condition does not rapidly improve.



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Notes:

Progress (Slide Layer)

Caring for Sudden Illnesses: Diabetic Emergencies

Diabetic Emergencies CATAPULT MEDIA

- ✓ If you are caring for a responsive diabetic, and you are not sure if the victim is hypoglycemic or hyperglycemic, give sugar. Glucose tablets or gel are often used by diabetics for such an emergency.
- ✓ Other items, such as a can of fruit juice, soda, packets of sugar, or sugar candy can also be used.
- ✓ If hypoglycemia is present, and you have given sugar, the victim's condition often improves in a few minutes.
- ✓ In cases of hyperglycemia, the victim's condition will remain unchanged and the extra sugar will not be harmful.
- ✓ Call 9-1-1 for any unresponsive victim, or for any victim whose condition does not rapidly improve.



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1.12 Drug Emergencies

Drug Emergencies

- ✓ Drug emergencies result from the misuse or abuse of medical and non-medical substances.
- ✓ These may be legal substances such as alcohol and pain killers, or illegal substances such as heroin and cocaine.
- ✓ Drug emergencies result from various substances and are classified by the effects they have on the body.



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Notes:

Hallucinogens (Slide Layer)

Hallucinogens RECOGNITION

Hallucinogens are substances that cause changes in self-awareness, perception, sensation and thought. They may cause the victim to lose a

- ✓ Fear.
- ✓ Panic.
- ✓ Anxiety.


✓ Tension.

✓ Hallucinations.

✓ Deep depression.

✓ Feeling of paranoia.

✓ Phencyclidine (PCP), mescaline (mescaline), and club drugs such as MDMA (Ecstasy).




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Depressants (Slide Layer)

Depressants RECOGNITION

- The odor of alcohol.
- ✓ Slurred, slow, or incomprehensible speech. (CDC), more than 88,000 deaths each year in the United States.
- ✓ Confusion.
- ✓ Slowed actions.
- ✓ Those at highest risk of alcohol poisoning are college students, chronic drinkers, and people who should not be about the effects.
- Dizziness or loss of consciousness.
- Staggering gait or falling.
- Nausea or vomiting.




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Stimulants (Slide Layer)

Stimulants RECOGNITION

- ✓ Stimulants increase mental and physical activity.
 - ✓ Flush skin.
 - ✓ Sweating.
- ✓ Common products such as energy drinks and power drinks contain stimulants.
 - ✓ Nausea.
 - ✓ Fever.
 - ✓ Rapid pulse.
 - ✓ Chest pain.
- ✓ Cocaine and amphetamines are commonly abused.
 - ✓ High blood pressure.




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Opioids (Slide Layer)

Opioid (Narcotic) Painkillers

- ✓ Opioids depress the central nervous system resulting in loss of consciousness.
- ✓ It is estimated that more than two million people in the United States suffer from substance use disorders related to prescription pain relievers.
- ✓ To counteract this epidemic involving legal and illegal use of opioids, efforts are underway to provide education to prevent overdoses, and to train people in the use of the medication naloxone to reverse opioid overdose.
- ✓ Morphine, hydrocodone, and oxycodone. These are often sold under brand names.
- ✓ Most states have enacted laws making this medication available without prescription.
- ✓ Heroin is an illegal opioid.




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Care for Drug Emergencies (Slide Layer)

General Care for Drug Emergencies

- ✓ Ensure that the scene is safe.
- ✓ If the victim is unresponsive, place the victim in the recovery position and call 9-1-1.
- ✓ If the victim is unresponsive and not breathing, begin CPR.
- ✓ If the victim is experiencing breathing difficulty provide supplemental oxygen support if available.



Naloxone (Slide Layer)

Naloxone Auto-Injectors for Opioid Overdose

- ✓ Make sure EMS has been contacted.
- ✓ Naloxone is a medication administered to those who overdose on opioids.
- ✓ Follow the instructions that come with the device for proper administration.
- ✓ Follow local response protocols when required.
- ✓ Provide basic life support care such as rescue breathing or CPR with supplemental oxygen support as needed.



Progress (Slide Layer)

Caring for Sudden Illnesses: Drug Emergencies

Drug Emergencies

- ✓ Drug emergencies result from the misuse or abuse of medical and non-medical substances.
- ✓ These may be legal substances such as alcohol and pain killers, or illegal substances such as heroin and cocaine.
- ✓ Drug emergencies result from various substances and are classified by the effects they have on the body.

