

St Andrew's First Aid - Creating a nation of lifesavers

Adult First Aid



Choking

RECOGNITION:

- Sudden onset, coughing;
- Severe obstructions may cause inability to speak/cry/cough (silent cough) and breathe.

STEP 1: If breathing - encourage the casualty to cough and remove any obvious obstruction from their mouth.

STEP 2: If the casualty cannot speak, support them leaning forward and give up to 5 back blows using the heel of your hand between their shoulder blades.

STEP 3: If back blows are unsuccessful, try abdominal thrusts. Place your fist between the casualty's navel and the bottom of their breastbone and grasp with your other hand. Pull sharply inwards and upwards up to 5 times.



WHEN TO CALL 999/112

- If unsuccessful, call for emergency help and repeat steps 2 and 3 until obstruction clears/help arrives.
- If the casualty becomes unresponsive, check for normal breathing. If not breathing normally commence CPR (see page 12-13).

Anaphylaxis

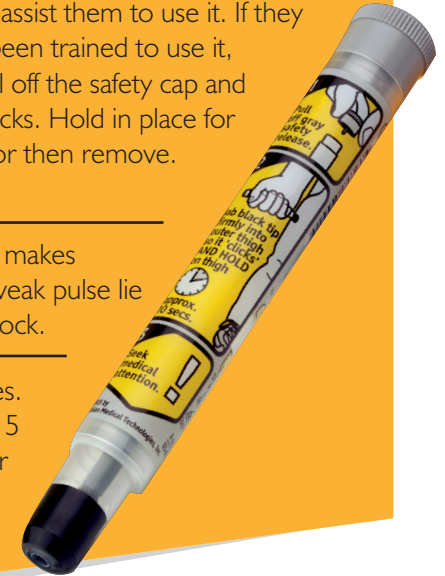
RECOGNITION:

- Red itchy rash or raised areas of skin (weals);
- Red itchy watery eyes;
- Swelling of hands/feet/face;
- Abdominal pain/vomiting;
- Breathing difficulty;
- Pale or flushed skin;
- Visible swelling of tongue;
- Confusion and/or agitation.

STEP 1: If the casualty has an adrenaline auto-injector assist them to use it. If they are unable to use the injector and you have been trained to use it, hold onto the auto-injector with your fist, pull off the safety cap and push the tip firmly against their thigh until it clicks. Hold in place for 3 seconds or as instructed on the auto-injector then remove. Massage the site for 10 seconds.

STEP 2: Help the casualty to sit up in the position that makes breathing easier. If they become pale with a weak pulse lie them down and raise their legs to treat for shock.

STEP 3: Monitor and record vital signs until help arrives. Repeated doses of adrenaline can be given at 5 minute intervals if there is no improvement or symptoms return.



WHEN TO CALL 999/112

- You must **immediately** call 999 or 112 if you suspect anaphylaxis.
- Ensure you let emergency services know if you do not have access to an auto-injector.

Asthma

RECOGNITION:

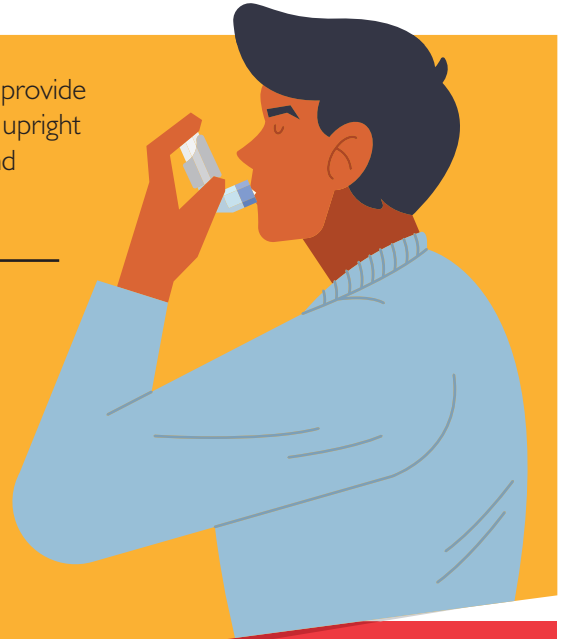
- Distressed or difficulty breathing;
- Wheezing;
- Coughing;
- Difficulty speaking.

