



WORKPLACE FIRST AID

Recent research by the Department of Labour highlights the importance of getting help within the first hour – the golden hour – of a serious incident.

Workplace deaths can be prevented when working in remote locations by:

- ensuring workers are equipped with suitable mobile phones
- maintaining regular contact with colleagues or family
- establishing procedures for when communications are not maintained

Knowing even the most basic first aid could also help you save a colleague's life.

Below are a few first aid tips for workplaces, taken from information provided by the St John Ambulance Association.

For comprehensive first aid information or to complete a First Aid course, please visit www.stjohn.org.nz or phone 0800 ST JOHN (0800 785 646).



BURNS

You are working in the dairy shed when someone burns themselves with boiling hot water.

Key points to remember are:

- Ensure the victim and everyone close by are in no further danger
- Call for an ambulance early for burns, especially if they are larger than a patient's hand; or if the burn involves the face, neck, hands, feet, joints or genitals; or the patient is in significant pain; the patient is very old or very young; the patient has a significant chronic medical problem or you are worried
- Flood area with cold water (not ice cold) for up to 20 minutes (to reduce pain and damage)
- Do not remove clothing stuck to the skin
- Remove restrictive jewellery if possible
- Do not put any creams on the burn
- Lightly cover with cling film or clean dressing to prevent infection





BROKEN BONES

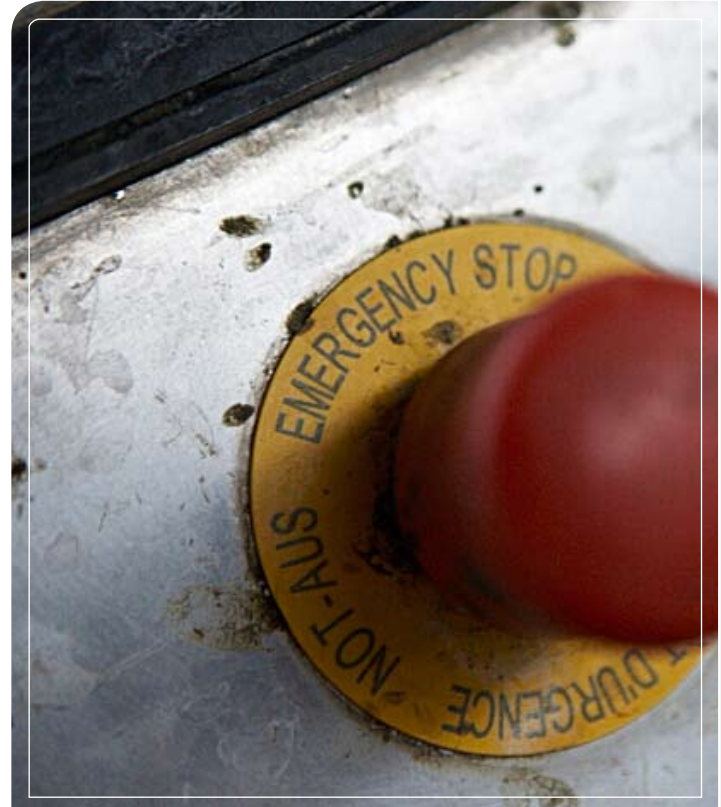
You are working on a construction site when a colleague falls heavily and breaks their leg.

Key signs of a broken bone are:

- Deformity
- Swelling and discolouration
- Tenderness and pain – severe discomfort
- Altered sensation (e.g. pins and needles)
- Sound of breaking
- Exposed bone ends
- Constant pain
- Loss of normal function

Key points to remember are:

- Do not move the fractured limb unnecessarily
- Control any bleeding using direct/indirect pressure
- Stabilise the fracture, ideally using padding around the limb
- Assist patient into a comfortable position
- Splinting of a large bone is not necessary in a metropolitan environment, and should only be done if help will be delayed
- Support the limb and transport or call 111 and ask for an ambulance



EYE INJURIES

You are working at the local timber mill. While operating a wood-shredding machine, a fellow worker is struck in the eye by a large wood splinter.

Key signs of an eye injury are:

- Pain
- Redness
- Sensitivity to light
- Watering

Key points to remember are:

- Eye protection should be worn whenever eyes are at risk
- Do not touch the coloured part of the eye
- All eye injuries MUST be referred for medical attention



HEAD INJURIES AND SPINAL INJURIES

You are working on a farm and witness an ATV rolling over, throwing the victim clear of the bike.

Head injuries involve injury to the brain, injuries to the skull and injuries to the face. Spinal injuries involve injury to the backbone, from the upper neck to the lower back. These injuries have the potential to be life-threatening.

Key signs of a head injury are:

- Any bleeding from the head that is more than minor
- Loss of consciousness or altered state of awareness (not awake and talking to you) or 'groggy'
- Confusion
- Nausea, vomiting
- Memory loss

Key signs of a spinal injury are:

- Loss of movement or sensation in the arms and legs
- Pins and needles
- Pain in the spinal region
- Limb stiffness
- Clumsiness
- Heaviness

Key points to remember are:

- All collapsed patients should be carefully assessed to decide what emergency care is needed. The **SRABCDs** of resuscitation is the method recommended and used by St John for the assessment:
- **S**afety – Yourself, bystanders' and patients
- **R**esponse – Does the patient respond to voice and touch? Call 111 and ask for ambulance
- **A**irway – Open and Clear
- **B**reathing – Look, listen and feel for breathing for up to 10 seconds
- **C**ompressions – Compress chest (4 - 5 cm), rate about 100/minute until a total of 30 have been given.
- **D**efibrillation – Automated External Defibrillator (AED) should be used as soon as possible and follow the prompts.
- **S**evere Bleeding – Check for life threatening bleeding

Other points to remember are:

- Check for secondary injuries
- A change in breathing pattern
- No chest movement
- Call 111 and ask for an ambulance early
- If they are awake and can move, let the patient determine their own position, but minimise unnecessary movement if possible
- If they are unconscious, place them on their side (supported) if possible





ADULT RESUSCITATION

CPR is needed when there are no signs of life and the patient is:

- Unconscious and not responding to the first aider
- Not breathing normally
- Not moving

Chest compressions are the most important part of CPR. If for any reason you cannot give rescue breaths to a patient, DO attempt chest compressions.

Remember:

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