

# First Aid course

## 1. Introduction

1 in 10,000

Adrenaline-Link

150 µg/10 mL ADRENALINE  
INJECTION



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# Aims of the course

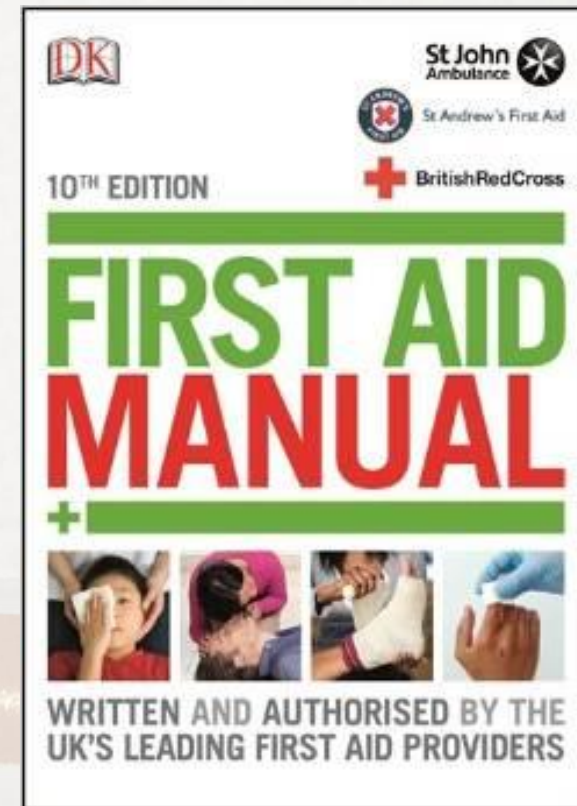
- provides basic knowledge on the principles of first aid in case of sudden health disorders
- manages the organization of first aid at the site, where the disability occurred
- learns the basic skills of transporting the wounded, bandaging techniques and cardiopulmonary resuscitation

# Organization of the course

- 14 lectures + 7 practices (1 at Children's Hospital)
- Practice: 1 absence is allowed, possibility of substitution of the absence with another group
- 2 rules for colloquium: pass the online test and pass the oral exam (how „not to kill" the patient = 2 theoretical questions and one minute of providing BLS)
- [jan.malaska@gmail.com](mailto:jan.malaska@gmail.com) - email to contact

# Literature:

- Study materials at MU IS + lectures
- Full text guidelines ERC 2015 ([www.erc.edu](http://www.erc.edu))  
<https://cprguidelines.eu/>
- First Aid Manual - revised 10th edition, 2016  
St. John Ambulance



# Literature:

## Apps for smart phones:

- First Aid - American Red Cross
- St John Ambulance First Aid
- First aid by British Red Cross







**FIRST AID**

# Definition

**First Aid** is the initial assistance or treatment given to a person who is injured or suddenly taken ill

- is provided by the general public (lay persons and/or health professionals) regardless of the availability specialist equipment
- assistance must be provided quickly and efficiently, but may not directly threaten the health or life of the rescuerer

# The principles of first aid

- Quickly but calmly evaluate the situation and summon the appropriate help
- Ensure safety at the accident site and protect yourself
- Early identify life-threatening conditions
- Provide adequate assistance with regard to the character and severity of injury
- Search for circumstances and mechanism of injury



# The obligation to provide first aid

**.. is taken for granted**

**Criminal Law of Czech Republic says:**

*Failure to provide assistance §150*

- 1. One person who is in danger of death or shows signs of serious health disorder or other serious illness, does not provide the necessary help, although he can do so without danger to himself or another, shall be punished by imprisonment of up to two years.*

... nevertheless ... a casualty has **the right to refuse** help

- stay at a safe distance from the casualty until you have gained the person's permission to move closer
- if you are convinced of the need for urgent medical treatment or the patient's condition is deteriorating call **155** / 112 for emergency help (999 for UK)
- observe from a distance until help arrives

# Communication with a casualty

- It is necessary to build mutual trust (introduction, explanation, reassurance) since the beginning
- Adequate communication due to age
- Act calmly, but firmly, with respect to the casualty
- Avoid to be provoked

# Vital signs

- signs that indicate the status of the body's vital (life-sustaining) functions

The normal ranges for a person's vital signs vary with age, weight, gender, and overall health

- Body temperature
- Pulse or heart rate
- Respiration rate (rate of breathing)
- Consciousness = **A**lert – **V**oice – **P**ain – **U**nresponsive
- Blood pressure

# Primary approach to the affected / initial examination – **DRS ABC**

D – Danger (onsite risk)

R – Response (talk / touch the casualty)

S – Shout (call / send for help)

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A – Airway (open and clear)

B – Breathing (look, listen and feel)

C – Circulation (severe bleeding?)



