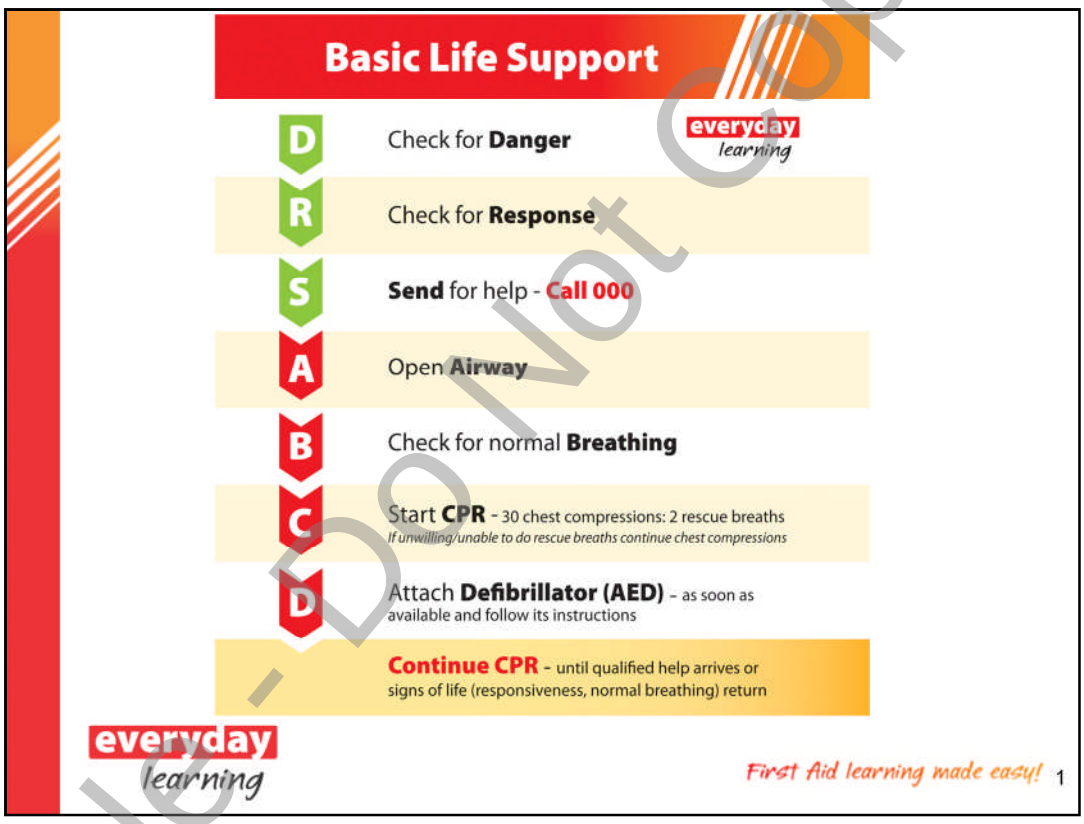

Following the Basic Life Support steps provides an action plan to help make sure that any life threatening conditions are quickly identified and dealt with in order of priority.

Once these steps have been followed then other injuries or illnesses can be cared for.