STEP 1:

Keep the casualty calm and provide reassurance. Have them sit upright in a comfortable position and provide their usual dose of reliever inhaler.

STEP 2:

A mild attack will resolve quickly. If it does not, provide an additional 1-2 puffs of inhaler every 30-60 seconds, up to a maximum of 10 puffs/ follow personal asthma plan.



WHEN TO CALL 999/112

- If their medication is unavailable;
- If the inhaler has no effect, they are getting worse, they have continued breathlessness causing difficulty taking the inhaler, or they become unresponsive.

Broken bones

RECOGNITION:

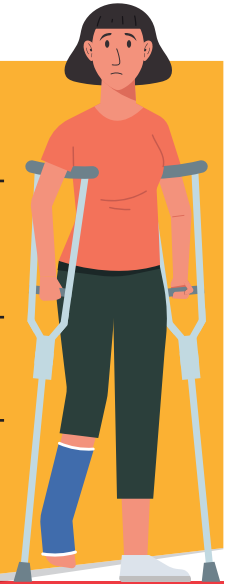
- Deformity, swelling or bruising at suspected break site;
- Pain and difficulty moving affected limb;
- Possible open wound.

STEP 1: Assist the casualty to keep still, supporting joints above and below injured area.

STEP 2: If there is an open wound, apply a dressing and place padding around the injured area for added support to assist with comfort.

STEP 3: Attempt to secure and support with a sling or bandage in the most comfortable position for the casualty.

STEP 4: Take the casualty to a hospital Emergency Department/ Minor Injuries Unit (MIU) for assessment. It is generally safe to take the casualty by car if the injury is not life threatening.



WHEN TO CALL 999/112

- The break is so severe that you can't control the pain;
- The bone is sticking out of the skin; or there is a leg injury and you are unable to self-transport;
- The injured area involves trauma to the head or neck.

Cuts and bleeding

RECOGNITION:

- Grazes;
- Lacerations;
- Puncture, or
- Stab wound.

Note some wounds may have embedded objects in them.

STEP 1: Minor cut/graze: If the wound is dirty, clean it by rinsing the area under running water or use alcohol free wipes. Pat dry using a gauze swab.

Severe bleeding: Apply direct pressure to control the bleeding, using a sterile dressing, clean cloth, or casualty's own hand. Support the injury in a comfortable position for the casualty.

***Do not place direct pressure over, or attempt to remove, an embedded object.**

STEP 2: Once bleeding is under control, secure a wound dressing with a bandage. Ensure it is tight enough to maintain pressure without restricting circulation.

STEP 3: Self-transport to hospital or a MIU if there is a foreign object embedded in the wound or if the wound looks as though it may require stitching.



WHEN TO CALL 999/112

- If you are unable to stop the bleeding;
- It is a severe or life-threatening injury.

Sepsis

RECOGNITION:

- Extreme pain or discomfort;
- Pale, mottled skin;
- Severe breathlessness/rapid shallow breathing;
- Not passing urine;
- Cold hands and feet;
- Slurred speech, confused and drowsy.

STEP 1: Do not wait for all the signs and symptoms to develop. Immediately call 999 or 112 and advise the call handler that you suspect sepsis.

STEP 2: Reassure the casualty and keep them cool by treating any fever.

STEP 3: Monitor and record their vital signs while waiting for help to arrive.



WHEN TO CALL 999/112

- If you suspect sepsis call for help and keep the casualty calm and cool.

Burns and scalds

RECOGNITION:

- Potential breathing difficulty if burn is to the airway;
- Signs of shock if a severe burn.

STEP 1: Cool the injury as soon as possible by flooding with cold water for at least 20 minutes or until pain is relieved.

STEP 2: Gently remove any jewellery or clothing from the affected area before it begins to swell. If clothing/jewellery is stuck do not attempt to pull it off.

