

First Aid Conference 2022

Primary Survey

First aid for broken bones, sprains and strains





Primary survey following DRABC

Danger

Response

Alert
Voice
Pain
Unresponsive

Airway
Breathing
Circulation



SAMPLE history taking

Sign and symptoms

Allergies

Medication

Past medical history

L ast meal/drink

Events leading up to injury/illness



Secondary survey

Top to toe examination

Head and face

Neck

Chest

Abdomen

Limbs

Back



Documenting and reporting

If possible write down information for the emergency services (DRABC and SAMPLE as a guide)

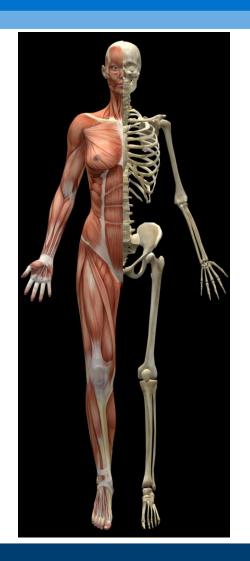
Make a note of the event for yourself (Date, time, brief description, what did you do)

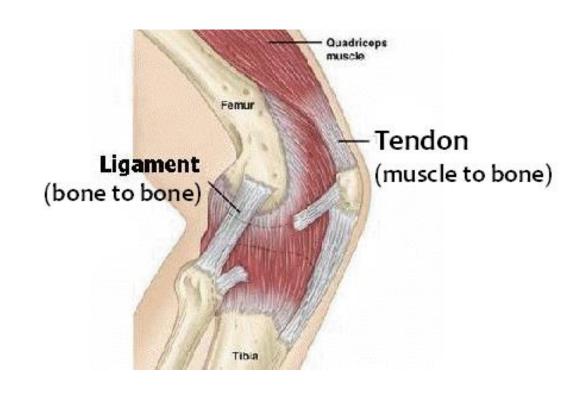
If you attended in your role as University First Aider, report to the Safety Office via the University Accident/Incident Online Reports using AssessNET

If you have any concern regarding the incident, talk to your colleagues, fellow First Aiders, family members or staff counselling service



First aid for broken bones, sprains and strains



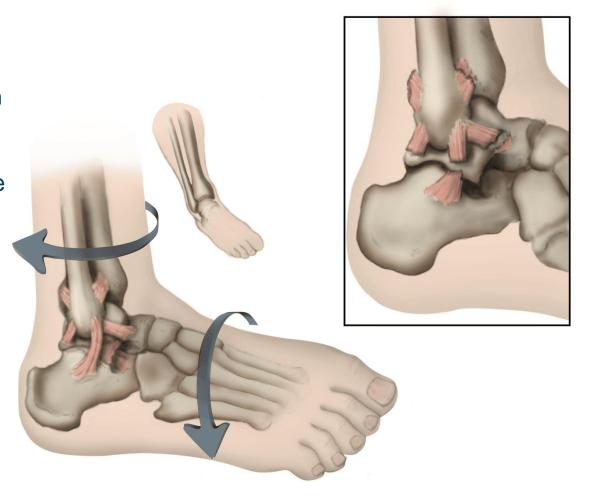




Sprain

 Stretch and/or tear of a ligament caused by a sudden pull

 One or more ligaments can be injured at the same time

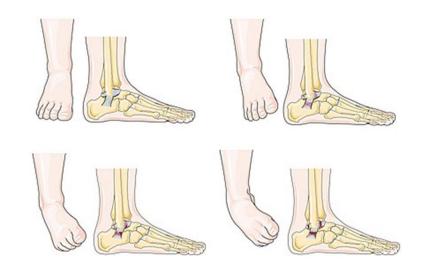


What causes a sprain?

Where do they commonly occur?

- fall
- sudden twist
- blow to the body that forces a joint out of its normal position and stretches or tears the ligament supporting that joint

- most common: ankle
- frequently occur at the wrist
- sprain to the thumb common in skiing and other sports



