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**Intellectual Output 1**



**HEALTH & SAFETY AT WORKPLACE:**

**FIRST AID**

**INTRODUCTION**

From this unit you will learn: the basic first aid procedures, how to react when you spot an unconscious person and how to perform CPR.

**DISCUSSION QUESTIONS**

Have you ever attended the first aid training? Would you know how to react seeing an unconscious person?

**READING**

PARA 1.It seems that every adult at some point went through the basic first aid training. It was either part of your scouting experience, a sports club requirement, an optional course offered by your secondary school, etc. But how much do you actually remember? How confident would you feel about your expertise in this field if it came to a real life-threatening incident you witnessed?

PARA 2.The three P’s of first aid stand for: preserve life, prevent further injury and promote recovery. Life preservation is the most vital issue – if an injured person stops breathing, perform Cardiopulmonary Resuscitation. It is an [emergency procedure](https://en.wikipedia.org/wiki/Emergency_procedure) consisting in manual chest compressions often combined with [artificial ventilation](https://en.wikipedia.org/wiki/Artificial_ventilation). It is meant to preserve intact brain function until further measures are taken to restore spontaneous blood circulation and breathing. Do you remember how to perform CPR? If not, make sure to watch the video and do Further Practice at the end of this unit.

PARA 3.And can you recall basic first aid for suspected fracture? Don’t try to straighten the broken limb. Stabilize it using a splint and padding to keep it immobile. If possible, put a cold pack on the injury, avoiding placing ice directly on the skin. Elevate the extremity and give anti-inflammatory drugs like ibuprofen. Remember that it is a myth that you are not able to walk on a broken leg. All extremity injuries should be treated as broken bones until an X-ray can be obtained. While expecting the worst, keep your fingers crossed that the injury is just a sprain as its symptoms are almost exactly the same.

PARA 4.However, let’s do this first aid revision with some more likely injuries. The most common ones are probably cuts and scrapes. The steps to be taken if you are faced with bleeding are: disinfect the wound, cover it with a gauze pad, a bandage or a cloth and apply direct pressure to stop the blood flow. Don’t remove the cloth, just add extra layers if needed – the cloth helps clots form to stop the flow. In the First Aid Kit you will find a tourniquet. However, in most cases applying a tourniquet may do more damage than good. The more modern medical guidelines also discount the value of elevation and using pressure points.

PARA 5.Another common injury is a burn. The first thing you should do is stop the burning process to prevent further injury. If the burn was caused by an electric shock, power needs to be turned off. If the reason was some chemical, clean it off (preferably, after reading the instructions on the chemical packaging).

PARA 6.Unless otherwise indicated, flush the burn with cool running water for several minutes and do not use ice. Apply a light gauze bandage or some loose cloth to prevent infection. Never ever apply ointments, butter or any oily remedy (even if your grandmother taught you so). Do not break blisters that may have formed in case of more severe burn. Take painkillers if necessary.

PARA 7.Talking about blisters: the most common ones are the ones on your feet caused by uncomfortable shoes. It is debatable whether or not a blister needs any treatment. If it is small, unbroken and not very painful, leave it alone. Just cover it to prevent continued rubbing or pressure that can cause it to swell more and burst on its own. However, if the blister is large and painful and you’re in the middle of a hike follow steps to drain and dress it. Use a sterilized needle and make small punctures at the edge of the blister, express the fluid, apply an antibiotic ointment and cover the area.

PARA 8.How about a nosebleed? If you have a bloody nose, lean slightly forward, not back. Pinch the nose below the bridge, don’t pinch the nostrils closed! You can also apply a cold pack to the bridge of the nose while pinching. Check after 5 minutes if bleeding has stopped.

PARA 9.Sunburn victims need to be moved to the shaded area and covered up with cool cloths. Make them drink cool water. The opposite of heat exhaustion is hypothermia – in that case use warm fluids and warm covering.

PARA 10.To treat allergic reactions use an EpiPen - “ephedrine autoinjector”. Usually people suffering greatly from allergic reactions, e.g. to bee stings, carry one. It is a small and ergonomic needle to inject adrenaline which subdues the effects of the allergic reaction. The list might go on. Let’s hope you will never have to use the aforementioned tips.

READING TASK: Find in the text the words which match the following definitions. They appear in the text orderly one by one. (SS don’t have the paragraph numbers, T can prompt if needed.)