Stress how important it is for first aiders to always follow these steps

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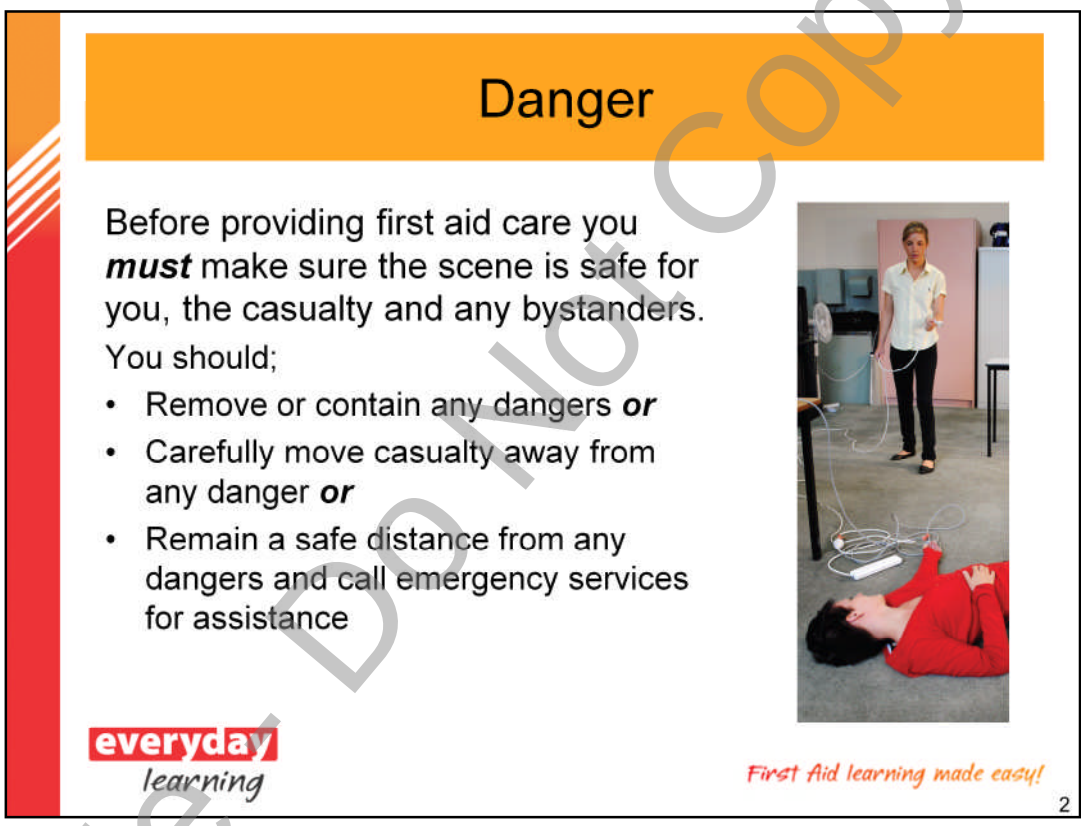

DANGER

Before you begin to provide first aid care in any situation you **must** make sure it is safe for you, as well as any casualties and bystanders. It is vital that you assess the situation for any **dangers** that are present and also gather any information that may assist you to manage the incident safely and effectively.

Some of the dangers that you may find at an incident scene include:

- Traffic hazards
- Fire risk
- Dangerous chemicals or substances
- Toxic gases, smoke or fumes
- Electrical hazards
- Weather or temperature extremes
- Witnesses or bystanders
- Animals
- Infection risks
- Collapsed buildings, unstable structures or vehicles

If you identify any dangers when you assess the situation then you should:

- Make the area **safe** by removing or containing any dangers
- If you cannot **safely** remove any dangers then you should carefully move any casualties to a safer area, if it is possible and **safe** to do

If you cannot **safely** remove any dangers or move the casualties you should:

- Remain a safe distance from any dangers
- **Call 000** for emergency services assistance
- Warn approaching people or vehicles of the dangers

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RESPONSE

Once it is safe to do so you need to check for a **response** from any collapsed casualty to see if they are conscious.

You should check for any response to talk and/or touch by asking some simple questions and giving some basic commands.

- **C**an you hear me?
- **O**pen your eyes if you can hear me
- **W**hat is your name?
- **S**queeze my hands and let go if you can hear me

If you have had no response to your questions or commands then try grasping and firmly squeezing their shoulders, to see if they respond.

If the casualty does respond to you, then they are conscious and you will need to carefully assess the reason for their collapse and provide appropriate first aid care.

If there is **no** response or only a minor response from the casualty then they need to be managed as unconscious casualty and given necessary basic life support care.

Check that the casualty’s airway is clear and open.

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SEND FOR HELP

When caring for a casualty who is unconscious or needing CPR it is vital that you send for or call for help as soon as possible.

The best option is to have someone else call for help while you care for the casualty.

If you are alone you need to call as soon as you know the casualty is **not** responsive.

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Explain process of being connected to Telstra operator first and then being transferred to the service they require.

Stress the need to remain calm and speak clearly and slowly

Non-English speakers

If a person is unable to speak English, they should call **Triple Zero (000)** from a fixed line, say 'Police', 'Fire' or 'Ambulance'. Once connected to the nominated emergency service, they should stay on the line and a translator will be arranged.

Callers with hearing or speech impairments can call the ***one zero six*** **(106)** text-based emergency call service using a text phone.