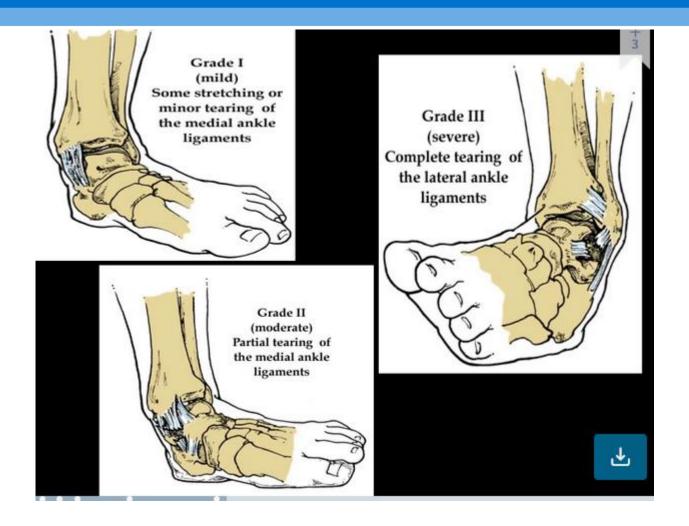


What are the signs and symptoms of a sprain?

- pain
- swelling
- bruising
- loss of functional ability
- sometimes a pop or tear noise when it happens



Different grades of sprains

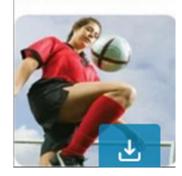


Strain

- injury to either a muscle or a tendon as a result of suddenly pulling them too far
- simple overstretch of muscle or tendon, or a result of a partial or complete tear









What causes a strain?

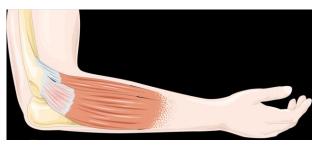


Twisting or pulling a muscle or a tendon

Acute or chronic

Recent trauma or result of overuse

Tendinitis (Elbow strain)



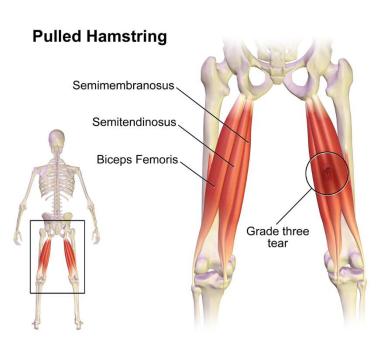
Archilles Tendonitis

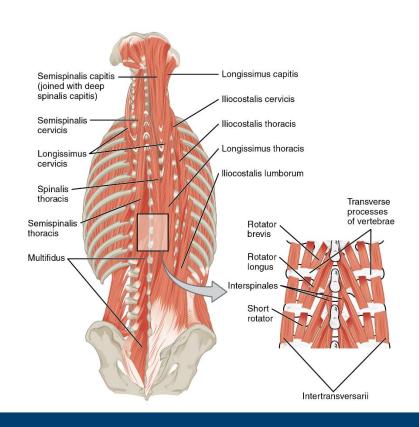


Where do strains usually occur?

Two common sites: the back and the hamstring muscle

but also hand and forearm, elbow







What are the signs and symptoms of a strain?



Pain, limited motion, muscle spasm, possibly muscle weakness

Localised swelling, cramping or inflammation

Loss of muscle function with minor or moderate strains



Assessment of injuries

SAMPLE

History:

Ask the patient what happened

- Violent blow or fall
- Snapping sound
- Sharp pain

Top to toe examination

- Difficulty moving limbs
- Pain made worse by movement
- Distortion
- Compare
 - One side of the body against another (shortening, bending or twisting)

Visualise:

Try to imagine what happened

X-ray

Injury may not be obvious



How are sprains and strains treated?



