The following safety module is intended to be used as a refresher safety awareness session and is in no way to be used as a substitute for job training nor for proper equipment use.

**GET MEDICAL ATTENTION FOR ALL INJURIES**

It is very important for you to get immediate treatment for every injury, regardless how small you may think it is. (See Figure 1.) Many cases have been reported where a small unimportant injury, such as a splinter wound or a puncture wound, quickly led to an infection, threatening the health and limb of the employee. Even the smallest scratch is large enough for dangerous germs to enter, and in large bruises or deep cuts, germs come in by the millions. Immediate examination and treatment is necessary for every injury.

What is first aid? It is simply those things you can do for the victim before medical help arrives. The most important procedures are described below.

**CONTROL BLEEDING WITH PRESSURE**

Bleeding is the most visible result of an injury. Each of us has between five and six quarts of blood in our body. Most people can lose a small amount of blood with no problem, but if a quart or more is quickly lost, it could lead to shock and/or death. One of the best ways to treat bleeding is to place a clean cloth on the wound and apply pressure with the palm of your hand until the bleeding stops. You should also elevate the wound above the victim’s heart, if possible, to slow down the bleeding at the wound site. (See Figure 2.) Once the bleeding stops, do not try to remove the cloth that is against the open wound as it could disturb the blood clotting and restart the bleeding. If the bleeding is very serious, apply pressure to the nearest major pressure point, located either on the inside of the upper arm between the shoulder and elbow, or in the groin area where the leg joins the body. Direct pressure is better than a pressure point or a tourniquet because direct pressure stops blood circulation only at the wound. Only use the pressure points if elevation and direct pressure haven’t controlled the bleeding. Never use a tourniquet (a device, such as a bandage twisted tight with a stick, to control the flow of blood) except in response to an extreme emergency,

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such as a severed arm or leg. Tourniquets can damage nerves and blood vessels and can cause the victim to lose an arm or leg.

**TREAT PHYSICAL SHOCK QUICKLY**

Shock can threaten the life of the victim of an injury if it is not treated quickly. (See Figure 3.) Even if the injury doesn’t directly cause death, the victim can go into shock and die. Shock occurs when the body’s important functions are threatened by not getting enough blood or when the major organs and tissues don’t receive enough oxygen. Some of the symptoms of shock are a pale or bluish skin color that is cold to the touch, vomiting, dull and sunken eyes, and unusual thirst. Shock requires medical treatment to be reversed, so all you can do is prevent it from getting worse. You can maintain an open airway for breathing, control any obvious bleeding and elevate the legs about 12 inches unless an injury makes it impossible. You can also prevent the loss of body heat by covering the victim (over and under) with blankets. Don’t give the victim anything to eat or drink because this may cause vomiting. Generally, keep the victim lying flat on the back.

A victim who is unconscious or bleeding from the mouth should lie on one side so breathing is easier. Stay with the victim until medical help arrives.

**MOVE THE INJURED PERSON ONLY WHEN ABSOLUTELY NECESSARY**

Never move an injured person unless there is a fire or when explosives are involved. The major concern with moving an injured person is making the injury worse, which is especially true with spinal cord injuries. If you must move an injured person, try to drag him or her by the clothing around the neck or shoulder area. If possible, drag the person onto a blanket or large cloth and then drag the blanket. (See Figure 4.)
PERFORM THE HEIMLICH MANEUVER ON CHOKING VICTIMS

Ask the victim to cough, speak, or breathe. If the victim can do none of these things, stand behind the victim and locate the bottom rib with your hand. Move your hand across the abdomen to the area above the navel then make a fist and place your thumb side on the stomach. Place your other hand over your fist and press into the victim’s stomach with a quick upward thrust until the food is dislodged. (See Figure 5.)

Figure 5. Perform the Heimlich maneuver on choking victims

FLUSH BURNS IMMEDIATELY WITH WATER

There are a many different types of burns. They can be thermal burns, chemical burns, electrical burns or contact burns. Each of the burns can occur in a different way, but treatment for them is very similar. For thermal, chemical or contact burns, the first step is to run cold water over the burn for a minimum of 30 minutes. (See Figure 6.) If the burn is small enough, keep it completely under water. Flushing the burn takes priority over calling for help. Flush the burn FIRST. If the victim’s clothing is stuck to the burn, don’t try to remove it. Remove clothing that is not stuck to the burn by cutting or tearing it. Cover the burn with a clean, cotton material. If you do not have clean, cotton material, do not cover the burn with anything. Do not scrub the burn and do not apply any soap, ointment, or home remedies. Also, don’t offer the burn victim anything to drink or eat, but keep the victim covered with a blanket to maintain a normal body temperature until medical help arrives.

