First Aid Course at the Workplace Module

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Undergraduate Diploma in Occupational Health and Safety

Emergency Nurse Instructor
Gesmond Micallef

Gesmond has over 37 years of experience, working in the Accident & Emergency Department of a major hospital and in pre hospital care. His background to date has been centered around delivering advanced emergency care. He was trained to work in such situations through real world experiences, involving travelling abroad for training, namely Australia, France, England and Scotland.
He was also a volunteer emergency nurse in major incidents namely in Libya, Mozambique, Tanzania, Egypt, Albania, Kosovo and Tunisia among other countries. Besides having gained experience by delivering hands on emergency care in various countries, he also has teaching experience on the related subject in Malta and around the globe. Through these hands-on experiences, he further gained many strengths that helped him pass on the knowledge, skills and attitudes, to provide safe and effective care in an emergency situation.
Gesmond is a qualified Charge Nurse and Emergency Nurse Instructor. He is licensed with EFR UK, European Resuscitation Council and the University of Malta and acts as an instructor and mentor for the Primary Health Care. He is also a member in the Resuscitation Committee of the Primary Health Care.

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Qualified Emergency Nurse Instructor

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PLEASE
SILENCE
YOUR PHONE

First Aid: Definition

- First aid refers to the emergency or immediate care you should provide when a person is injured or ill until full medical treatment is available.

Role of Responsibilities of the First Aider

The most important role of a first aider is to ensure that the aims of first aid are put into practice in an emergency.

The main aims of first aid are:

- Preserve Life: Administer immediate effective first aid to a casualty in order to save life.
- Prevent the Condition from Worsening: Recognising and treating the cause will assist with preventing the condition from worsening
- Promote Recovery: Administer ongoing first aid and offer constant support until the arrival of qualified medical assistance.

Scene Safety

There is no one more important than you. Before entering a situation, you must make sure that there are no dangers that can harm you, other bystanders, or the casualty. Some of the things to check for include;

- Falling objects
- Oncoming traffic if on the road
- Electrical sources
- Fumes or smoke
- Fires or potential fires
- Broken Glass
- Sharp Objects
- Angry crowds

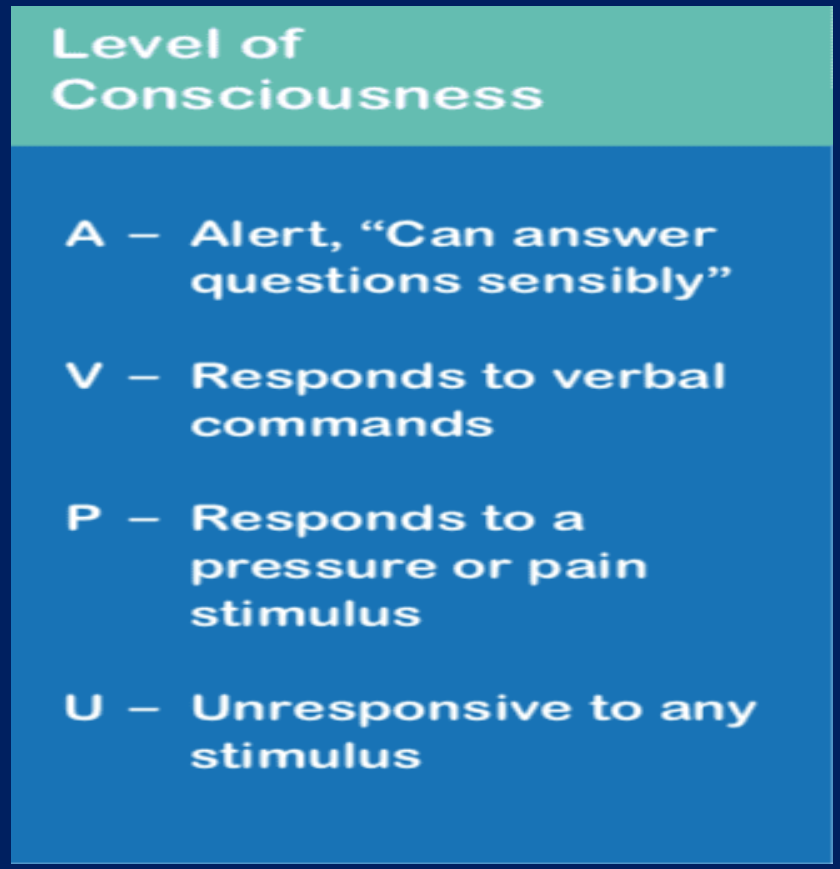
Danger (continued)

Always consider the principles of a SAFE approach.