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1.13 Poisoning

Poisoning **GENERAL POISON CARE**

- ✓ What poison was the victim exposed to?
Control centers in the United States.
- ✓ How much poison was the victim exposed to?
These centers provide care advice for poisoning incidents and help reduce costly hospital visits through proper in-home care.
- ✓ In what manner was the victim poisoned?
- ✓ Poison centers offer free, confidential advice 24 hours a day, 7 days a week.
- ✓ What is the age and approximate weight of the victim?
The effects of poisons vary. They can interfere with metabolism, destroy
- ✓ What care has been provided?



POISON HeP
1-800-222-1222

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Notes:

Ingested Poisons (Slide Layer)

Ingested Poisons RECOGNIZING

- ✓ For responsive victims without breathing problems, call the Poison Help line and follow the advice provided.
- ✓ This might include diluting the ingested poison with milk or water or inducing vomiting.
- ✓ Acids, alkalis, alcohol, and gasoline are examples of some products for which different care is needed.
- ✓ Call 9-1-1 if the victim is unresponsive or having difficulty breathing.

Navigation icons: CC, Refresh, Pause, Previous, Next

Inhaled Poisons (Slide Layer)

Inhaled Poisons RECOGNITION


- ✓ To care for a victim who has inhaled a poison, get the victim out of any toxic environment if it is safe for you to enter.
- ✓ Check responsiveness and breathing and provide supplemental oxygen support if available.
- ✓ Provide CPR if the victim is unresponsive and not breathing normally.
- ✓ Call 9-1-1.

Navigation icons: CC, Refresh, Pause, Previous, Next

Absorbed (Slide Layer)

Absorbed Poisons **TOXIC PLANTS**

- ✓ Poison ivy, oak, and sumac are the most common types of
- ✓ Place cool, wet compresses on the affected area for 15 to 30 minutes several times a day.
- ✓ Apply a corticosteroid cream, calamine lotion, or commercial
- ✓ Seek medical care if the dermatitis is widespread, affects areas such as face, neck, or genitals, or appears to be infected.
- ✓ Use oral antihistamines, such as diphenhydramine (Benadryl).
- ✓ Corticosteroids such as prednisone, and/or antibiotics may be prescribed to reduce the swelling and irritation.
- ✓ that gets on the skin.




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Injected (Slide Layer)

Injected Poisons

✓ Injected poisons can result from a toxic substance in a needle or as a result of bites or stings from:

- ✓ Insects.
- ✓ Marine life.
- ✓ Spiders.
- ✓ Snakes.
- ✓ Ticks.
- ✓ Animals.
- ✓ Scorpions.
- ✓ Humans.



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Progress (Slide Layer)

Caring for Sudden Illnesses: Poisoning

Poisoning GENERAL POISON CARE

- ✔ What poison was the victim exposed to? Control centers in the United States.
- ✔ How much poison was the victim exposed to? These centers provide care advice for poisoning incidents and help reduce costly hospital visits through proper in-home care.
- ✔ In what manner was the victim poisoned?
- ✔ Poison centers offer free, confidential advice 24 hours a day, 7 days a week.
- ✔ What is the age and approximate weight of the victim? The effects of poisons vary. They can interfere with metabolism, destroy organs, and damage the nervous system.
- ✔ What care has been provided?

POISON Help
1-800-222-1222

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1.14 Bites and Stings

Insect Bites and Stings CARE

- ✔ Insects that bite or sting include bees, wasps, hornets, yellow jackets, and fire ants. Remove the stinger as quickly as possible. This is especially important for bees.
- ✔ Reduce itching and swelling by using hydrocortisone cream or an oral antihistamine.
- ✔ Monitor the victim for signs of any severe allergic reaction.
- ✔ Apply a cold pack to reduce pain and swelling.
- ✔ Call 9-1-1 if anaphylaxis occurs and assist the victim with his or her prescribed epinephrine auto-injector if available.
- ✔ Bites and stings often result in an envenomation mark, swelling, and itching.




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Spider Bite (Slide Layer)

Spider Bites **RECOGNITION**

- ✓ Wash the site with soap and water and clean it further with an alcohol swab.
Spider, such as the brown recluse
- ✓ Apply ice to control swelling and provide some relief from the pain.
- ✓ Provide an over-the-counter pain medication.
- ✓ at the site of the bite and small tang marks may be noticeable.
- ✓ Seek medical attention.
- ✓ This is usually followed by muscle cramps and severe pain, fever, chills, headache, dizziness, and nausea.




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Tick Bite (Slide Layer)

Tick Bites **RECOGNITION**

- ✓ Grasp the tick as close to the skin as possible with tweezers. Lift gently and hold with the skin tented until the tick releases.
- ✓ Advise the victim to watch for rashes, flu-like signs, or joint discomfort over the next 30 days.
- ✓ transmitting a disease is increased
- ✓ Seek medical care if these signs occur. Treatment for tick diseases involves prescribed antibiotics.
- ✓ Apply hydrocortisone cream for any itching.




