

FIRST AID

VEIN BATCH

(Summary)

Lecture : 3

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Primary assessment & Basic Life Support

التقييم الاولي ودعم الحياة الاساسي

1-scene survey

First aider are never required to place themselves in a situation which might put them in danger

Remember ! You cannot help a victim if you become a victim yourself

● what has happened?

1- Assess the scene >> where are you?

2- Get some history >> what has happened ?

3-Be sure to listen >> to receive further inputs!

2- Responsiveness

معرفة مدى وعي المريض (استجابته)

<< بعد ما تتأكد من وجود اقل احتمالية تعرضك للخطر او عدم وجود الخطر بشكل عام على نفسك كمسعف تبدأ بتقييم وعي المريض واستجابته

Victims can be quickly assessed on the **AVPU** scale and this will help make decisions about their care .

The scale (**AVPU**) stands for **Alert ,voice ,pain ,** and **Unresponsive**

Important →

Level of Consciousness
A – Alert, “Can answer questions sensibly”
V – Responds to verbal commands
P – Responds to a pressure or pain stimulus
U – Unresponsive to any stimulus

3-Summary :

To this stage the first aider, on approaching a victim should have :

“GODOCTORSH”

(اختصار لتسهيل الحفظ)

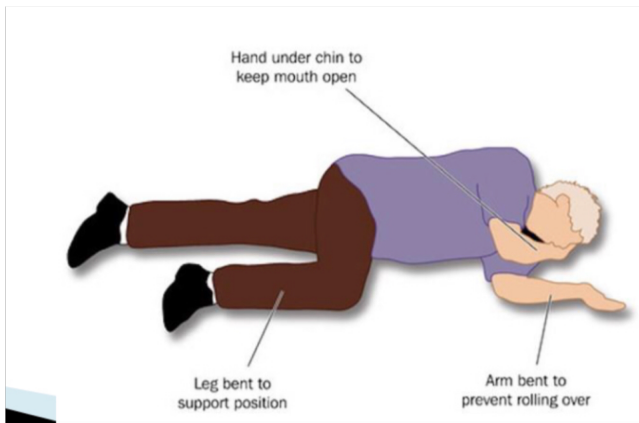
- 1-GO >> put their gloves on
- 2-D >> Checked for danger
- 3- R >> checked for responsiveness
- 4- S>> looked at the scene for clues about what has happened
- 5- H >> Gained history on the incident

4- calling for help

عند طلب المساعدة قد يتطلب منك تزويد خدمات الطوارئ ب بعض المعلومات مثل موقعك الحالي او طبيعة الحادثة او الخدمة والمهارات المطلوبة للاسعاف رقم هاتف للتواصل في حال فقدو امكانية الوصول اليك او الى مكان الحادث

>>If the victim is unconscious they should be left in the **Recovery position** .

<< الوضعية باختصار تكون بوضع المريض او المصاب على جانبه الايسر حتى لا تتم اعاقه عملية التنفس ووضع يده اليمنى اسفل رأسه والساق اليمنى (العليا) مثنية والساق اليسرى (السفلى) نجعلها في وضعية مستقيمه (ممدودة)



● اهمية هاي الوضعية :

- 1-It will keep their airway clear and open
- 2- it also ensures that any vomit won't cause them to choke

Primary Survey

- 1 -Airway
- 2- Breathing and ventilatio
- 3-circulation and haemorrhage
- 4-Disability or neurological deficit
- 5-Extremity/Environment /Exposure

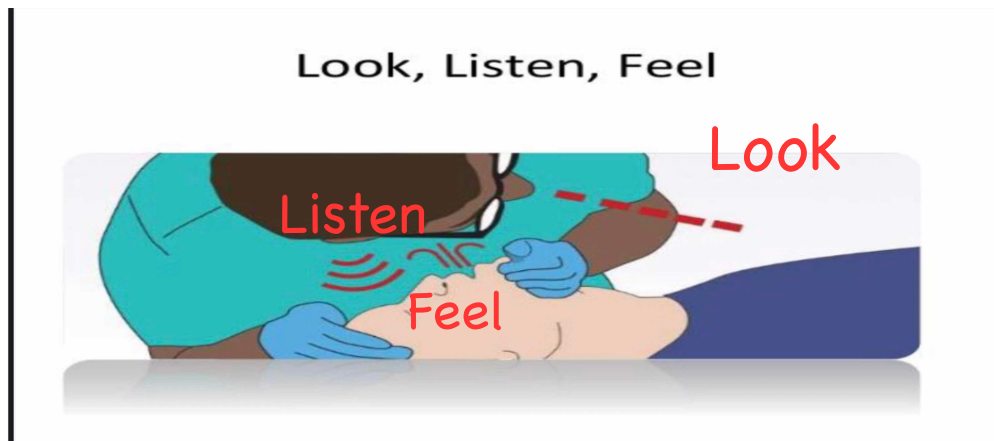
A: for Airway >>

The technique used to open the airways is called the " **Head -tilt Chin- lift** "

B: for Breathing >>

After opening the victim's airway , check for normal breathing and to do this place your cheek in front of the victim's mouth (about 3-5 cm away) while looking at their chest .

Looke , listen , and feel for not more than 10 seconds



Cardiopulmonary resuscitation (CPR) comprises of cycles of chest compressions and rescue breaths in a ratio of 30 chest compressions to 2 rescue breaths (30:2). One 'cycle' of CPR is one round of 30:2



<<الافضل او لضمان بقاء المصاب على قيد الحياة لازم نقوم ب 4 دورات من الانعاش القلبي الرئوي في الدقيقة (١٠٠-١٢٠ كل دقيقة يعني معدل ٤ دورات)

>>The purpose of doing chest compressions is to effectively squeeze the heart inside the victim's chest, causing blood to flow.

Note>>The quality (depth) of chest compressions is very important. achieve a depth of 5cm.

When to stop?

- Return of Spontaneous Breathing
- Qualified help arrives and takes over.
- You are unable to continue
- You put yourself in danger by continuing

C : for Circulation and hemorrhage (Bleeding

If your victim is breathing, then you should continue your primary assessment with a check for circulation

Remember that about 80% of life- threatening bleeding can be controlled adequately using direct pressure alone and the application of a tourniquet may result in the loss of the limb.

The End