RICE therapy

Rest

Ice

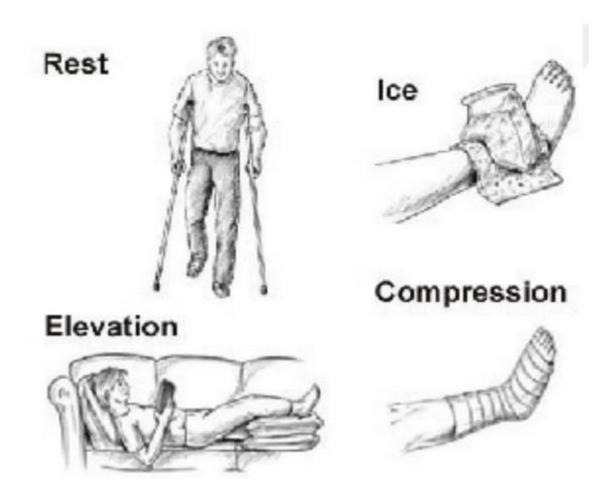
Comfort

Elevation





"old" RICE





Rest



Rest

Stop using injured part Support injured part



Ice



Keep damp or dry cloth between skin and ice pack

Do not apply ice for longer than 15 to 20 minutes at a time

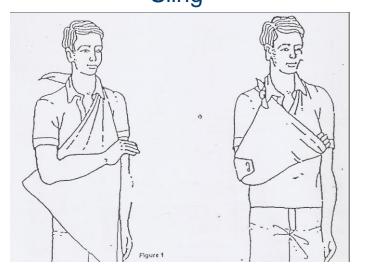




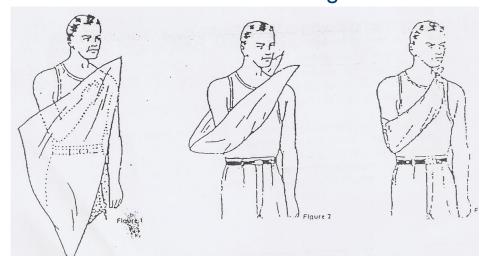


Utility of a triangular bandage

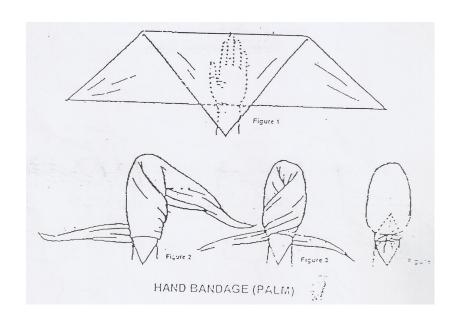
Sling

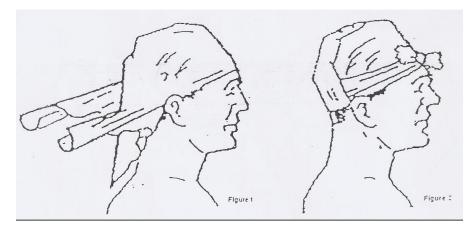


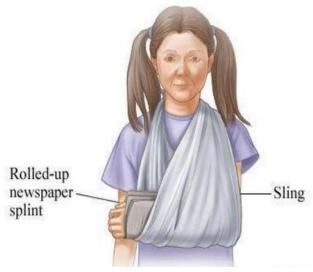
Elevated sling



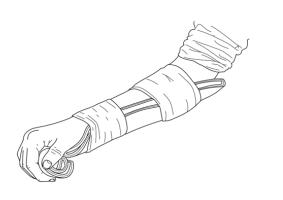
Triangular bandage (continued)







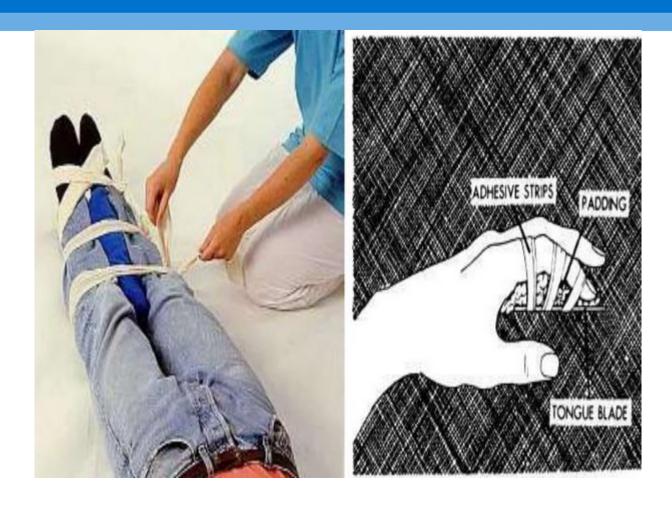






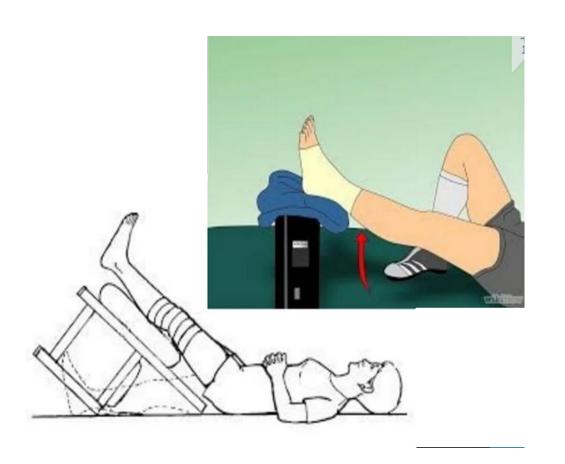








Elevation



Elevate injured part above the level of patient's heart

Decreases swelling and pain

Use objects and pillows for props



As part of secondary survey and after applying bandages, slings, etc

Check:

M ovement

S ensation

C irculation

Can the injured part move (with potential limits)

Can you feel me touching the area distal from injury

Is there capillary refill?