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Scorpion Bite (Slide Layer)

Scorpion Stings

- ✓ Wash the site with soap and water.
scorpion's tail contains the stinger that injects a toxin.
- ✓ Apply a cold pack.
- ✓ Though most scorpions in the United States are harmless, the
- ✓ Seek medical care.




Navigation icons: CC, Refresh, Pause, Previous, Next

Human Bites (Slide Layer)

Human Bites

- ✓ Clean a minor wound with soap and water, apply antibiotic ointment, and cover the wound with a clean dressing.
types of viruses contained in human bites.
- ✓ If the area is bleeding heavily, apply direct pressure with a clean dressing until the bleeding is controlled.
- ✓ A minor wound from a human bite can become infected and
- ✓ Seek medical attention for any deep bites.




Navigation icons: CC, Refresh, Pause, Previous, Next

Animal Bites (Slide Layer)

Animal Bites **RECOGNITION**

- ✓ In unvaccinated humans, rabies is almost always fatal after serious signs have developed.
- ✓ Vaccination after exposure is highly successful in preventing the disease if administered within a few days of infection.
- ✓ Care for animal bites is the same as for human bites. Seek medical assistance for any serious wounds from any animal that could be rabid, and report bites to local law enforcement personnel.




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Marine Animal Bites (Slide Layer)

Marine Animal Bites **STINGRAYS**

- ✓ Unsuspecting victims accidentally step on them, resulting in a laceration, puncture or impaled object wound as the stingray flicks its barbed tail. Most wounds are inflicted to the feet and ankles of victims.
- ✓ Call 9-1-1 at the first signs of anaphylaxis.
- ✓ Flush the injured area to help remove any debris.
- ✓ Immerse the injured part in hot water to neutralize the venom and reduce pain.
- ✓ Seek medical care. The wound of a stingray can have pieces of barb and become infected. The wound may also need sutures.





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Snake Bites (Slide Layer)

Snakebites **RECOGNIZING**

- ✓ Get the victim away from the snake. Do not try to capture or kill the snake.
- ✓ Limit movement of the victim.
- ✓ Wash the wound and cover with a clean dressing.
- ✓ The coral snake is not a pit viper and does not have large fangs.
- ✓ Immobilize any bitten limb.
- ✓ Apply an elastic bandage over an affected limb to help slow the spread of the venom.
- ✓ Call 9-1-1.






Progress (Slide Layer)


Caring for Sudden Illnesses: Bites and Stings

Insect Bites and Stings **CARE**

- ✓ Insects that bite or sting include bees, wasps, hornets, yellow jackets, and fire ants. Remove the stinger as quickly as possible. This helps reduce the amount of venom injected.
- ✓ Reduce itching and swelling by using hydrocortisone cream or an oral antihistamine.
- ✓ Monitor the victim for signs of any severe allergic reaction.
- ✓ Apply a cold pack to reduce pain and swelling.
- ✓ Call 9-1-1 if anaphylaxis occurs and assist the victim with his or her prescribed epinephrine auto-injector if available.
- ✓ Bites and stings often result in an envenomation mark, swelling, and itching.



MODULE PROGRESS 



1.15 Pregnancy Complications

Pregnancy Complications **RECOGNITION**

- ✓ Pregnancy complications require the attention of medical professionals. Call 9-1-1.
- ✓ heavy vaginal bleeding.
- ✓ For vaginal bleeding or severe abdominal pain or cramps, place the victim on her left side.
- ✓ If vaginal bleeding is present, have the victim place a sanitary napkin or other sterile dressing over the opening of the vagina.
- ✓ Do not discard any blood-soaked dressings or tissue that is passed. Save these for EMS personnel to take with the victim to the hospital for further evaluation.




Notes:

Progress (Slide Layer)

Caring for Sudden Illnesses: Seizures

Seizures **RECOGNITION**

- ✓ Protect the victim from injury by moving any items away that might cause harm, such as sharp objects.
- ✓ Roll the victim onto one side (recovery position) to help keep the airway clear.
- ✓ *cause and factors such as a victim's general state of health*
- ✓ Protect the head from injury if convulsions are present by placing a soft object, such as a folded towel, under the victim's head.
- ✓ *never*
- ✓ Call 9-1-1.
- ✓ *A victim may have early warning signs (aura) of an impending*
- ✓ Provide supplemental oxygen support if available.