If the victim has received an electrical burn, the treatment is a little different. Don’t touch a victim who has been in contact with electricity unless you are clear of the power source. If the victim is still in contact with the power source, electricity will travel through the victim’s body and electrify you when you reach to touch. Once the victim is clear of the power source, your priority is to check for any airway obstruction, and to check breathing and circulation. Administer CPR if necessary. Once the victim is stable, begin to run cold water over the burns for a minimum of 30 minutes. Don’t move the victim and don’t scrub the burns or apply any soap, ointment, or home remedies. After flushing the burn, apply a clean, cotton cloth to the burn. If cotton is not available, don’t use anything. Keep the victim warm and still and try to maintain a normal body temperature until medical help arrives.

Figure 6. Flush burns immediately with water

USE COOL TREATMENT FOR HEAT EXHAUSTION OR STROKE

Heat exhaustion and heat stroke are two different things, although they are commonly confused as the same condition. Heat exhaustion can occur anywhere there is poor air circulation, such as around an open furnace or heavy machinery, or even if the person is poorly adjusted to very warm temperatures. The body reacts by increasing the heart rate and strengthening blood circulation. Simple heat exhaustion can occur due to loss of body fluids and salts. The symptoms are usually excessive fatigue, dizziness and disorientation, normal skin temperature but a damp and clammy feeling. To treat heat exhaustion, move to the victim to a cool spot and encourage drinking of cool water and rest. (See Figure 7.)
Heat stroke is much more serious and occurs when the body’s sweat glands have shut down. Some symptoms of heat stroke are mental confusion, collapse, unconsciousness, fever with dry, mottled skin. A heat stroke victim will die quickly, so don’t wait for medical help to arrive—assist immediately. The first thing you can do is move the victim to a cool place out of the sun and begin pouring cool water over the victim. Fan the victim to provide good air circulation until medical help arrives.

RESPOND APPROPRIATELY TO
THE FORM OF POISONING

The first thing to do is get the victim away from the poison. Then use provide treatment appropriate to the form of the poisoning. (See Figure 8.) If the poison is in solid form, such as pills, remove it from the victim’s mouth using a clean cloth wrapped around your finger. Don’t try this with infants because it could force the poison further down their throat. If the poison is a gas, you may need a respirator to protect yourself. After checking the area first for your safety, remove the victim from the area and take to fresh air. If the poison is corrosive to the skin, remove the clothing from the affected area and flush with water for 30 minutes. Take the poison container or label with you when you call for medical help because you will need to be able to answer questions about the poison. Try to stay calm and follow the instructions you are given. If the poison is in contact with the eyes, flush the victim’s eyes for a minimum of 15 minutes with clean water.

KEEP A FIRST AID KIT CHECKLIST

In order to administer effective first aid, it is important to maintain adequate supplies in each first aid kit. (See Figure 9.) First aid kits can be purchased commercially already stocked with the necessary supplies, or one can be made by including the following items:

- **Adhesive bandages**: available in a large range of sizes for minor cuts, abrasions and puncture wounds
- **Butterfly closures**: these hold wound edges firmly together.
- **Rolled gauze**: these allow freedom of movement and are recommended for securing the dressing and/or pads. These are especially good for hard-to-bandage wounds.

- **Nonstick Sterile Pads**: these are soft, superabsorbent pads that provide a good environment for wound healing. These are recommended for bleeding and draining wounds, burns, infections.

- **First Aid Tapes**: Various types of tapes should be included in each kit. These include *adhesive*, which is waterproof and extra strong for times when rigid strapping is needed; *clear*, which stretches with the body’s movement, good for visible wounds; *cloth*, recommended for most first aid taping needs, including taping heavy dressings (less irritating than adhesive); and *paper*, which is recommended for sensitive skin and is used for light and frequently changed dressings.

- **Items that also can be included** in each kit are tweezers, first aid cream, thermometer, an analgesic or equivalent, and an ice pack.

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**REPORT ALL INJURIES TO YOUR SUPERVISOR**

As with getting medical attention for all injuries, it is equally important that you report all injuries to your supervisor. (See Figure 10.) It is critical that the employer check into the causes of every job-related injury, regardless how minor, to find out exactly how it happened. There may be unsafe procedures or unsafe equipment that should be corrected.

![Figure 10. Report all injuries to your supervisor](image-url)