

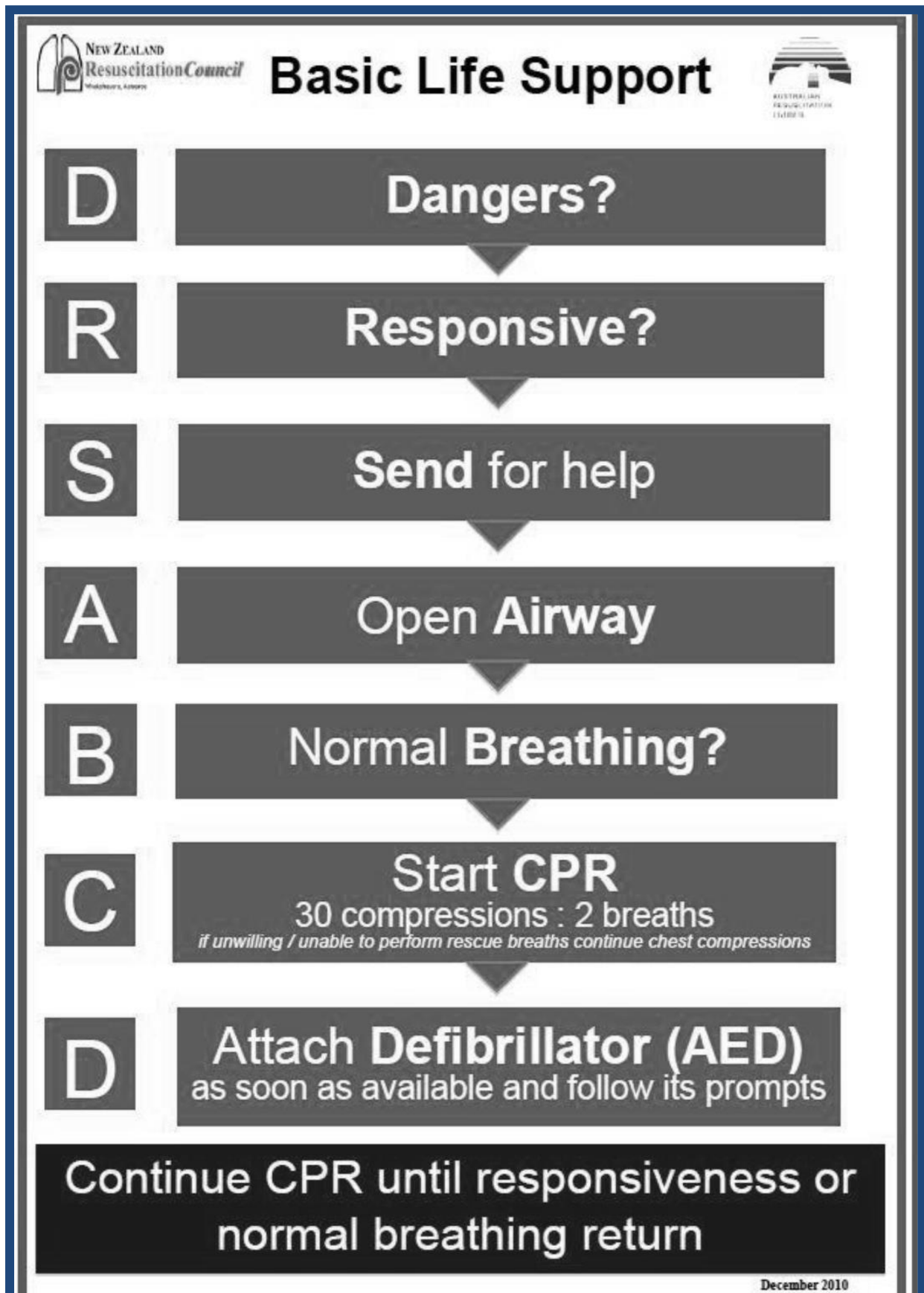
RANELAGH CLUB INC

**First Aid Manual
For Employees**

March 2023

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I-Basic Life Support



II-Defibrillator Flow Chart

D - DANGER

R – RESPONSE

S – SEND FOR HELP

A – CHECK AND CLEAR THE AIRWAY

B – CHECK FOR NORMAL BREATHING (IF A PATTERN OF BREATHING IS PRESENT TURN CASUALTY ON THEIR SIDE TO PROTECT THEIR AIRWAY. IF CASUALTY IS NOT BREATHING ...