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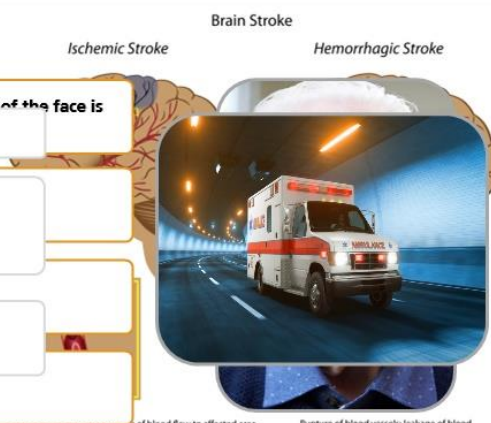
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1.17 Stroke

Stroke **RECOGNITION**

Ischemic Stroke Brain Stroke Hemorrhagic Stroke

- ✓ **Facial droop. Ask the victim to smile and see if one side of the face is** *disrupted (due to blocked or ruptured arteries in the brain)*
- ✓ Call 9-1-1.
- ✓ Have the victim rest in the most comfortable position. This position is often lying on the back with head and shoulders elevated.
- ✓ **or loss of** *Speech difficulty. Listen to the victim speaking.*
- ✓ If vomiting occurs, roll the victim onto his/her side (recovery position) to keep the airway clear.
- ✓ **Time to call 9-1-1.**



of blood flow to affected area Rupture of blood vessels; leakage of blood

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Progress (Slide Layer)

Caring for Sudden Illnesses: Stroke

Stroke RECOGNITION

Brain Stroke


Ischemic Stroke Hemorrhagic Stroke

Facial droop. Ask the victim to smile and see if one side of the face is disrupted due to blocked or ruptured arteries in the brain.

Speech difficulty. Listen to the victim speaking.

If vomiting occurs, roll the victim onto his/her side (recovery position) to keep the airway clear.

Time to call 9-1-1.



Loss of blood flow to affected area Rupture of blood vessels; leakage of blood

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1.18 Care Matrix

First Aid Recognition and Care Matrix CHART 1 OF 3

Bites / Stings (Insect or spider)	Redness Swelling Pain, cramping Itching Embedded tick	Remove any embedded tick or stinger. Clean the site. Cool the site to reduce pain. Apply hydrocortisone ointment for itching. Call 9-1-1 for black widow or brown recluse spider bites.
Bites / Stings (Marine life)	Redness Swelling Pain Bleeding	Jellyfish: Remove tentacles; rinse immediately in sea water; immerse in hot water. Stingray: Control any bleeding; immerse in hot water. Shark/barracuda: Control bleeding. Call 9-1-1 / Seek medical care.
Burns	Red, swollen skin: 1 st Degree With blistering: 2 nd Degree Charred: 3 rd Degree	Stop the burning process. Brush off any dry chemicals and apply cool water. 1 st Degree: Apply skin moisturizer with aloe or similar product. 2 nd & 3 rd Degree: Call EMS, loosely bandage with sterile dressing.
Closed Wounds	Tender, painful, swelling Bruising, discoloration Stiffness, reduced mobility	R – Rest the injured area, avoiding all unnecessary movement. I – Ice or use cold packs applied for up to 20 minutes. C – Compress with elastic bandage to help control swelling for 2 hours. E – Elevate the injured body part above the heart, if possible.
Cold	Shivering, goose bumps Cold, bluish skin, etc.	Move guest to a warm environment. Remove any wet or cold clothing with dry, warm items.

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Chart 2 (Slide Layer)

First Aid Recognition and Care Matrix CHART 2 OF 3

First Aid Recognition & Care Matrix		
Condition	Recognition	Care
Emergency Moves	Guests who are unable to walk without assistance to safety in a dangerous environment.	Assist guest to walk to safety. Carry guest (piggyback, 2-person) to safety. Drag guest to safety over smooth surfaces - Drag by ankles or grasp under shoulder blades and cradle head in arms.
Eye injuries	Vision difficulty Burning Bleeding	Chemical exposure: Call 9-1-1; Flush any chemicals continuously with water until EMS personnel arrive. Loose object: Flush with water to wash object out. Blunt trauma: Close eye and apply ice to control swelling.
Fainting	Light headed, dizziness, Nausea, vomiting. Unresponsive, injuries sustained from falling.	Have the guest lie down, loosen restrictive clothing. If the situation does not self-correct quickly, call 9-1-1. Place in the Recovery Position if vomiting. Check for signs of head, neck or back injuries.