STEP 3: When the burn has cooled, cover with kitchen film lengthways down the affected limb to protect from infection.



WHEN TO CALL 999/112

- If the burn is severe – any full thickness burn, any partial thickness burn the size of the casualty's palm; and any burn greater than 5 times the casualty's palm size.
- If the burn is caused by electricity or chemicals; burns involving the airways, eyes, hands, feet or genital area.
- The burn is on a child under 5 years, or an elderly person.

Heart attack

RECOGNITION:

- Persistent, dull, heavy or vice-like central chest pain;
- Breathlessness; abdominal discomfort;
- Feeling faint or dizzy;
- 'Ashen' skin and /or blue lips;
- Rapid, weak pulse;
- Profuse sweating;
- Sense of impending doom.

STEP 1: Make the casualty as comfortable as possible to ease strain on their heart. A half-sitting position on the floor, with head and shoulders supported and knees bent is often best. Place cushions behind the person and under their knees to support them in this position.

STEP 2: Assist the casualty to take one full dose of Aspirin (300mg in total). Advise them to chew it slowly.

STEP 3: If the casualty has angina medicine let them take it, providing help if necessary. Encourage them to rest.

STEP 4: Monitor and record vital signs while waiting for help to arrive. Stay calm to avoid undue stress. Be prepared to commence CPR if the person has a sudden cardiac arrest.



WHEN TO CALL 999/112

- Tell the call handler that you suspect a heart attack.

Head injury

RECOGNITION:

- Brief period of impaired response,
- Scalp wound,
- Dizziness, nausea,
- Memory loss, headache,
- Confusion.

STEP 1: Sit the casualty down. Place cold compress on the injured area and check response levels. Treat any wounds if present.

STEP 2: Regularly monitor and record vital signs.

STEP 3: Leave in care of a responsible person once recovered.

If due to a sporting injury do not allow the casualty to return to sport until assessed by medical staff.



WHEN TO CALL 999/112

- If the casualty's condition is worsening or they become unresponsive/lose consciousness.
- If you suspect a neck or spinal injury – do not attempt to move the casualty.

Seizures

RECOGNITION:

- Loss of or impaired response;
- Rigidity;
- Arching back;
- Convulsive movements;
- Noisy/ difficult breathing.

STEP 1: Place pillows or soft padding around the casualty to reduce chance of injury. **Do not** restrain them in any way.

STEP 2: Protect the casualty's head and loosen any tight clothing, especially around the neck.

STEP 3: Once the seizure has stopped, the casualty may fall into a deep sleep. Place them in the recovery position and keep the airway open. Monitor until they recover.



WHEN TO CALL 999/112

- If repeated seizures or this is their first seizure.
- For seizures lasting more than 5 minutes.
- If they have remained unresponsive for more than 10 minutes after the seizure stopped.

ASSESS A CASUALTY AND LIFESAVING PRIORITIES



Check Casualty's Response

Try and get a response by asking questions and gently shaking their shoulders.

Check: Is there a response?

YES

Leave the casualty in the position found. Identify any injuries, treating the most serious first.

NO

Open the airway and check for breathing

Tilt their head back (palm to forehead) and lift their chin (fingertips of your other hand) to open the airway. Look, listen and feel for breathing – for 10 seconds.

Check: Are they breathing normally?



NO

YES

If possible, leave the casualty in the position they were found. Identify any injuries, treating the most serious first.

If you need to temporarily leave the casualty place them in the recovery position.

Call for help and get a defibrillator

If you are on your own, start CPR immediately and do not leave to search for a defibrillator.

If you have not been trained, or are uncomfortable to provide rescue breaths, give compression only CPR.

If a defibrillator is available: turn the machine on, attach the electrode pads to the casualty's bare chest and follow all voice prompts provided. The machine will advise if a shock is required and either deliver it automatically or tell you to press a button on the unit.

Remember: defibrillators will not shock a normal heart rhythm and are very safe to use.

Begin CPR

Give 30 chest compressions.

Kneel beside the casualty, level with their chest, and place the heel of one hand in the centre of their chest (on their breastbone). Place the heel of your other hand on top of the first and interlock fingers as shown.