Any of these checks compromised at secondary survey, refer patient to hospital

Any of these checks compromised after applying a bandage, loosen the bandage





Rest

Ice

Comfort

Elevation



Referral





Princess Alexandra Hospital A&E patients warned of 13-hour wait

3 June

NHS England already under as much pressure as in winter, says boss

15th June 2022

Local people are being asked 'is it an emergency' before attending A&E

Written on 29 March 2022.





When should you call 999



If you or the person you are with are not in life-threatening danger, use the following:

Pharmacy

NHS 111

For medical help but when it's not an emergency

Walk-in centres

Find your nearest one

GP Out of Hours

Call NHS 111

If it is life-threatening, you MUST call 999

CARDIAC ARREST COLLAPSE **UNCONSCIOUSNESS**

- Unconscious and not breathina - No pulse
 - Unresponsive

HEART ATTACK CHEST PAIN

- Pains through
- Shortness of breath
- Clammy

CONVULSIONS / FITTING

- STROKE SYMPTOMS
- Paralysis Weakness in
 - arms - Dizziness and confusion
 - Muddled speech

TRAUMATIC/ SERIOUS INJURY

- Major blood loss
- Bone fracture

SEVERE BURNS/ **SCALDS**

- Red or peeling skin
 - Swelling
 - Blisters

CHOKING

- Airway suddenly blocked, either fully or partly
- Unable to breathe

DROWNING

- Blocked airways - Exposure to
- cold

SEVERE ALLERGIC REACTIONS

- Swelling of the throat and mouth
- Difficulty swallowing or speaking
- Difficulty breathing





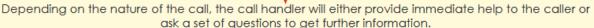
What happens when you call 999?

East of England Ambulance Service NHS



A call handler answers and checks the reason for calling, the caller's telephone number, and address of the incident. As these details are being taken, the information appears on screens in front of our dispatchers,

who assign the response to that call.



These questions will not delay help being arranged and will help us to make sure you get the correct help.

At the end of the telephone assessment, the call is given a category based on the information given by the caller. The call handler may stay on the line, offering further practical help and advice where necessary.

Red

Green

GREEN 3

Non emergency call

Examples:

- Sick or unwell

Non-serious assault injury



RED 2

Immediately life-threatening

(most time critical patients) Examples:

- Cardiac arrest - Life-threatenina traumatic injury

Immediately life-threatening

Examples: - Chest pain

Serious breathing difficulties



The target is to arrive at these patients within eight minutes in 75% of cases.

GREEN

Serious but not life-threatening

Examples: Diabetic problems

- Suspected stroke with no serious symptoms

These require an emergency response to arrive in 20 minutes in 75% of cases.

In some cases patients may receive a telephone assessment by a clinician in the first instance to better understand the

GREEN 2 Serious but not life-threatening

> Examples: - Fall with injuries - Suspected fractured

arm or lea

These require an emergency response to arrive in 30 minutes in 75% of cases.

These require an on-scene response within 50 mins OR a phone assessment from our clinical support desk (CSD) within 20 min in 75% of cases.

GREEN 4

Non emergency call

Examples:

- Sick or unwell

- Minor scaldina

These require an on-scene response within 90 mins OR a phone assessment from our clinical support desk (CSD) within 60 minutes in 75% of cases

Community first responder







Cycle response unit (CRU)

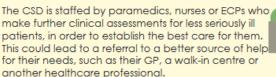
Rapid response vehicle (RRV)



Air ambulance



HEAR & TREAT



An on-scene response will be sent to anybody who needs it.