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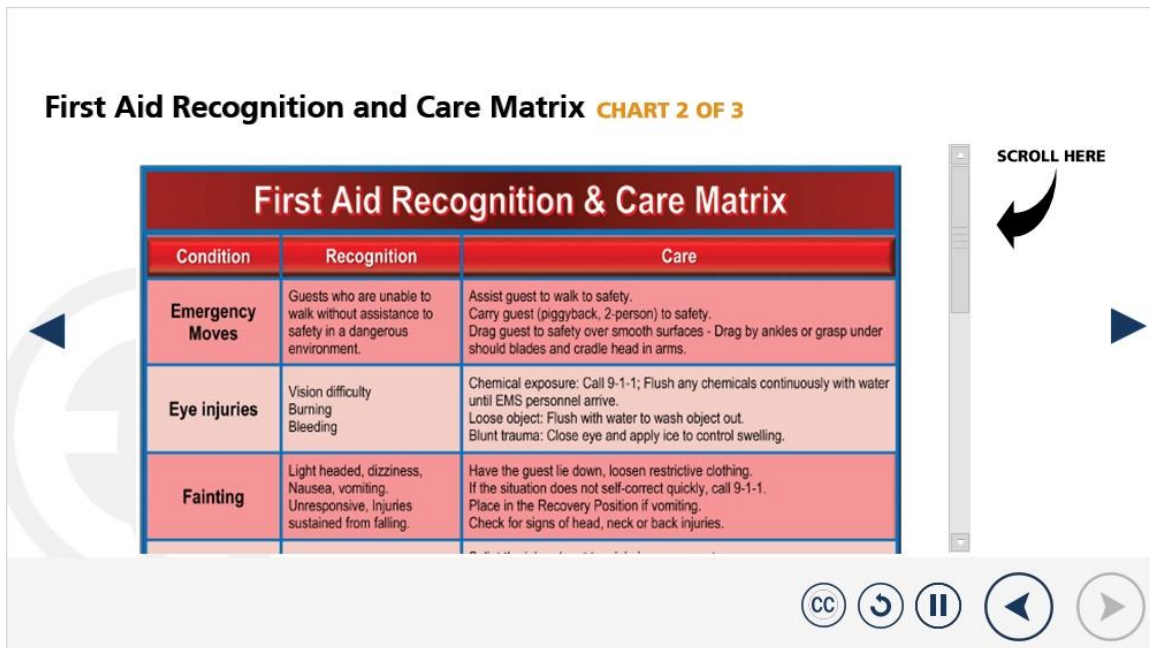


Chart 3 (Slide Layer)

First Aid Recognition and Care Matrix CHART 3 OF 3

Poisoning (Ingested)	Unresponsive. Burns on or near mouth. Nausea, vomiting.	Follow your Safety Data Sheets (SDS) for any work-related chemicals. Call Poison Control (800-222-1222) for responsive guest. Call 9-1-1 if unresponsive. Place the guest in the recovery position.
Poisoning (Inhaled)	Confusion, lethargic. Unresponsive. Nausea, vomiting. Burning sensations in airway Weak, labored breathing.	Move the guest to fresh air and try to determine what was inhaled. Follow your Safety Data Sheets (SDS) for any work-related chemicals. Call Poison Control (800-222-1222) for responsive guest. Call 9-1-1 if unresponsive. Place the guest in the recovery position if vomiting. Provide supplemental oxygen if labored breathing.
Seizure	Muscle rigidity. Unresponsive. Convulsions.	If in the water: Open the airway and extricate as quickly as possible. If on land: Protect the guest against injury by placing towels or padding under the head. Call 9-1-1. Place the guest in the Recovery Position and monitor once seizure subsides.
Heat Emergency	Cramps, Fatigue, Dehydration / Extreme thirst. Pale, moist or dry skin. Seizure, Unresponsiveness Abnormal pulse and /or breathing	Move guest to a cool area. Remove any heavy clothing and cool the guest (fanning, wet towels, cold packs). If responsive, provide water or sports drink. Call 9-1-1 if unresolved or if guest is unresponsive. Place the guest in the recovery position if vomiting.

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Progress (Slide Layer)