# Danger

- Evaluate the scene accurately
- Stay calm
- Identify any safety risks
- Assess the resources available
- When approaching a casualty make sure you protect yourself
- If you cannot make an area safe, then call for emergency help
- Stand clear of the incident

# Requesting help

Telephoning for help: **CZ 155 or 112**  
**(999 UK)**

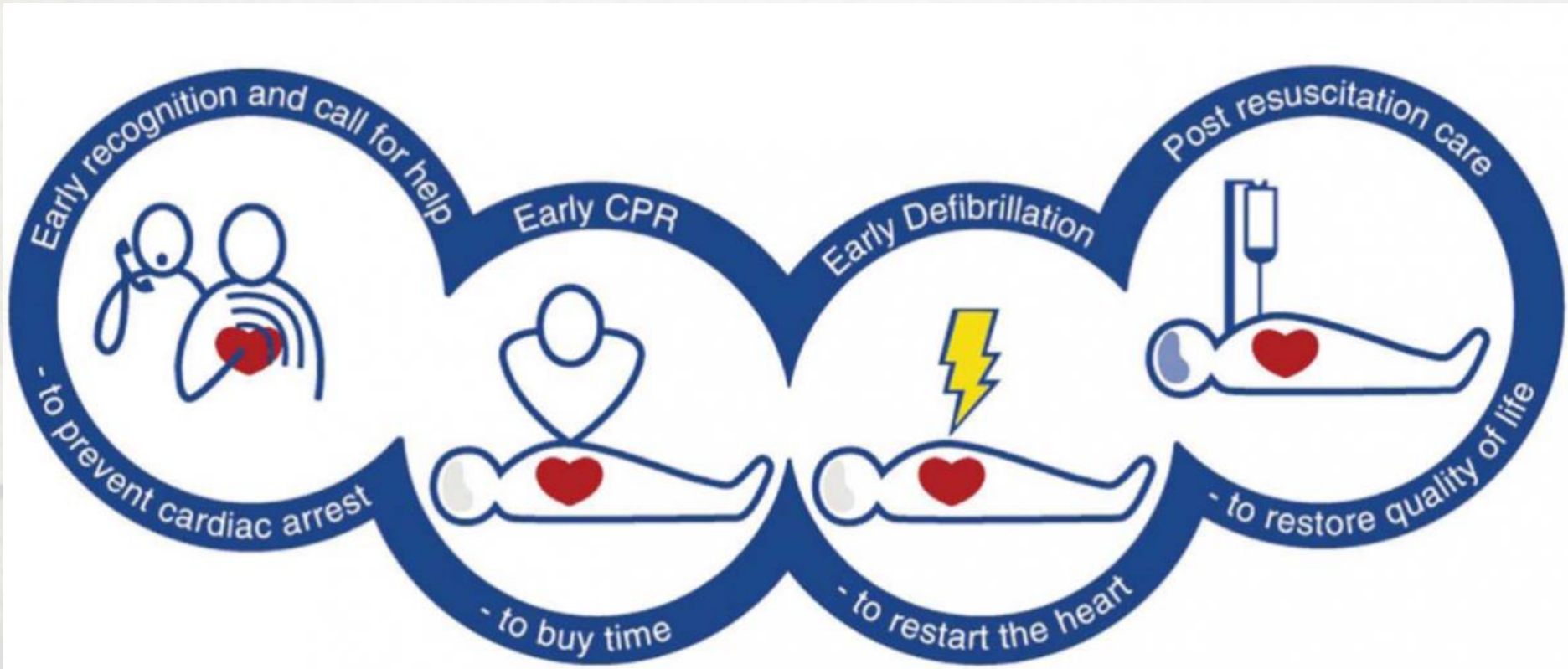
- Introduce yourself
- What happened / what is the problem ?
- How many casualties are affected
- What is the status of the victim (conscious, breathing ...?)
- Where the event occurred (the most accurate description of the site)
- Answer all questions of the operator
- Follow any instructions
- End call as second (no sooner than operator)
- Be prepared for calling back

