CHAPTER 2
FIRST AID

PURPOSE AND SCOPE

The purpose of the First Aid Procedures is to state the requirements for First Aid treatment, First Aid Kits, training and personal protective equipment for First Aid providers.

This program applies to all City of Moore Employees.

First Aid

“First Aid is the immediate and temporary care given to victims of an accident or sudden illness until the services of a physician can be obtained.”

It shall be the responsibility of supervisors to understand first aid treatment and comply with general instructions in this section. It should be realized that recommended treatment couldn’t be written to cover every possible situation that may arise. Personal caution, sound judgement, and common sense must be considered in any action taken in treatment of injuries to employees. Reference MSDS (Material Safety Data Sheets) in case of chemical exposure.

In all injuries, look for and treat in this order -

1. Airway
2. Breathing
3. Bleeding (circulation)
4. Consciousness
5. Broken Bones
6. Burns
7. Shock

1. Breathing: When a human body stops breathing, severe permanent brain damage may occur within 3 to 5 minutes. Be prepared to perform CPR if necessary.

Since needed equipment is not always available, someone with knowledge of mouth to mouth resuscitation must go to work immediately.

All volunteer First Aid personnel should hold a valid basic First Aid/CPR certificate issued by the American Red Cross or other accredited agency, as recognized by Fed OSHA, and receive annual Bloodborne Pathogen training.

2. Bleeding: If serious bleeding occurs, it must be controlled. Check for a pulse.

Bleeding of any kind is first controlled by direct pressure by a gloved hand or bandage and elevation. Pressure points are utilized if direct pressure and elevation are not effective. Be sure to use PPE (Personal Protective Equipment).

For a cut or severed artery- use finger pressure at pressure point, or direct pressure on the wound, using a gloved hand or sterile compress, or apply a pressure bandage.

A conscious victim may be able to tell you where they are hurt and what happened. (Person, place, time, event, etc.)

3. Broken Bones: Call 911. Immobilize by splinting. Do not attempt to set any fracture, only a doctor should do this. Unconsciousness following an accident could indicate concussion of the
brain, or skull fracture. Keep injured person lying down with head slightly raised if the face is normal or red colored. Keep the head level with the body if the face is pale. Avoid all unnecessary handling. **DO NOT MOVE IF SUSPECTED HEAD INJURY!**

If the person has an injury to the spine, handle with extreme caution and move only if absolutely necessary. Permanent paralysis may result from improper handling. Assume spinal injuries in all slips and falls. **DO NOT MOVE!**

Severe pain in the neck or back may be the only sign. If he/she cannot open and close his/her fingers rapidly, clasp your hand firmly, or if they do not have sensation (feeling) then neck is probably broken. In either case, the spinal cord may be injured or severed. **DO NOT MOVE!**

Never lift a person with neck or back pain. Do not lift head even for a drink of water. Call 911 immediately. **DO NOT MOVE UNTIL EMS OR PHYSICIAN IS PRESENT!**

4. Burns: Burns are of three general kinds:
   1. Thermal
   2. Sunburn
   3. Chemical

These are classified according to depth of degree:

- **First degree**- skin reddened
- **Second degree**- blisters form (deep red color)
- **Third degree**- Destruction of outer skin and underlying cells (gray or black colored skin, can be waxy looking)

To treat burns, relieve pain, cover burn with a dry, clean dressing. Get patient to doctor or hospital.

To treat chemical burns of eyes or skin, brush off any dry chemicals first if applicable, flush the affected area with large amounts of water for 20 minutes

Treat for shock as per instructions below.

5. Shock: A depressed state of many vital body functions that could be fatal even though the injuries sustained were not life threatening. The most evident symptoms are weakness, pale and moist skin, and rapid pulse. Breathing rate will increase and can be irregular and victim usually will be nauseous. The victim may be unconscious.

   a. Treatment

   Keep the injured person lying on their back with head level or low and raise feet if uninjured. Place a blanket beneath him and cover according to the temperature of the environment. Do not cause sweating. The overall principal is not to add heat, but simply to prevent the loss of body heat. Keep the victim calm, control any bleeding, and provide mental support.

6. Minor Cuts : Use PPE, apply antiseptic, such as ointment and cover with dressing as needed. Report to your supervisor.

   Bruises, strains and sprains : Apply ice to affected area up to 20 minutes and splint if necessary.

   Wounds: Symptoms are break in the skin, incision, puncture or lacerated. Treatment is to use PPE, wash, clean and cover with sterile bandage. Report to your supervisor.
7. On any eye injuries, do not rub. Flood with water. Employee will go to doctor.

**INJURIES, SYMPTOMS AND FIRST AID TREATMENT**

Dislocations: Symptoms are deformity compared to uninjured limb. Splint deformity in place and seek immediate medical attention. Check pulse, movement, and sensation (feeling).