For more information on calling Triple Zero see the government website **www.triplezero.gov.au**

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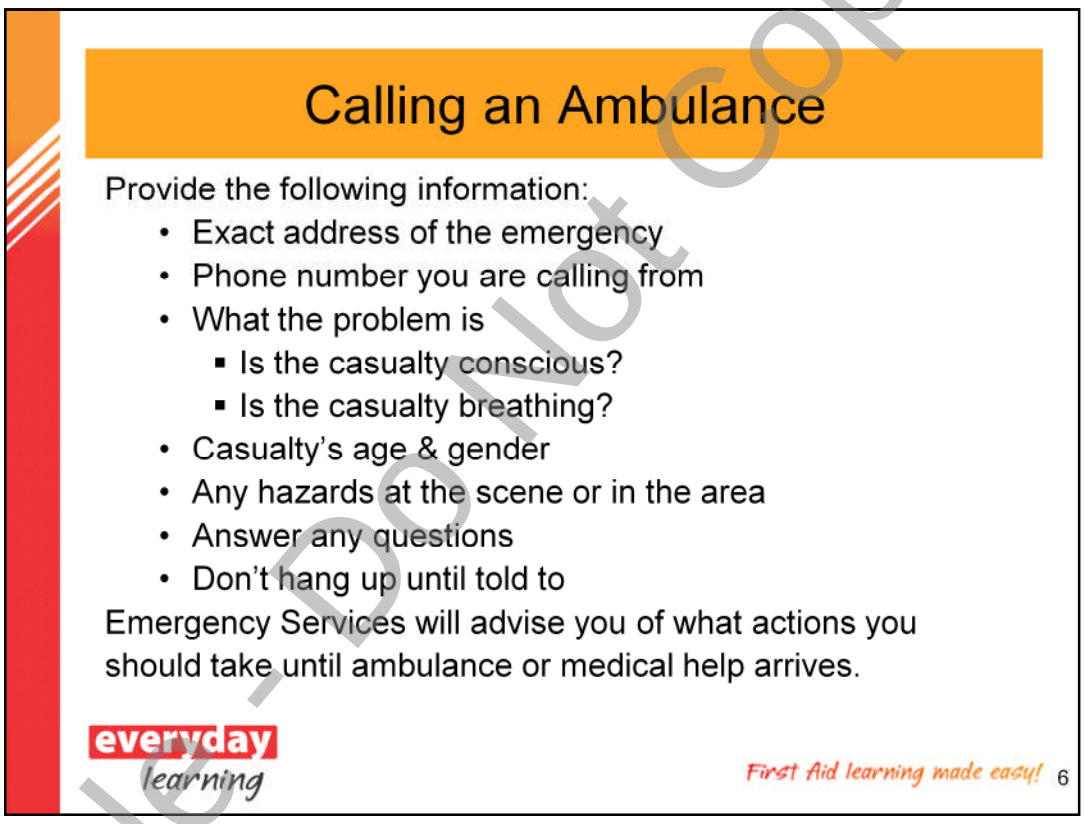

Dial Triple Zero – **000**
Ask for "**ambulance"** when connected to operator
Provide the following information to ambulance call taker

- Exact address of the emergency
- Phone number you are calling from
- What is the problem, what exactly happened
- Is the casualty conscious?
- Is the casualty breathing?
- Casualty's name, age & gender
- Are there hazards at the scene on in the area?

Answer any other questions the call taker may have
Do not hang up until told to

Call again if casualty's condition gets worse or changes.

Advise the exact address of the emergency, including nearest cross street. Rural residents should know their rural road number, together with any relevant map reference information.

If possible, arrange for someone to be in a prominent location to direct the ambulance to the victim's location.

Make sure all access doors are unlocked/can be opened easily.

At night, turn on any outside lights to help identify the property.

Call back number should always be displayed on or near all fixed phone lines. It may be a good idea to have phone number on back of mobile phones in case it is being used by someone else to call for assistance.

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AIRWAY

An unconscious casualty cannot cough or swallow to keep their airway clear and because all their muscles are very relaxed their tongue may also fall back and block their airway. If their airway is blocked they cannot breathe so it is vital to quickly check that their airway is clear and open.

It is **NOT** necessary automatically to turn a casualty onto their side to check and open their airway unless there is any reason to suspect there may be water, blood or vomit in their mouth. Being able to check a casualty's airway without rolling them onto their side takes less time and may avoid moving the casualty unnecessarily.