C – COMMENCE CPR. 30 COMPRESSIONS & 2 BREATHS - Compress 1/3 of chest size for all ages

D – **DEFIBRILLATION** – **If a Defibrillator is available, switch it on a follow it prompts.**

Two people required to enable a Defibrillator to be attached.

1. One person must continue CPR, the other person can attach the Defibrillator.

2. Remove the Defibrillator from its case

3. Turn the Defibrillator on (Green button)

4. Follow prompts

5. Remove clothing & jewelry from Casualty's chest area

6. If casualty has a very hairy chest, use the enclosed shaver to remove excess hair to enable the pads to attach to the chest

7. Use enclosed towel to dry any moisture from casualty

8. Attach Defibrillator as per diagram

9. Make sure the pads are plugged into the Defibrillator unit

10. Stand clear when analysing heart rhythm

11. Defibrillator Unit will advise: - "Shock advised" or "No Shock advised"

12. When Advised to "SHOCK", ensure no one is in contact with the casualty

13. TO DELIVER SHOCK: advise all people to "STAND CLEAR"
(Paediatric Pad for Under 8yrs)

14. Either press the orange flashing button or the Unit will count down to zero then will automatically deliver the shock.

15. Voice prompts will then advise to continue CPR or not to continue.

16. If advised to continue CPR, it will count down 2 minutes, and then re-analyse.

17. Voice prompts will advise if further shocks are required every 2 minutes.

18. Continue this way until Medical Aid takes over

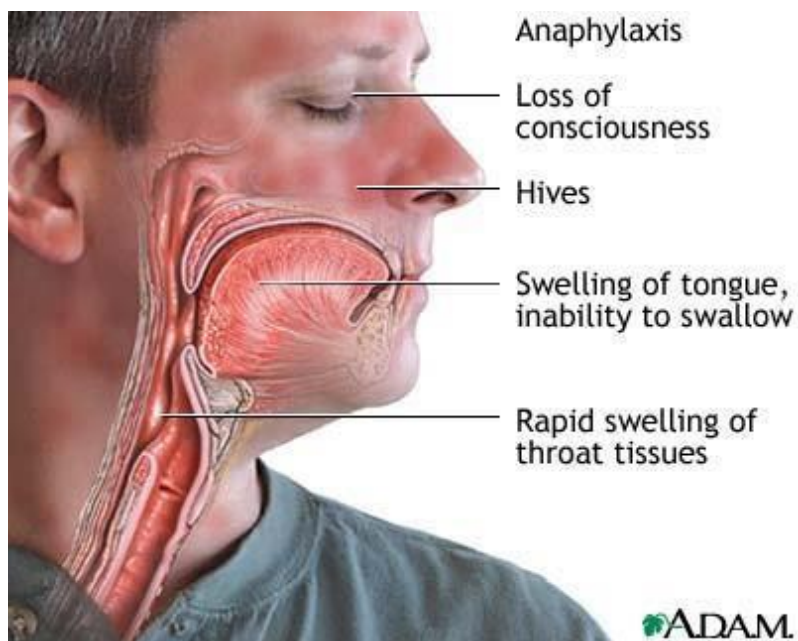
NOTE # PLEASE OBTAIN ADVICE FROM 000 BEFORE PLACING ADULT/CHILDREN PADS ON AN INFANT



iii. Anaphylaxis

Severe Allergic Reaction may include (these symptoms can lead to Cardiac Arrest):

- Feeling faint or fainting
- Difficulty talking and/or hoarse voice
- Swelling of the throat and tongue
- Difficulty breathing and swallowing Wheezing, Persistent Cough
- Stridor breathing (obvious in young children- stomach sinking in with breathing)
- Swollen face and eyes (look like slits).
- Red rash or hives on some of, or spreading over all of the body.
- Abdominal cramping, nausea and /or vomiting. (common in insect stings)
- Losing Consciousness or Unconscious. Pale Floppy (young children)