Caring for Sudden Illnesses: First Aid Recognition and Care Matrix

First Aid Recognition and Care Matrix CHART 1 OF 3

Bites / Stings (Insect or spider)	Redness Swelling Pain, cramping Itching Embedded tick	Remove any embedded tick or stinger. Clean the site. Cool the site to reduce pain. Apply hydrocortisone ointment for itching. Call 9-1-1 for black widow or brown recluse spider bites.
Bites / Stings (Marine life)	Redness Swelling Pain Bleeding	Jellyfish: Remove tentacles; rinse immediately in sea water; immerse in hot water. Stingray: Control any bleeding; immerse in hot water. Shark/barracuda: Control bleeding. Call 9-1-1 / Seek medical care.
Burns	Red, swollen skin: 1 st Degree With blistering: 2 nd Degree Charred: 3 rd Degree	Stop the burning process: Brush off any dry chemicals and apply cool water; 1 st Degree: Apply skin moisturizer with aloe or similar product. 2 nd & 3 rd Degree: Call EMS, loosely bandage with sterile dressing.
Closed Wounds	Tender, painful, swelling Bruising, discoloration Stiffness, reduced mobility	R – Rest the injured area, avoiding all unnecessary movement. I – Ice or use cold packs applied for up to 20 minutes. C – Compress with elastic bandage to help control swelling for 2 hours. E – Elevate the injured body part above the heart, if possible.
Cold	Shivering, goose bumps Cold, bluish skin, lips	Move guest to a warm environment. Bandage any wet or cold clothing with dry, warm items.

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1.19 Summary

Key Terms

✓ Allergic reaction	✓ Heat cramps	✓ Opioids
✓ Anaphylaxis	✓ Heat exhaustion	✓ Poisoning
✓ Asthma	✓ Heat stroke	✓ Safety data sheet
✓ Depressants	✓ Hyperglycemia	✓ Seizure
✓ Fainting	✓ Hypoglycemia	✓ Stimulants
✓ Frostbite	✓ Hypothermia	✓ Stroke
✓ Hallucinogenics	✓ Naloxone	✓ Epinephrine auto-injector
✓ Heart attack	✓ Narcotics	



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Caring for Sudden Illnesses: Summary

Key Terms

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<input checked="" type="checkbox"/> Anaphylaxis	<input checked="" type="checkbox"/> Heat exhaustion	<input checked="" type="checkbox"/> Poisoning
<input checked="" type="checkbox"/> Asthma	<input checked="" type="checkbox"/> Heat stroke	<input checked="" type="checkbox"/> Safety data sheet
<input checked="" type="checkbox"/> Depressants	<input checked="" type="checkbox"/> Hyperglycemia	<input checked="" type="checkbox"/> Seizure
<input checked="" type="checkbox"/> Fainting	<input checked="" type="checkbox"/> Hypoglycemia	<input checked="" type="checkbox"/> Stimulants
<input checked="" type="checkbox"/> Frostbite	<input checked="" type="checkbox"/> Hypothermia	<input checked="" type="checkbox"/> Stroke
<input checked="" type="checkbox"/> Hallucinogenics	<input checked="" type="checkbox"/> Naloxone	<input checked="" type="checkbox"/> Epinephrine auto-injector
<input checked="" type="checkbox"/> Heart attack	<input checked="" type="checkbox"/> Narcotics	



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Rescues and Moves

1. Content

1.1 Welcome



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**Rescues, Triage, and
Emergency Moves**

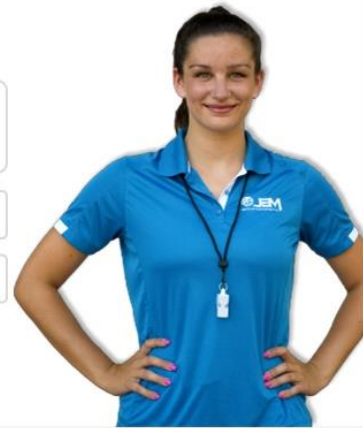
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Notes:

1.2 Learning Outcomes

Learning Outcomes

- 1 Describe how to remain safe when confronted with rescue situations involving dangerous environments such as confined space, hazardous materials, electricity, smoke, fire, water, and ice.
- 2 Describe how to prioritize care when there are more victims than rescuers.
- 3 Describe how to safely move victims in emergency situations.




Notes:

Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves - Learning Outcomes

Learning Outcomes

- 1 Describe how to remain safe when confronted with rescue situations involving dangerous environments such as confined space, hazardous materials, electricity, smoke, fire, water, and ice.
- 2 Describe how to prioritize care when there are more victims than rescuers.
- 3 Describe how to safely move victims in emergency situations.



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1.3 Rescues

Rescues

Dangerous rescue situations can include:

- Confined space
- Hazardous materials
- Smoke and Fire
- Motor vehicle collision
- Water, Ice, or Electricity



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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves - Rescues

Rescues

Dangerous rescue situations can include:

- Confined space
- Hazardous materials
- Smoke and Fire
- Motor vehicle collision
- Water, Ice, or Electricity



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1.4 Rescues - General Safety Guidelines

Rescues - General Safety Guidelines

- Do not put yourself at risk trying to rescue a victim.
- Do not attempt any rescue technique for which you have not been trained or do not have proper equipment.
- Summon EMS personnel.
- Try to make the surrounding area safe for others.