Vital steps

- Look in casualty's mouth and check for anything that may block their airway
- Clear out any foreign material from their mouth. If water, vomit or blood present carefully turn casualty onto their side to assist in clearing this material out.
- Carefully tilt casualty's head backwards while lifting and supporting their jaw, to open their airway.
- Check for normal, effective breathing

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BREATHING

Normal breathing is vital to maintain life. Gasping and breathing at irregular intervals is **NOT** normal breathing. Abnormal gasping (agonal gasps) is not uncommon when cardiac arrest occurs.

Movement of the lower chest and upper abdomen does not automatically mean the casualty is breathing normally and effectively. A casualty who is gasping or breathing abnormally and is **NOT** responsive needs resuscitation.

Vital steps

- Look for regular movement of lower chest or abdomen
- Listen for any sounds of breathing from mouth or nose
- Feel for any air leaving mouth or nose
- Feel for any regular movement of lower chest or abdomen
- If breathing normally and effectively place casualty on side in recovery position
- If **NOT** breathing normally and effectively start **CPR** immediately

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Care of unconscious, breathing casualty

Care of an unconscious casualty's airway takes precedence over any other injury, even a possible spinal injury.

If a casualty is unconscious but breathing normally they should be placed on their side and monitored until ambulance arrives. This will help to establish and maintain a clear airway, assist to drain any fluids from their mouth and reduce the risk of inhaling foreign material.

Unconscious casualties must be handled carefully and every effort should be made to avoid twisting or forward movement of the head and spine.

Vital Steps

1. Place furthest arm out beside casualty and closest arm across casualty's chest
2. Lift up closest knee
3. Support casualty at shoulder and thigh
4. Carefully roll casualty onto side, avoid any twisting of spine
5. Place their upper knee at right angle to body to stabilise casualty
6. Allow casualty's upper arm to rest in natural position
7. Ensure position of casualty's head allows any fluids to drain from mouth
8. Check for response and normal breathing at least every 2 minutes

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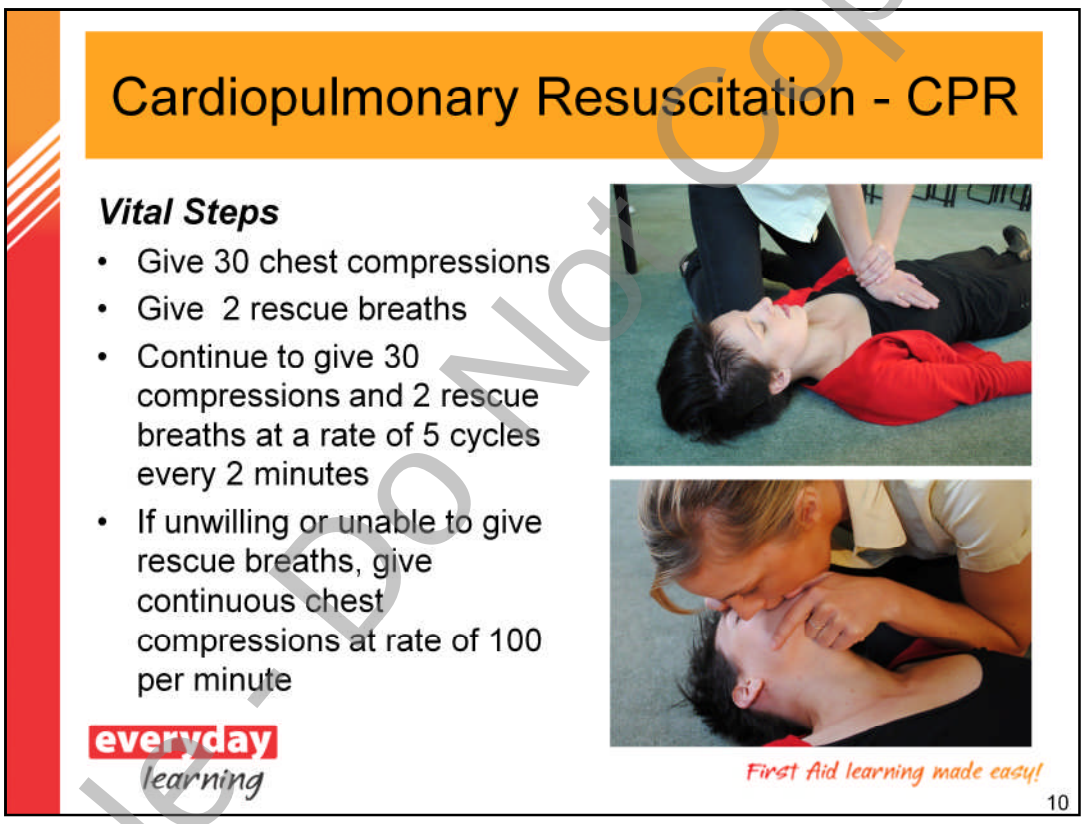

