**FIRST AID**
**EMERGENCY SCENE MANAGEMENT (ESM)**

Scene Survey:
Every emergency is different, so the amount to be done in each of the steps that will follow may vary.

1. **Assess hazards and make the area safe**
   
   Your safety comes first! If you cannot enter the area without risking your safety, don’t do it, call Emergency Services immediately and wait for them. If you think you can safely enter the area, look around the emergency scene for anything that can be dangerous or hazardous to you, the casualty or anyone else at the scene. Do whatever you can to make the area safe. Bystanders can help with making the area safe.

2. **Take charge of the situation**
   
   If you are the first aider on the scene act fast. If someone is already in charge, briefly introduce yourself and see if that person needs any help. If there is any chance the casualty could have a head or spinal injury, tell them not to move!

3. **Get Consent**
   
   Always identify yourself as a first aider and offer to help. Always ask for consent before touching a conscious adult casualty and always ask for consent from a parent or guardian before touching an unconscious or conscious child or infant. With an unconscious adult casualty consent is implied as it is generally accepted that most people want to live.

4. **Assess Responsiveness**
   
   Is the casualty is conscious or unconscious? Note their response while you are asking them for their consent. If they respond continue with the primary survey, and if they don’t respond, be aware that an unconscious casualty is or has the potential of being a breathing emergency.

5. **Call out for help**
   
   This will attract bystanders. Help is always useful in an emergency situation. Anytime you need help just call out. Someone can be called over to phone for medical help. Others can bring blankets if needed, get water etc. A bystander can help you.
FIRST AID
EMERGENCY SCENE MANAGEMENT (ESM)

PRIMARY SURVEY
Is the first step in assessing the casualty for life threatening conditions and giving life saving first aid.

In the primary survey you must check for the PRIORITIES OF FIRST AID

A = AIRWAY To ensure a clear airway
B = BREATHING To ensure effective breathing
C = CIRCULATION To ensure effective circulation

Even if there is more than one casualty, perform a primary survey on each casualty. Give life-saving first aid only.

The sequential steps of the primary survey should be performed with the casualty in the POSITION FOUND unless it is impossible to do so. Give first aid for life threatening conditions as you find them while checking the ABCs.

** RESPONSIVE CASUALTY **

A: Check the Airway – Ask “What happened?”. Judge how well the casualty answers as this will tell you if the airway is clear

B: Check for effective breathing.

If breathing is strong
If the breathing is weak...

C: Check Circulation

- Control obvious severe bleeding
- Check for shock by checking skin condition and temperature
- Check with a rapid body survey for hidden, severe external bleeding and signs of internal bleeding

- Assess quality of breathing (rate, depth
- If breathing is ineffective, assist with breathing if trained to do so
- If breathing is effective, check circulation

Irregular breathing may be present in Cardiac Arrest casualties. Casualties are likely to be gasping for breath with no regular pattern or depth. THIS IS NOT REGULAR breathing

** UNRESPONSIVE CASUALTY **

A: Open the airway
Use the head-tilt chin-lift (or jaw-thrust without head-tilt if trained)

B: Check for breathing
Keep the airway open.
Look, listen and feel.

If breathing is regular
If person is not breathing
If breathing is weak

- Control obvious severe bleeding
- Check for shock by checking skin condition and temperature
- Check with a rapid body survey for hidden, severe external bleeding and signs of internal bleeding

- Assess quality of breathing (rate, depth
- If breathing is ineffective, assist with breathing if trained to do so
- If breathing is effective, check circulation

Irregular breathing may be present in Cardiac Arrest casualties. Casualties are likely to be gasping for breath with no regular pattern or depth. THIS IS NOT REGULAR breathing

Give 2 breaths

NOTE: If you are trained to take a pulse do so after the two breaths. If a pulse is present, start AR. If a pulse is not present or you are not sure, begin CPR.

Circulation
Begin CPR to circulate blood to the brain
Apply a defibrillator if available
SECONDARY SURVEY

The secondary survey is a step by step way of gathering information to form a complete picture of the condition of the casualty. At this stage you are looking for injuries and illnesses that were not revealed in the primary survey.

After giving first aid for life threatening injuries, do a secondary survey if (a) medical help is delayed for more than 20 minutes (b) if you have to transport the person or (c) the casualty has more than one injury.

A secondary survey may be omitted if professional medical help is available.

There are 4 steps to the Secondary survey

1: History of the Casualty

S: Signs and Symptoms. Do you notice any signs or symptoms?
A: Allergies. Does the casualty have any allergies?
M: Medication. Is the casualty taking any medication?
P: Past and present medical history. Ask the casualty for a history of any illnesses or injuries
L: Last meal. What did the casualty last have a meal?
E: Events leading up to the incident. Ask the casualty what happened

2: Assess the vital signs

Level of Consciousness (how awake / alert are they?)
Breathing, is the casualty breathing?
Pulse, is there a pulse?
Skin Temperature, take the casualty’s temperature with a thermometer or use the back of your hand on their forehead to judge

Once you have done steps 1 and 2, proceed to step 3

3: Head to Toe Examination

Do not examine for unlikely injuries. For example, if the casualty cut their hand with a knife while preparing food, there is no need to examine for injuries to the legs. Consider the history of the situation and the signs and symptoms to decide how much of the head-to-toe examination you need to do.

4: Give first aid...

... for injuries or illnesses found...
ON GOING CASUALTY CARE

Once first aid for non-life threatening injuries and illness has been given, one of three things happen.

1. You hand over control of the scene to the casualty, or someone else and end your involvement in the emergency.
2. You stay in control of the scene and wait for medical help to arrive and take over.
3. You stay in control of the scene and transport the casualty to medical help.

1: Give first aid for shock
   - Reassure the casualty
   - Loosen tight clothing
   - Place the casualty in the best position for the condition
   - Cover the casualty to preserve body heat

2: Monitor the casualty’s condition
   - check the ABCs often
   - give nothing by mouth

3: Record the events of the situation
   - Protect the casualty’s belongings

4: Report on what happened
   - Tell whoever takes over what happened, what kind of injuries are involved and what first aid has been given

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RECOVERY POSITION

The recovery position keeps an unconscious person’s airway open. Always put a semiconscious or unconscious person into the recovery position if you cannot constantly monitor the person’s breathing. The method below is the preferred one.

1. Place the near arm straight out.
2. Place the far arm with the back of the hand over the near cheek.
3. Roll the casualty towards you by pulling the far knee towards you and to the ground
4. Adjust the hand under the head so the neck is extended.
5. Continue ongoing casualty care
6. Hold the infant face down with the mouth and nose clear.