- Shout for help
- Assess the scene
- Free from Danger
- Evaluate the Casualty

Response

- Check if the casualty is responsive or unresponsive. As you approach them, introduce yourself and ask them questions to see if you can get a response.
- Use the AVPU scale when checking for a response



Responsive Casualty

I am a first aider, can I Help? What is your name? What seems to be the problem? Shake hand and look at the face!

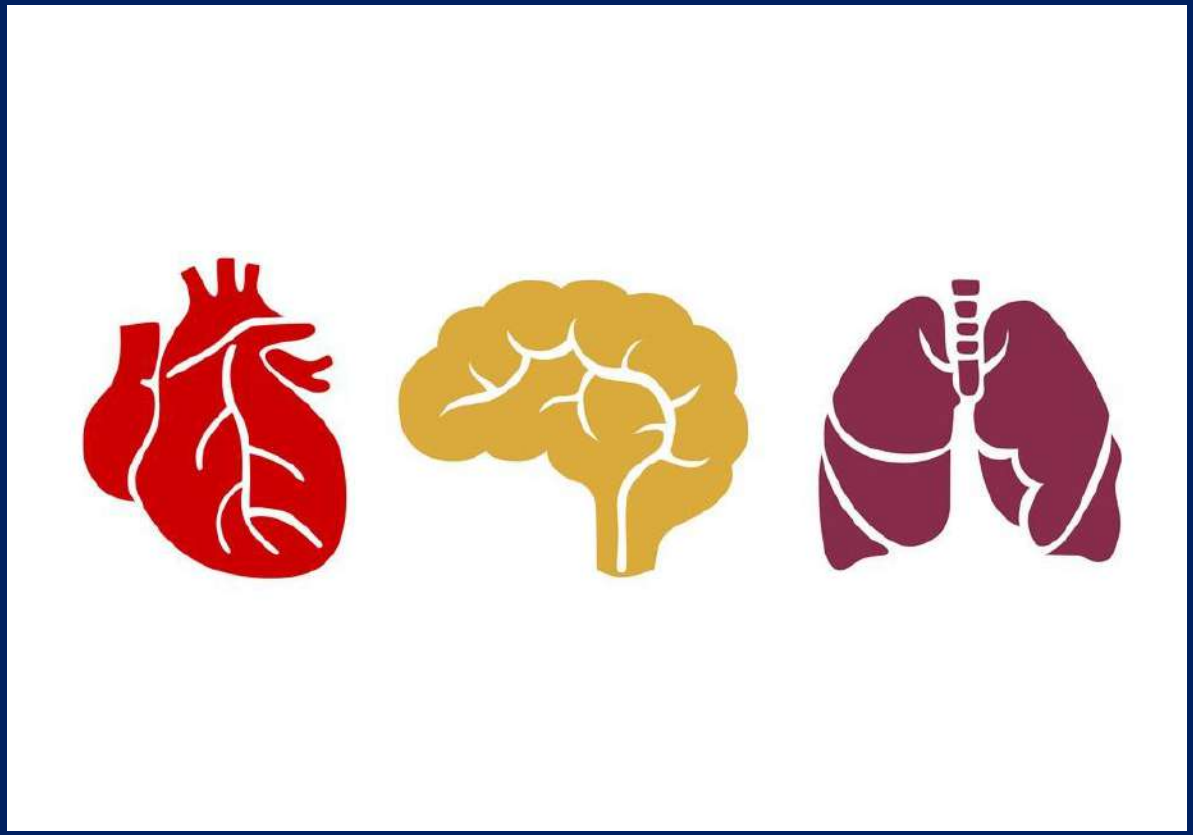
- Listen to any abnormal sounds during response
- Observe for signs of respiratory distress and cyanosis
- Observe for sweating and pale colour
- Assess mental status through verbal responses
- Elicit a chief complaint through verbal response
- Keep in mind: Breathing, Bleeding, Burnes, Bones
- ***If there is still no response from the casualty, you should move on to the next step of the primary survey and call the emergency services for help if they haven't already been called.***