CARDIOPULMONARY RESUSCITATION - CPR

Cardiopulmonary resuscitation (CPR) is the process of providing chest compressions combined with rescue breathing in order to temporarily maintain circulation of blood and oxygen to preserve brain function until expert medical treatment is available. CPR should be started immediately if the casualty is unresponsive and not breathing normally. Immediate CPR being given by bystanders dramatically increases the chance of survival for casualties who need resuscitation.

Signs and Symptoms

Casualty is collapsed and unresponsive
Casualty is not breathing normally or effectively

Vital Steps

- Give 30 chest compressions at rate of 100 per minute
- Give 2 rescue breaths
- Give 30 chest compressions and 2 rescue breaths continuously at a rate of 5 cycles (30:2) every two minutes
- If available, obtain and attach defibrillator (AED) as soon as possible and follow its instructions
- Continue CPR until medical help arrives or casualty starts breathing

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DEFIBRILLATION – Using an AED

The benefits of early defibrillation for a casualty needing CPR have been well established. Each minute that goes by when a casualty needs defibrillation decreases their chance of survival. The development and increasing availability of Automated External Defibrillators (AED's) has made defibrillation an important part of basic life support steps.

An AED consists of a control unit and two electrodes or pads which go on the casualty's chest. If an AED detects a "shockable" cardiac rhythm after a cardiac arrest occurs it can then deliver a measured electric shock to attempt to restore the heart to a normal effective rhythm.

Signs and Symptoms

Collapsed casualty
No response to "talk and touch"
Casualty not breathing normally or effectively
CPR commenced

Vital Steps – When AED is available

1. Open or turn on AED and follow voice or visual prompts
2. Attach AED pads to casualty's bare chest as instructed

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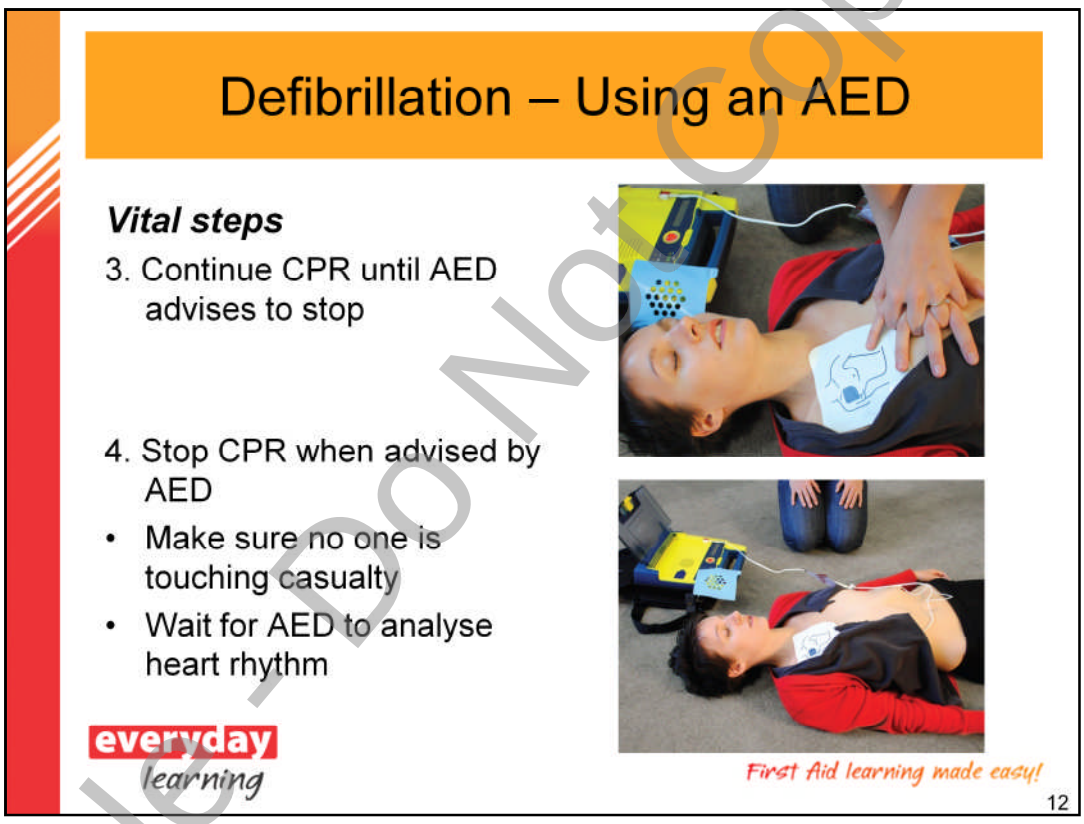