# Response = assessing the casualties

- Find out what is wrong with the casualty
- Treat conditions found in order of severity - life-threatening injuries first
- Arrange for the next step of casualty's care  
(emergency help / seek medical advice / let him go)

The primary survey – airway, breathing, circulation

The secondary survey – history, symptoms, signs



- the **chain of survival** is a series of steps (forming a virtual “chain”) which give the best chance of survival from a **cardiac arrest** (when the heart stops beating)
- if all the steps of the chain are followed promptly, then the victim has the best chance of surviving the cardiac arrest



If during the primary examination (ABC) is ruled out failure of vital function, approach to detailed „**head to toe**“ secondary examination

Symptoms – listen the casualty; see, feel, hear, smell

Sings – allergy, medications, previous medical history, last meal, event history





**FIRST AID**

# Patient positioning

## Supine

- hard surface
- with underlay head
- with raised legs
- autotransfusion position

Supine



Prone



Sitting position with  
back and head support  
(Fowler's)

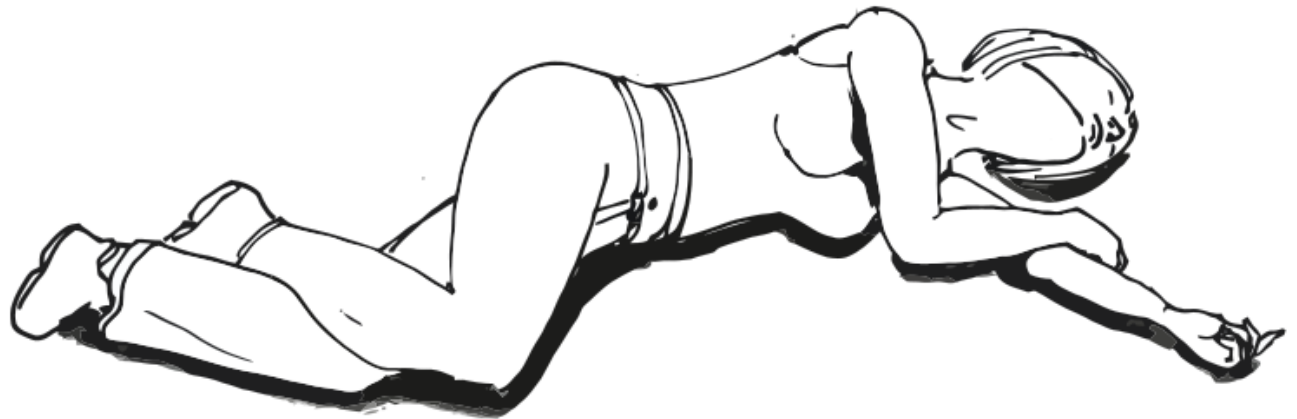
Position on side with  
knees bent



# „Recovery position“ - Rautek

- Indications - impaired consciousness, regular and sufficient breathing

[video](#)