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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves – Rescues - General Safety Guidelines

Rescues - General Safety Guidelines

- ✓ Do not put yourself at risk trying to rescue a victim.
- ✓ Do not attempt any rescue technique for which you have not been trained or do not have proper equipment.
- ✓ Summon EMS personnel.
- ✓ Try to make the surrounding area safe for others.



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1.5 Rescues - Confined Space

Rescues - Confined Space

- ✓ An area with restricted openings and potentially dangerous atmosphere.
- ✓ Examples:
 - ✓ Wells
 - ✓ Mines
 - ✓ Caves
 - ✓ Manholes
 - ✓ Storage tanks
 - ✓ Farm silos




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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves – Rescues – Confined Space

Rescues - Confined Space

- An area with restricted openings and potentially dangerous atmosphere.
- Examples:
 - Wells
 - Mines
 - Caves
 - Manholes
 - Storage tanks
 - Farm silos



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1.6 Rescues - Hazardous Materials

Rescues - Hazardous Materials

- Hazardous materials include:
 - Flammable
 - Explosive
 - Corrosive
 - Radioactive
 - Biological
- Stay upwind a half mile away from any hazardous materials incident.




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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves – Rescues – Hazardous Materials

Rescues - Hazardous Materials

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 - Explosive
 - Corrosive
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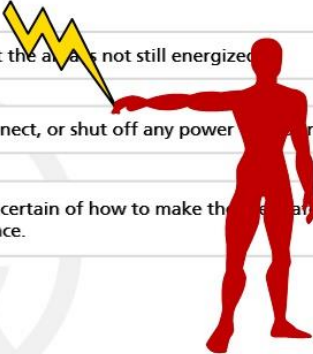
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1.7 Rescues - Electricity

Rescues - Electricity

- Make sure that the area is not still energized.
- Unplug, disconnect, or shut off any power in the area.
- If unable or uncertain of how to make the area safe, activate EMS and stay at a safe distance.




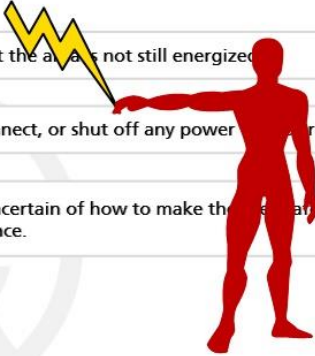
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Standard First Aid: Rescues, Triage, and Emergency Moves – Rescues – Electricity

Rescues - Electricity

- ✓ Make sure that the area is not still energized.
- ✓ Unplug, disconnect, or shut off any power in the area.
- ✓ If unable or uncertain of how to make the area safe, activate EMS and stay at a safe distance.



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1.8 Rescues - Smoke and Fire

Rescues – Smoke and Fire

- ✓ If the fire is small and you have a fire extinguisher available:
- ✓ Remove the pin.
- ✓ Aim at the base of the flames.
- ✓ Expel the contents of the extinguisher in a sweeping motion.




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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves – Rescues – Smoke and Fire

Rescues – Smoke and Fire

- ✓ If the fire is small and you have a fire extinguisher available:
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1.9 Rescues - Water and Ice

Rescues – Water and Ice

- ✓ Water and ice rescue steps:
- ✓ REACH - Extend an object
- ✓ THROW - Throw a floatable object
- ✓ ROW - Paddle to the victim
- ✓ GO - Swim near the victim and extend an object




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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves – Rescues – Water and Ice

Rescues – Water and Ice

- ✓ Water and ice rescue steps:
- ✓ REACH - Extend an object
- ✓ THROW - Throw a floatable object
- ✓ ROW - Paddle to the victim
- ✓ GO - Swim near the victim and extend an object



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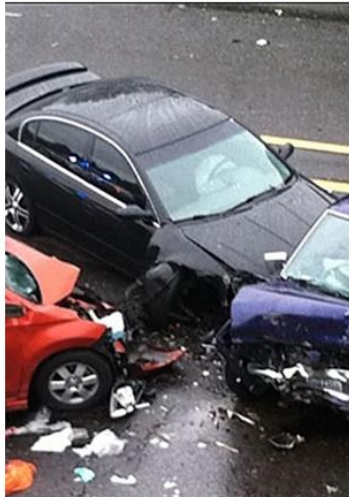
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1.10 Rescues - Motor Vehicle Crash

Rescues – Motor Vehicle Crash

- ✓ Safety steps for assisting a victim of a motor vehicle crash:
- ✓ Place roadside reflectors or flares at least 250 feet from the crash site.
- ✓ Park your vehicle well off the roadway.
- ✓ Assess any victims and provide care until EMS personnel arrive.
- ✓ Only attempt to remove a victim from a vehicle if there is an immediate life threat.
- ✓ Turn off the ignition of the damaged vehicle.