The vital functions A.B.C

Airway

Breathing

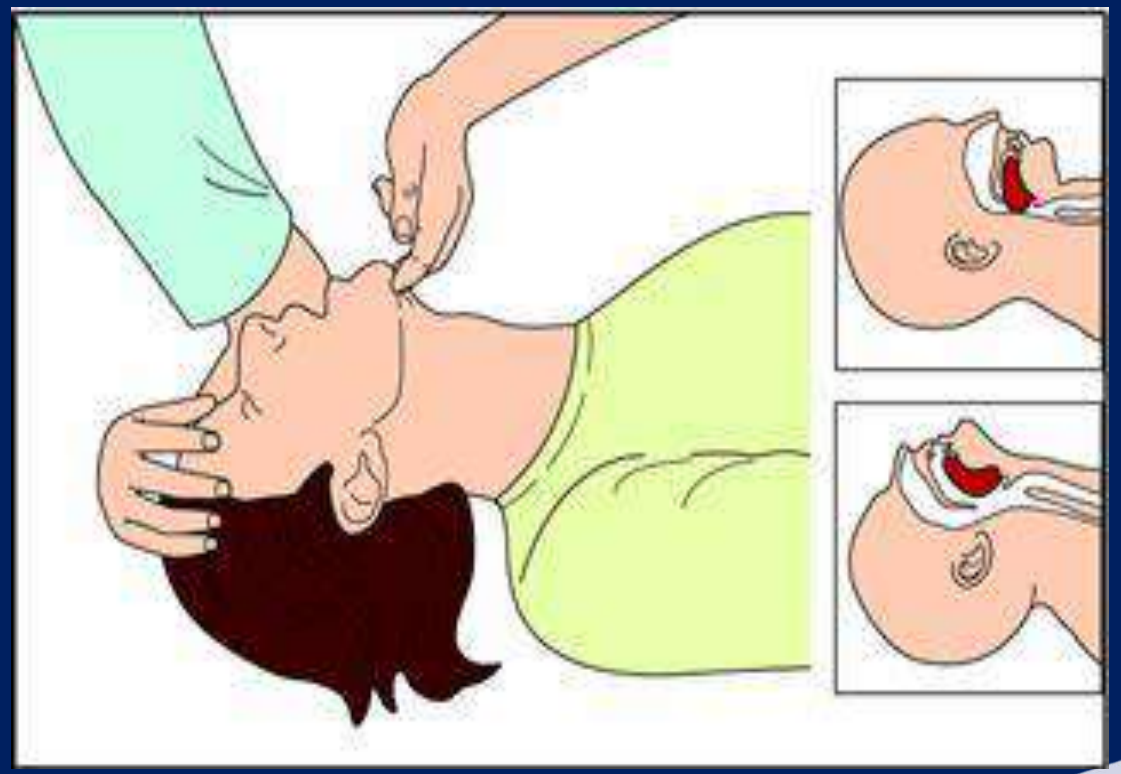
Circulation



Unresponsive Casualty: Open Airway

If the casualty is unresponsive, you should:

- Put your hand on their forehead and gently tilt their head back, lifting the chin (Head tilt chin lift). Do a visual check of their airway for any obstructions.
- Carefully remove any visible obstructions. Do not put your fingers in their mouth if you can't see anything, as this risks pushing a potential blockage further down.
- Move on to the next stage of the primary survey immediately.