PARA 1.

competence, skill, knowledge - expertise

PARA 3.

a strip of rigid material used for supporting and immobilizing a broken bone when it has been set - splint

soft material such as foam or cloth used to pad or stuff something - padding

a limb of the body especially : a human hand or foot - extremity

PARA 4.

a loosely woven, almost translucent fabric that's used to bandage wounds - gauze

thick masses of coagulated liquid, especially blood, or of material stuck together - clots

a device used to apply pressure to a limb or extremity in order to limit the flow of blood – tourniquet

PARA 6.

smooth oily substances rubbed on the skin for medicinal purposes or as cosmetics – ointments

PARA 7.

to remove liquid - drain

the outside limit of an object, area, or surface - edge

PARA 8.

two external openings of the nose that admit air and smells - nostrils

PARA 10.

to decrease - subdue

**VOCABULARY PRACTICE**

According to the UK NHS a basic first aid kit may contain the following items. Make sure you understand all the phrases, know what you use them for and how you do it:

* plasters in a variety of different sizes and shapes
* small, medium and large sterile gauze dressings
* at least 2 sterile eye dressings
* triangular bandages
* crêpe rolled bandages
* safety pins
* disposable sterile gloves
* tweezers
* scissors
* alcohol-free cleansing wipes
* sticky tape
* thermometer (preferably digital)
* skin rash cream, such as hydrocortisone or calendula
* cream or spray to relieve insect bites and stings
* antiseptic cream
* painkillers such as paracetamol (or infant paracetamol for children), aspirin (not to be given to children under 16), or ibuprofen
* cough medicine
* antihistamine cream or tablets
* distilled water for cleaning wounds
* eye wash and eye bath

(source :What should I keep in my first aid kit? - NHS (www.nhs.uk))

**FURTHER PRACTICE**

What should you do spotting someone lying in the street? Do you know how do perform the CPR? Do you know the Doctor’s ABC? Watch the video:

[CPR DRCAB OR DR'S ABC - YouTube](https://www.youtube.com/watch?v=WNW_l1wC9DM)

Complete the gaps with the words below (Careful! There are too many of them):

COMPRESSIONS, SURVEY, OXYGEN, CARDIOPULMONARY, INTERLOCK, PRIMARY, DEFIBRILLATOR, STRAIGHTENED, PALM, CENTIMETRES, PRELIMINARY, RECAP, PUMP, RESPONSE, PASSERS-BY, INCHES, INDIVIDUAL, TILT, MOVEMENTS, HEARTBEAT, CPR, NOISY, MODE, HEEL, CIRCULATION

CPR stands for Cardiopulmonary Resuscitation we use when someone has collapsed and is not breathing. Remember the primary survey process, the Doctor’s ABC - **'DR’S ABC'**.

1. **D** is for **Danger**. Look around carefully to make sure the area is safe for yourself and others before approaching the casualty.
2. **R** is for **Response**. Shake them gently by the shoulders and ask them loudly: “Are you alright?” If there is no response, you need to...
3. **S**: **Shout** for help, as any assistance will be helpful! If there are passers-by, choose an individual: “You, in the red shirt, call for help and come back!”
4. **A** is for **Airway**. Gently tilt the head back like this, to open up the airway.
5. **B** is for **Breathing**. Look for normal chest movements. Listen for normal breathing sounds and try to feel their breath against your face. Do this for no more than 10 seconds. If there is no sign of breathing, or if they are breathing in an unusual, noisy way, we need to start CPR. First, make sure that an ambulance is on its way. Putting the phone on speaker mode is useful as the ambulance service can talk you through the steps.
6. **C** is for **Circulation**. Start by placing the heel of one hand at the centre of the person’s chest and interlock your fingers. With arms straightened, press down hard and fast, letting the chest come back up fully each time. Fast means around 2 times every second and hard means that the chest needs to go down by about 5 centimetres. You can give 2 ‘rescue breaths’ after every 30 compressions, as this helps provide some oxygen. However, if you have not been trained or are not comfortable, just keep going with ‘Hands-only’ continuous chest compressions.
7. Sometimes, we can add another step - ‘**D**’ - **Defibrillation**, which is about delivering a shock to restart the heartbeat. Some public areas and workplaces have an easy-to-use AED (Automatic External Defibrillator). Automatic means that the machine decides what to do and it even talks you through the steps.

If there is no AED available, keep going with CPR until the ambulance arrives.

That’s it! So to recap: remember DR’S ABC and if you have it, D.

That’s D for Danger, R for Response. S:Shout for help, A for Airway,

B for Breathing, C for Circulation and D for Defibrillation.