Lean over the casualty and keep arms straight to start compressions. Press down vertically 5-6cm in the centre of their chest 100-120 times per minute, or to the beat of 'Staying Alive'.

*Always allow the chest to rise fully between compressions.



Give 2 rescue breaths.

Open the casualty's airway (see page 12). Pinch their nose and form a seal with your mouth around theirs. Blow into the casualty's mouth until their chest rises. Aim for about 1 breath per second.



Continue the cycle of 30 compressions and 2 rescue breaths until:

- emergency help arrives and takes over, or
- the casualty starts breathing normally (monitor them closely while awaiting the arrival of emergency services. Be prepared to recommence CPR if needed), or
- you are too exhausted to continue





Mental health is a state of well-being through which every individual copes with the normal stresses of life – but on average, one person in four experiences some form of mental health issue. Stress is a normal part of living, but it can become harmful when excessive. Chronic (long-term) stress can be triggered in many ways. It can lead to a range of mental health problems from depression, anxiety or eating disorders, to

psychosis and substance misuse.

By identifying the signs of chronic stress or a potential mental health crisis early and encouraging a person to seek help, you can prevent the situation worsening and the severity and duration of a mental illness can be reduced.

For more information on our mental health first aid courses, please speak to your trainer.

5 steps to improve your mental wellbeing

Connect

Connect with people around you: colleagues, family, friends and neighbours. Building stronger relationships can help us to feel happy and secure. Why not try arranging a day out with a friend you haven't seen for a while?



Be active

Take a walk or play a game in the garden with your kids. You don't have to be in the gym to be active. Studies show that physical activity helps maintain and improve mental wellbeing. Find an activity that you enjoy and make it part of your weekly routine.



Give to others

Helping others is not only good for those you are helping but it can also do a lot to improve your own mental wellbeing. Even the smallest act of kindness can make a difference, such as just simply saying thank you. Larger acts, such as volunteering, can also help you to build new social networks.



Keep learning

Learning a new skill can give a sense of achievement and purpose. It doesn't mean you need to go back to school, there are lots of other ways to bring learning into your day-to-day life. Perhaps you could learn to cook your favourite recipe, take up a hobby such as knitting or try playing a musical instrument.



Be mindful

Try to be aware of the present moment. Listen to your thoughts and feelings and be aware of the world around you. This is often referred to as 'mindfulness'. Mindfulness can positively change the way you feel about life and how you deal with challenges.



Remember... it's okay not to be okay.

STROKE

F

Facial weakness

The casualty is unable to smile evenly and the mouth or eye may be droopy.

A

Arm weakness

The casualty is only able to raise one of their arms.

S

Speech problems

The casualty is unable to speak clearly or may not understand the spoken word.

T

Time to call 999/112 for emergency help if you suspect the casualty has had a stroke.

St Andrew's First Aid is Scotland's only dedicated first aid charity, and our mission is to provide everyone in Scotland with the highest standards of first aid skills, services and volunteering opportunities. We believe that no one should suffer or die because they needed first aid and didn't get it. That is why our vast network of volunteers work hard right across the country to provide first aid at events and community education activities.

VOLUNTEER WITH US

St Andrew's First Aid volunteers provide Scottish families with first aid attention at events and community education activities.

To find out about different volunteering opportunities and how to become a volunteer scan here for details.



SUPPORT US

Charitable donations are vital to St Andrew's First Aid because they allow us to continue our lifesaving work and teach more people first aid skills. To make a donation to support our charitable aims please scan here for details.



OUR COURSES

St Andrew's First Aid has training centers located across Scotland offering a wide range of first aid, health and safety, and mental health training courses throughout the year.



FIRST AID SUPPLIES

We offer a comprehensive range of supplies products including first aid kits, consumables, defibrillators, equipment including evacuation chairs, posters, and signs.



COMMUNITY WORKSHOPS

Community workshops are a fantastic way to increase confidence and knowledge in providing first aid. To book a community workshop please complete our booking request form by scanning here.