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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves – Rescues – Motor Vehicle Crash

Rescues – Motor Vehicle Crash

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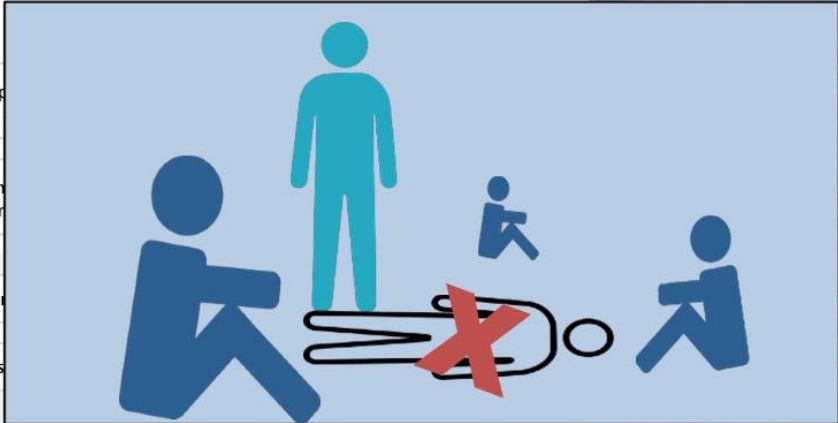
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1.11 Triage

Triage

- ✓ Triage is the process of prioritizing patients based on the severity of their injuries.
- ✓ Used when there are more patients than can be cared for immediately.
- ✓ Structures that are at risk of collapse.
- ✓ Terrorist attacks.



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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves - Triage

Triage

- ✓ Triage is the process of sorting victims based on the severity of their injuries.
- ✓ Used when there are more victims than can be cared for immediately.
- ✓ Structures that are damaged.
- ✓ Terrorist attacks.



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1.12 Triage - Process

Triage - Process

1. Establish a safe area.
2. Triage victims in order of severity.
 - ✓ Close to death
 - ✓ Unresponsive and not breathing = Cardiac Arrest
 - ✓ Minor wounds
3. Enter the area if it is safe to do so and assess the most serious injuries.
 - ✓ Lesser burns
 - ✓ Closed small bone fractures
4. Instruct victims on self-care.
 - ✓ Back injuries
 - ✓ Quickly move on to assess each victim.
5. Return to provide care to the most serious.




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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves – Triage - Process

Triage - Process

- ✓ ~~Unresponsive and not breathing = Cardiac Arrest~~ Unresponsive and not breathing = Cardiac Arrest
- ✓ ~~Minor wounds~~ Minor wounds
- ✓ ~~Lesser burns~~ Lesser burns
- ✓ ~~Closed small bone fractures~~ Closed small bone fractures
- ✓ ~~Back injuries~~ Back injuries
- ✓ ~~Quickly move on to assess each victim.~~ Quickly move on to assess each victim.
- ✓ ~~Return to provide care to the most serious.~~ Return to provide care to the most serious.



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1.13 Emergency Moves

Emergency Moves - Categories **3** DANGERS

- ✓ Used when a dangerous scene cannot be secured, requiring the victim to be moved immediately.
- ✓ Before moving a victim, you must ensure the scene is safe and you have enough people to move the victim.
- ✓ Possible causes of injury include fire, falling objects, and traffic.
- ✓ Size and weight of the victim, the location of the injury, and the type of injury you must move the victim.



bystanders


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Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves – Emergency Moves

Emergency Moves - Categories **3** DRAGS

- ✓ Used when a dangerous scene cannot be secured, requiring the victim to be moved immediately.
- ✓ Before moving a victim, you must assess the scene for hazards and bystanders.
- ✓ Possible causes of injury include falls, slips, trips, and vehicle accidents.
- ✓ Size and weight of the victim determine the method you must use to move the victim.



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Navigation icons: back, forward, search, refresh, pause, play.

1.14 Summary

Key Terms

- ✓ Rescues
- ✓ Emergency Moves
- ✓ Assists
- ✓ Triage
- ✓ Drags
- ✓ Carries



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Navigation icons: back, forward, search, refresh, pause, play.


Notes:

Progress (Slide Layer)

Standard First Aid: Rescues, Triage, and Emergency Moves - Summary

Key Terms

- ✓ Rescues
- ✓ Emergency Moves
- ✓ Assists
- ✓ Triage
- ✓ Drags
- ✓ Carries



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