

# First aid manual, 9<sup>th</sup> edition

## First Aid MANUAL

The comprehensive guide to treating casualties of all ages in any emergency

- The only manual endorsed by the UK's leading first aid providers
- Now in its 9th edition with guidelines revised and updated to incorporate the latest best practice
- All-new photographs and illustrations show you exactly what to do in any situation
- Find essential information fast with easy-to-follow instructions

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**St. Andrew's Ambulance Association** 

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All three first aid societies run training courses. For further details please contact the relevant organisation.

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MANUAL



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9<sup>TH</sup> EDITION

# First Aid

## MANUAL

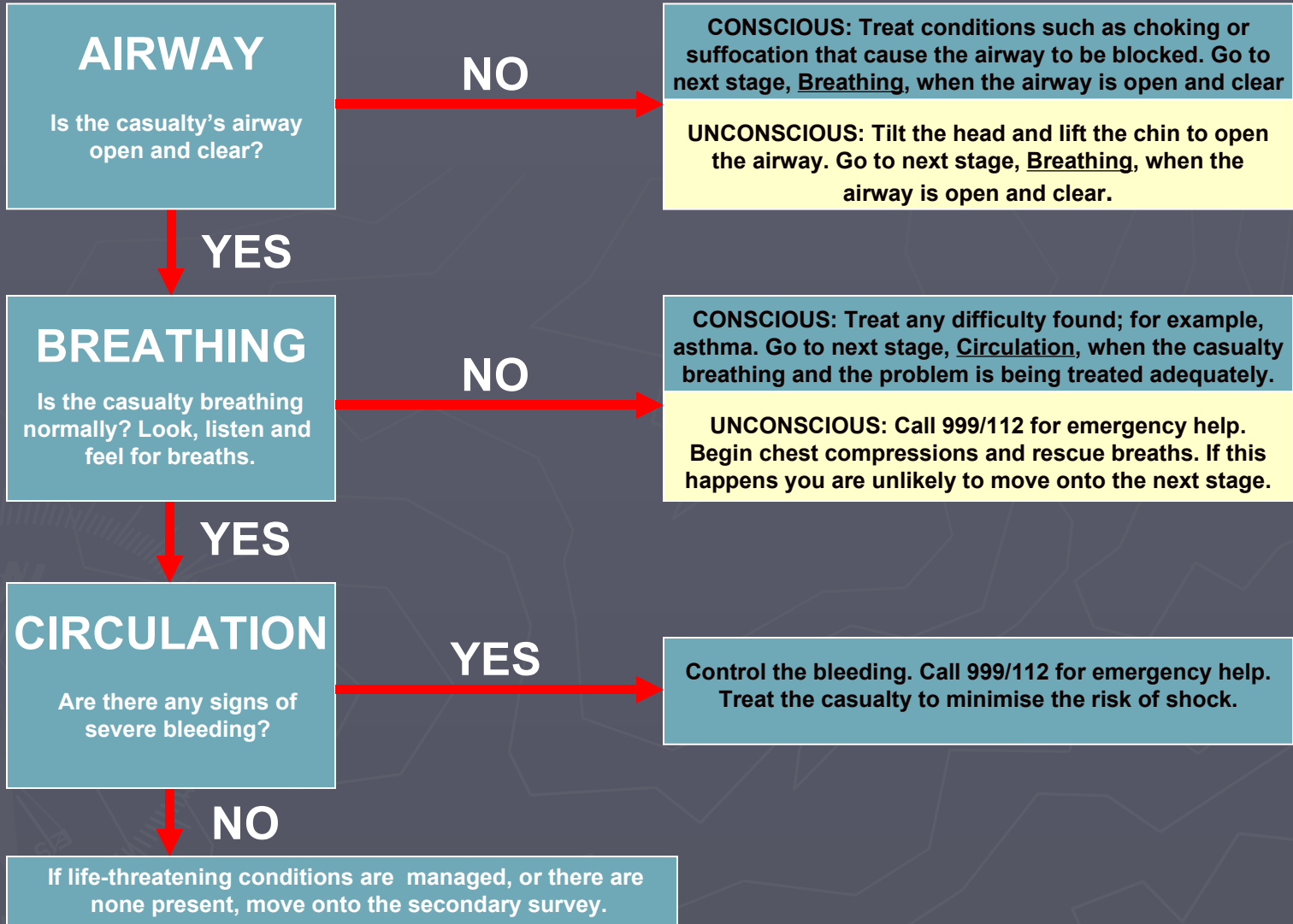


The UK's only fully authorised guide

## Revised first aid priorities

- > Assess a situation quickly and calmly
- > **Comfort and reassure** casualties at all times
- > Protect yourself and any casualties from danger and never put yourself at risk.
- > There is a greater emphasis on preventing cross infection between yourself and the casualty as far as possible

- > A casualty has the right to refuse help, even if it causes further harm. Tell ambulance control that you have offered first aid and been refused.
- > Stay at a safe distance until you have gained the person's permission to move closer, so that he does not feel crowded. Do not argue or disagree.
- > Be sensitive to a casualty's feelings - if someone is ill or injured they may be confused, angry and/or keen to get away. They may see you as a threat.
- > If someone still refuses your help and you think they need urgent medical attention, call 999/112 for emergency help.



> Re-ordered to follow: History, Symptoms, Signs, then External Clues.

> Use *AMPLE* as a reminder when assessing a casualty to ensure that you have covered all the aspects of the examination. When the emergency services arrive, they may ask:

**A** - Allergy - does the person have any?

**M** - Medication - is the person on any?

**P** - Previous Medical History

**L** - Last meal - when did the person last eat or drink?

**E** - Event history - what happened?

> The C in RICE has been changed.

R est

I ce

**C omfortable Support**

E levate

> Log-roll position adapted.  
The first aiders at the legs place hands under the furthest leg, so that they can raise the "upper" leg slightly as the casualty is rolled towards them on to his side.



> Recognition of stroke/brain attack:

## The FAST Test

F - Facial weakness - the casualty is unable to smile evenly and the mouth or eye may be droopy.

A - Arm weakness - the casualty is unable to raise one arm.

S - Speech problems - the casualty is unable to speak clearly.

T - Time to call 999/112

## New treatment for tick bites

- > Grasp head as near to the skin as possible and pull it straight out.
- > Do not use twisting or jerking movements as this may leave mouth parts embedded.
- > Place tick in a sealed plastic bag, as it may be needed for analysis.