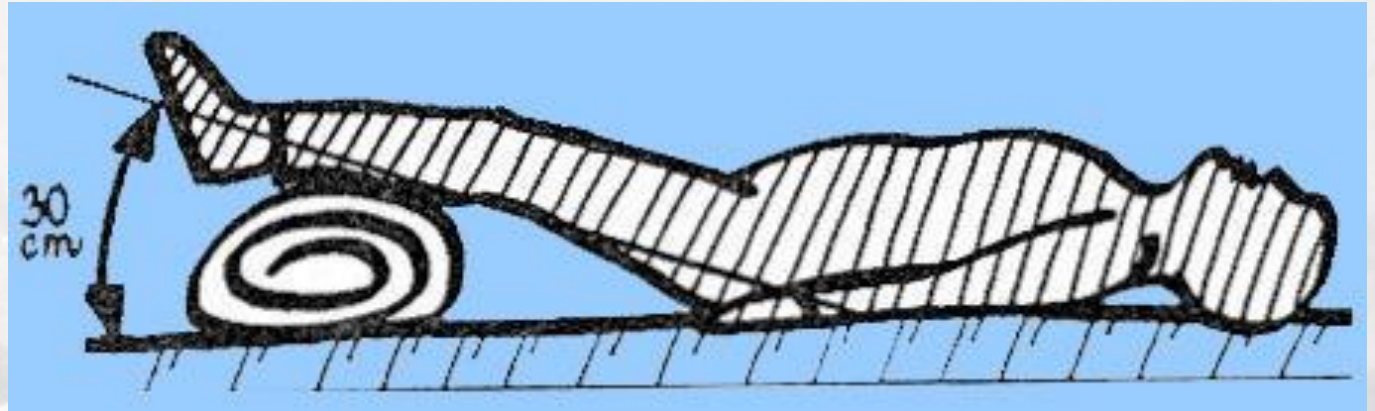


REAL First Aid  
www.realfirstaid.co.uk

INJECTION



# „Anti-shock position" - Trendelenburg

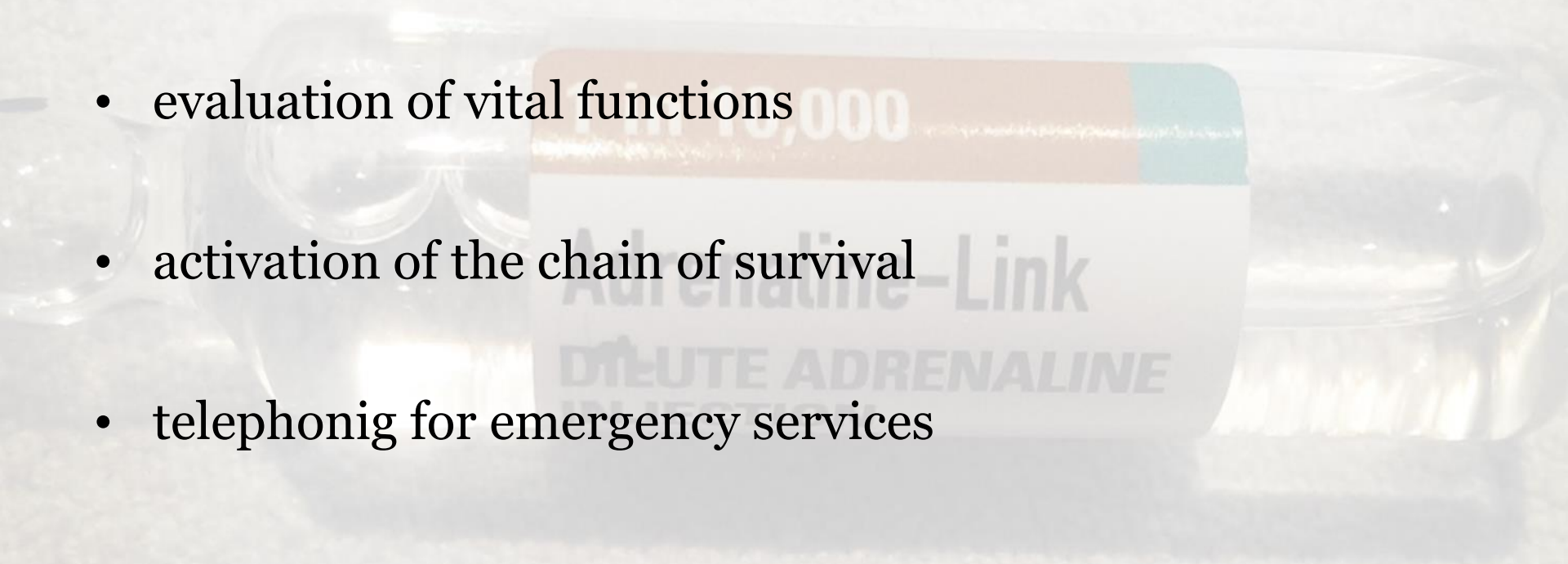






# Practical training :

- the behavior on-site of accident
- evaluation of vital functions
- activation of the chain of survival
- telephonig for emergency services



Thanks for your attention  
Have a nice day ☺