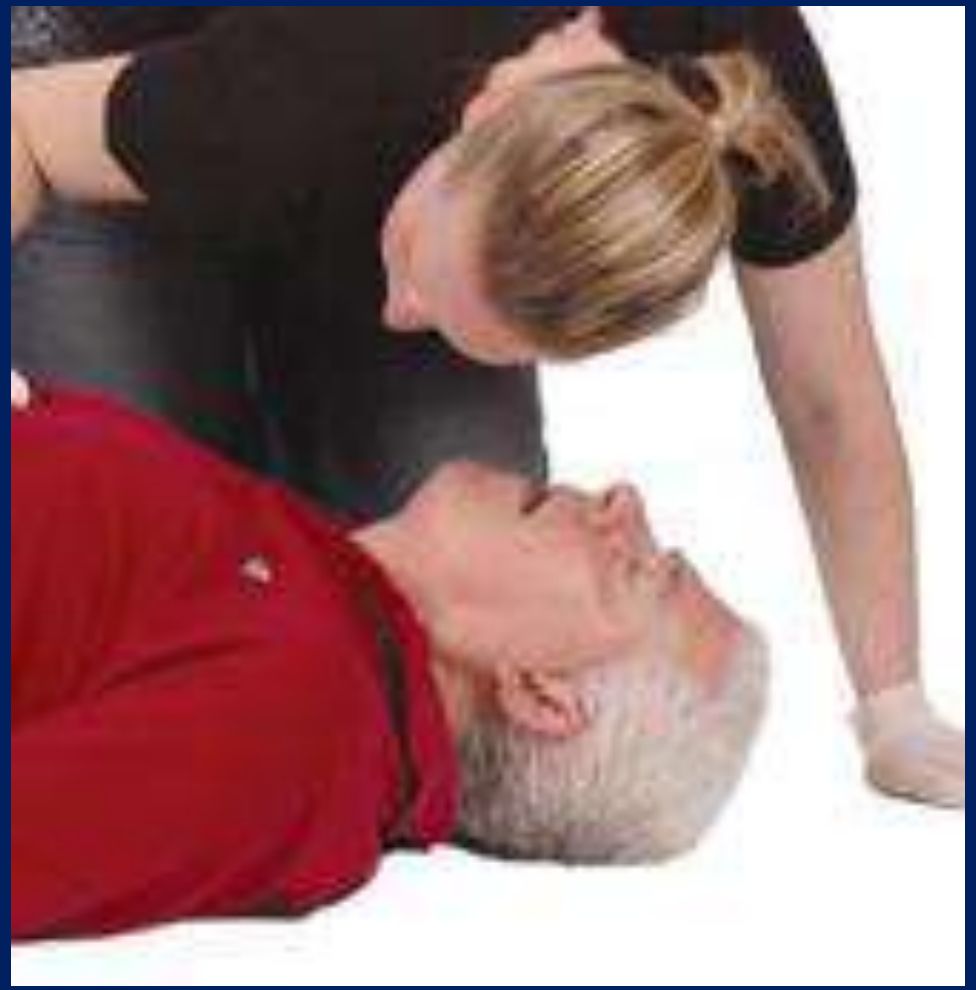


Airway Continued

Blockages in the throat area could be due to:

- Swallowed tongue
- Food or vomit
- Foreign object e.g. False teeth
- Swelling (allergic reaction/Inhalation of fumes)

Breathing



LOOK

LISTEN

FEEL

Breathing (Continued)

- If the casualty is unresponsive and not breathing, you need to call 112 for emergency help and start CPR straight away.
- If the casualty is responsive and breathing move on to circulation.

CIRCULATION

Disorder of the circulatory system

Any condition influencing one of the three main components of the circulatory system can lead to a decrease in circulating blood volume resulting in a lack of tissue perfusion

This is called.....Shock

Circulation Complications

Bleeding

- External
- Internal

Shock

- Hypovolaemic
- Cardiogenic
- Anaphylactic
- Septic
- Neurogenic

Cardiac Illness

Cardiac Arrest

Secondary Survey

- The 4B's
- Breathing/Chest pain
- Bleeding/Shock
- Burns/Wounds
- Bones/Head and Back

- Major Trauma
- Face and Head
- Neck and Spine

- Head to Toe

Secondary Survey
Taking a History

S Signs and Symptoms obtained from the casualty

A Allergies – is the casualty allergic to anything?

M Medications – Is the casualty taking any medications or drugs

P Past Medical History. Significant history of any medical condition

L Time of Last meal

E Events leading up to the incident. What happened? What was the casualty doing

External Clues

- Appointment Card
- Allergy Cards
- Medications
- Key Chains