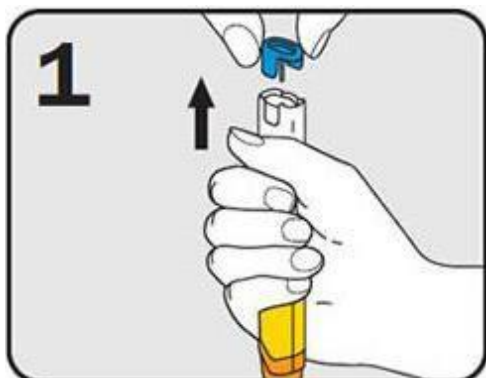


iv. Epi-pen



FIRST AID TREATMENT FOR AN ANAPHYLACTIC REACTION:

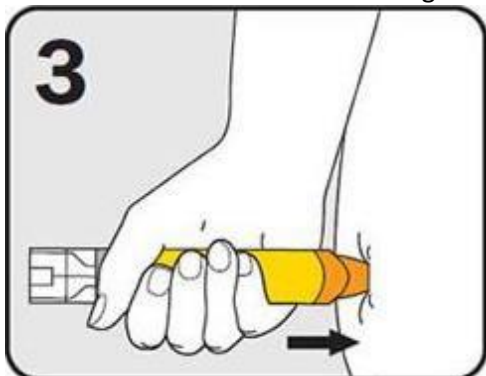
- If no EpiPen is available or First Time reaction, CALL 000 immediately.
- If the casualty has an EpiPen, follow the below steps inject it into their outer thigh
- Check the expiry date.
- Form fist around EpiPen and Pull Blue Safety Release cap off (1).



- Hold leg still and place the ORANGE TIP onto the casualty's outer mid-thigh (1 layer of clothing only or bare skin)



- PUSH DOWN HARD into the thigh until you hear a click, to inject the adrenaline.



- Hold the EpiPen into the thigh for 10 seconds and then rub for 10 seconds
- Call an ambulance (000 or 112 on mobile phone with No Service).
- Keep reassuring the casualty.
- Lay the casualty down and raise their feet if they are in shock.
- If they are having difficulty breathing, raise their shoulders off the ground.
- Note the time you gave the EpiPen.
- A further EpiPen can be given if no improvement after 5 minutes.
- Follow DRSABCD.

v.Foreign Body Airway Obstruction

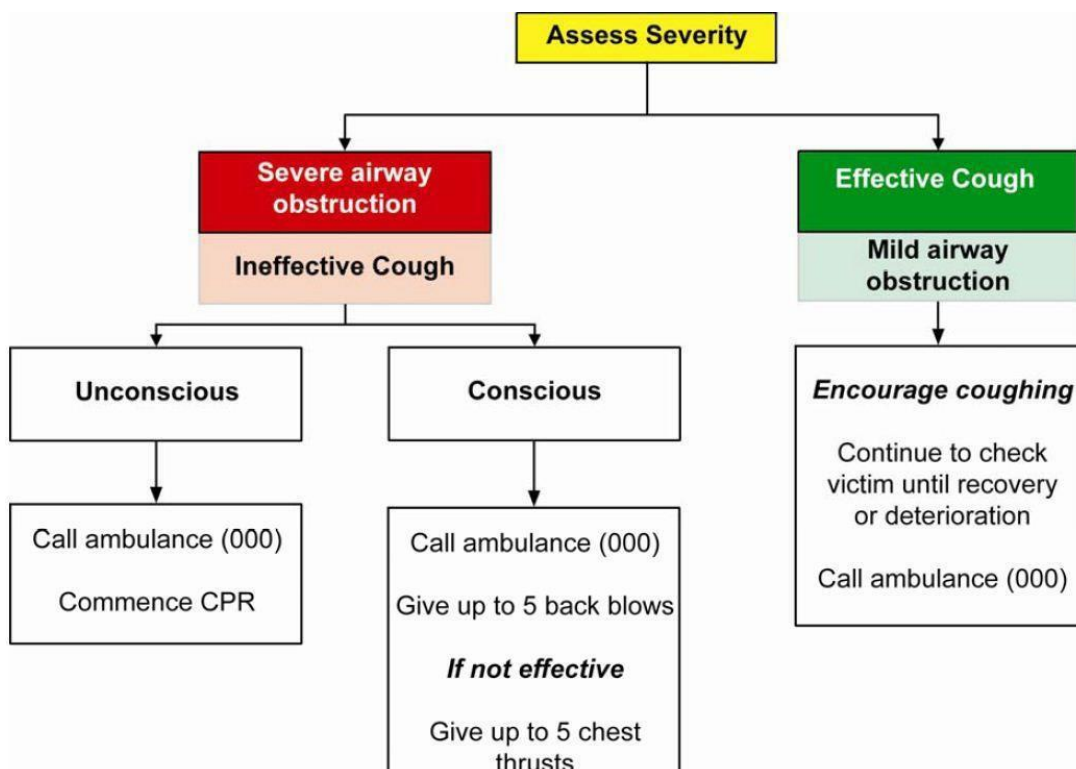
Foreign bodies in the airway can cause either a mild or severe airway obstruction.