Bone and joint injuries - dislocation









Displacement of the joint/ bone

Frequently accompanied by a tearing or stretching of ligaments, muscles or other soft tissue



Bone and joint injuries - dislocation



Signs and symptoms

- deformity of joint or limb
- limited or abnormal movement
- swelling and discoloration
- pain and tenderness
- shortening or lengthening of affected limb
- signs of shock



First Aid treatment of dislocation

Immobilise the affected part in the position in which it is found by using splints and/or slings

Avoid any movement of injured part to prevent additional injury to nerves, blood vessels and other tissues in the area

Treat for shock if necessary

Arrange to send or take patient to hospital



Fractures



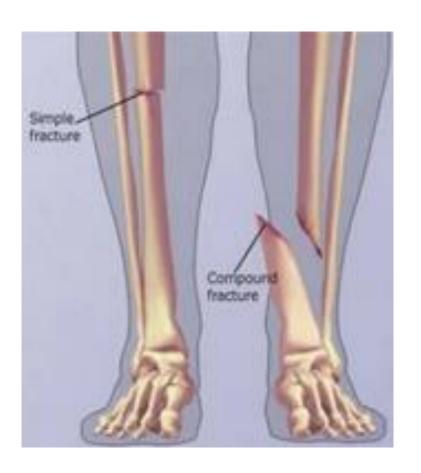
A break or a crack in a bone is called a fracture

Many types of fractures are difficult to determine

If a fracture is suspected, refer to hospital



Fracture categories



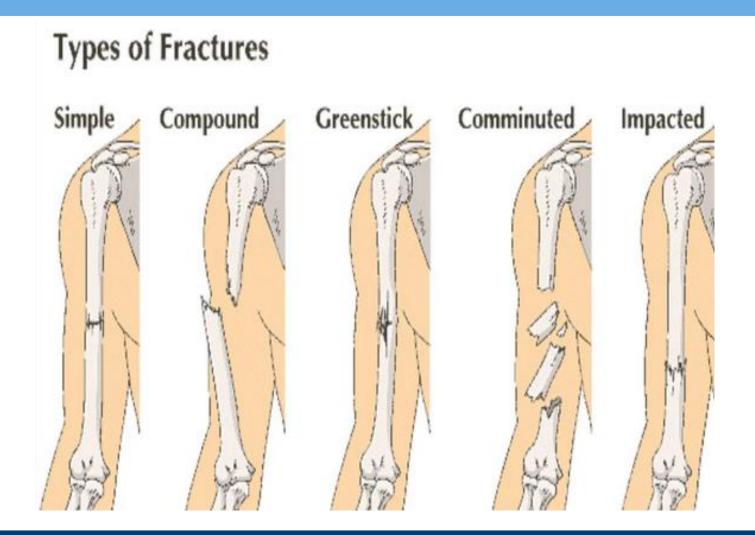
All fractures are one of two types:

Closed – skin over fracture is not broken

Open/ Compound – where the skin over the fracture is broken. The bone(s) may be visible



Further fracture categories





Signs and symptoms of fractures

- pain
- swelling
- bruising
- tenderness
- loss of functional ability
- deformity of joint or limb
- limited or abnormal movement
- swelling and discoloration
- shortening or lengthening of affected limb
- coarse grating (crepitus) of the bone ends that can be heard
- signs of shock (particulary with femur and/or pelvic injury)
- wound, possibly with bone ends protruding



First Aid treatment of fractures

Immobilise the affected part in the position in which it is found by using splints and/or slings

Avoid any movement of injured part to prevent additional injury to nerves, blood vessels and other tissues in the area

Treat for shock if necessary

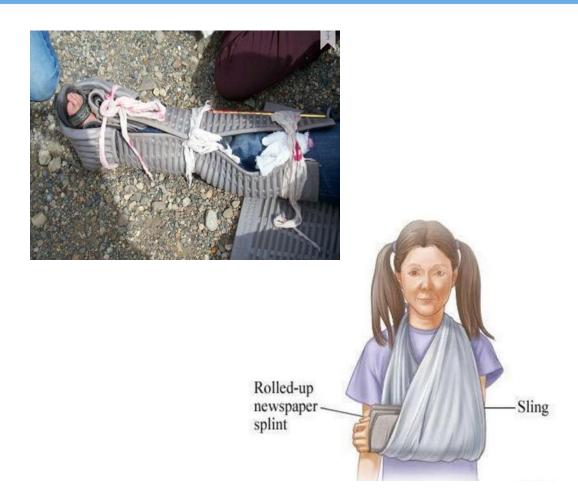
Do not allow to eat or drink

Arrange to send or take patient to hospital

Open fracture:
Cover wound with sterile dressing
Build up pads around protruding bones without pressing on injury









Conclusion

DRABC with AVPU

SAMPLE

RICE(R)

MSC





Thank you for your attention