Vital steps

3. Continue CPR until AED advises to stop
4. Make sure no one is touching casualty
   Wait for AED to analyse heart rhythm

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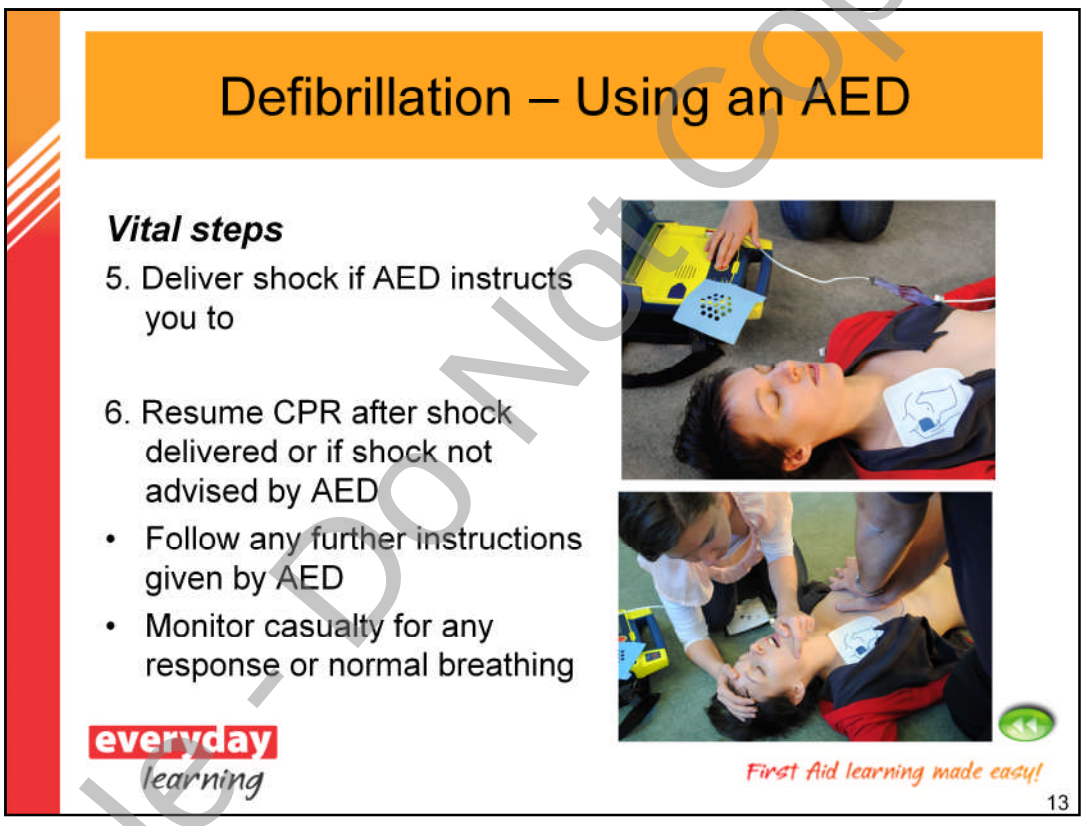

Vital steps

5. Deliver shock if AED instructs to
6. Resume CPR **immediately** after shock delivered or if shock not advised by AED
   Follow any further instructions given by AED
   Monitor casualty for any signs of response or return of normal breathing while continuing to give CPR

Explain importance of minimising ‘”no flow time” to give heart best chance of re-establishing an effective rhythm.

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