Electric Shock: Symptoms are unconsciousness, breathing stopped, burns at contact point, and broken bones. Call 911. Treatment is to prevent anyone else from being exposed. Treat injuries by prioritization (ABC's).

Fainting: Symptoms are unconsciousness, face pale, cold sweat, pulse weak and rapid. Treatment is to lay with head low, keep warm, loosen clothing, call 911, and provide support.

Heat exhaustion: Symptoms are a pale face, cold sweat, weak pulse, shallow breathing. Treatment is to provide cool area, remove from heat, give cool not cold liquids - no caffeine - water or sports drink preferred. Keep victim calm.

Heat Stroke: Symptoms are hot, dry skin, bounding pulse, rapid shallow breathing, generalized weakness, loss of consciousness or altered mental status, and seizures are possible. Treatment is to remove the victim from the heat and place in a cool environment. Remove clothing and apply ice packs to neck, armpits, and groin. Call 911 immediately.

Gas poisoning: Carbon Monoxide - Symptoms are yawning, dizziness, weariness, throbbing heart, face cherry red, nausea, chest pain, and difficulty breathing. Treatment is to rescue to fresh air, give artificial respiration. Chlorine - symptoms are irritated eyes, burned skin, coughing, possibly unconsciousness. Treatment is rescue to fresh air if SCBA trained (see later chapter on SCBA). If unconscious, begin artificial respiration immediately, and keep warm.

Snakebites: Most important treatment is to treat the victim for shock and get victim to the hospital quickly. Symptoms are:
- Noticeable bite on skin, may appear as nothing more than a discoloration.
- Pain and swelling at bite area - may take up to 30 minutes to several hours to develop.
- Rapid pulse and labored breathing.
- Progressive general breathing
- Dim or blurred vision.
- Nausea and vomiting.
- Seizures
- Drowsiness or unconsciousness.

Treatment is:
- Call 911 immediately.
- Keep victim calm.
- Treat for shock.
- Locate bite mark or marks.
- Remove any rings, bracelets, or other constricting items on bitten extremity.
- Keep bitten area immobilized.
- Keep bitten area at or below heart.
- Apply light, constricting bands above and below bite area.
Wounds: Symptoms are break in the skin, incision, puncture or lacerated. Treatment is to wash, clean and cover with sterile bandage. On any eye injuries, do not rub. Flood with water. Employee will go to doctor.

Poisonous Plants: Learn to know and avoid these hazards. If you touch them, wash hands at once using plenty of soap and water. Rubber or heavy leather gloves afford some protection from these poisons, but the sap picked up by clothing can easily be transmitted to the hands and other parts of the body, even after considerable time. Have all garments exposed to these poisons washed or dry-cleaned. Notify your supervisor immediately after contacting poisons in order to attain proper medical attention.

First Aid Kit

First Aid Kits contain the medical and first aid equipment and materials necessary to render first aid in event of an on-the-job injury. Each division is responsible for insuring that a First Aid Kit is maintained in each work center and crew vehicle. A stock of resupply items will be maintained in the plant or divisional supply section.

When supplies are used, the Department Head, Supervisor, or Crew Chief is responsible for replacing used supplies within forty-eight (48) working hours. Kits should be checked at least monthly.

As a minimum, each kit will contain the below listed items. Additional items may be added, as deemed necessary by Supervisors in charge. Note: Some items are date sensitive.

- 1 absorbent compress (32 sq. in. with no side smaller than 4 in.)
- 2 boxes of 25 adhesive bandage each (1x3 in.)
- Adhesive tape (total of 5yd.x1/2 in.)
- 10 individual-use antiseptic wipe applications (0.5g each)
- 6-sting relief wipes
- 3 pairs of medical exam gloves
- 1 one-way valve CPR protective face mask
- 4 sterile pads (4x4 in.)
- 2 triangular bandages (40x40x56 in.)

Medical Treatment

In those cases when the employee has been injured or becomes ill on the job to the extent that simple first aid is not enough, medical attention must be sought.

If the employee is able to go to the doctor without assistance, this must be allowed without delay. Employees are permitted to choose their own doctor that belong to our Certified Workplace Medical Plan.

If the employee cannot go to the physician alone, the Supervisor or an employee of Risk Management will escort the injured party personally.

In the case of severe injury on the job, the injured shall be transported to a medical facility by ambulance. To contact dispatch, call 911, and give your name, location, type and extent of injury (if known), the phone number where you can be reached, and do not hang up until you are told to do so by the dispatcher.

In all cases where medical attention is needed, the supervisor must ensure that a properly completed form is given to the injured party to be taken to the physician as authorization for medical attention.