MILD AIRWAY OBSTRUCTION

- Coughing, Breathing, Gaspings, Speaking or Crying
- DO NOT SLAP CASUALTY ON THE BACK
- This could cause a severe airway obstruction.
- Encourage them to cough the obstruction out.
- If unsuccessful call an ambulance.

SEVERE AIRWAY OBSTRUCTION – CALL 000

- Looks Panicked, Unable to Speak, Breathe or Cough
- Give 5 BACK BLOWS. Check after each blow to see if the obstruction has cleared.
- If unsuccessful: -
- Give 5 CHEST THRUSTS*. Check after each thrust to see if the obstruction has cleared.
- If unsuccessful: Continue 5 back blows and 5 chest thrusts until the obstruction is cleared or the casualty becomes unconscious. When unconscious, commence CPR.
- *CHEST THRUSTS: - One hand is positioned on the centre of the chest (CPR compression



point) with the other hand on their back. Adults and children should be in a standing or sitting position. Infants should be placed on their back in a head down position across the rescuer's lap.

vi Drowning

Drowning is the process of experiencing respiratory impairment from immersion in liquid. The most important consequence of drowning is interruption of the oxygen supply to the brain. Early rescue and resuscitation are the major factors of survival.

Procedure:

- Follow Basic Life Support flow chart – D R S A B C D.
- Victims of drowning must be rolled onto their side for initial checking.
- While the casualty is on their side, clear the airway and check for breathing.
- If the casualty is not breathing normally, give 2 initial breaths and check breathing again.
- If the casualty is still not breathing normally, then commence CPR immediately.
- DO NOT attempt a water rescue beyond your own swimming ability.
- All casualties involved in a drowning incident must be assessed in hospital.

vii. Burns

Procedure for ALL burns:

- Cool with cold running water for minimum 20 minutes
- Cover with a lint free cloth or clingwrap
- Elevate the burnt part if possible
- Do not Break blisters
- Do not remove clothing stuck to the skin
- Remove jewellery
- Seek Medical Aid

viii. Eye Injuries

All eye injuries are potentially serious and create much anxiety for the casualty, therefore extreme care and reassurance must be given.

Injuries	Causes	Treatment
Foreign bodies	Dust, Grit, Eyelash, Sand, Insect etc.	Check eye, try to remove with wet cotton bud, flush, cover eye seek medical aid
Penetrating object	Metal filing, Glass, Thorn, Twig etc.	Do not remove, cover with a rigid shield seek Medical Aid
Chemicals	Acids, Cleaning fluids, Corrosives, Alkaline etc.	Place affected eye down & flush for 15 mins seek medical aid
Blow to eye area	Fist, Ball, Bat, walking into doors/poles etc.	Check eye & vision, apply cold compress around eye. Seek medical aid

