

Electric Shock

Break the contact by switching off the power at the mains. Never touch the casualty until the power supply has been switched off. If you can't do this, stand on some insulating material and move the casualty away from the source of the current with a long wooden or plastic implement. If the casualty has stopped breathing start 'Mouth to Mouth' ventilation and call for help.

Check the **ABC** of first aid- their **Airway, Breathing & Circulation**. If breathing and pulse are absent immediately dial **999** for an ambulance and begin resuscitation without delay. If the patient is unconscious but breathing, place in the recovery position.

Bleeding

Remove clothing around the wound and then press firmly, if possible after applying a clean dressing or pad. Raise and support the injured part (*unless it is broken*) whilst maintaining pressure. Bandage the pad or dressing in place, but not so tightly that the blood supply is cut off.

NB: Do not apply a tourniquet.

Broken Bones

Clean and treat any bleeding. Support a broken leg using a splint ensuring it cannot move. If an arm is broken put it in a sling, tying it to body to support it. Trapped fingers in car door: gently wrap the hand in padding and take casualty to hospital. If possible, put the arm in a sling so that the hand is raised up to the shoulder, reducing bleeding and swelling.

Burns

Run the affected area under cold water for up to 10 minutes. Remove clothing and jewellery from affected area but not if it is stuck to the burn. Cover the burn with sterile, non-stick dressing e.g. Melonin. **NB:** Do not apply cream/ointment to large burns. Do not burst any blisters.

Choking

Choking is the complete blockage of the airway where casualty is unable to breathe, cough or talk. Call for medical assistance immediately. Then, standing behind the casualty, place interlocked fists midway between the lower end of the breast bone and above the naval and pull sharply inwards and upwards, between 6 and 10 times. If the casualty has already fallen to the ground, kneel beside the casualty and with the heel of interlocked hands placed on their abdomen thrust forward about 5 or 6 times to try to expel the blockage.

Poisoning

Do not induce vomiting if the casualty has swallowed something corrosive as this will further damage the gullet. Give the conscious casualty cold water or milk to drink. If unconscious but breathing, place in the recovery position and call for an ambulance. If possible keep a sample of the poisoning agent e.g. tablets, plant berries to take to the poison unit in the hospital. Poisons Centre Tel: 01 8379966

First Aid Kit Order Form

Drop Your Completed Order Form Into **Ryan's Pharmacy**
And We Will Be Happy To Prepare It For You.

Contents:	Quantity:
Plasters	
Melonin Dressing 5cm x 5cm	
Melonin Dressing 10cm x 10cm	
Mepore Dressings	
Sterile Gauze Swabs	
Medistrip Adhesive Plaster (Blue Plaster)	
Mefix Tape	
Micropore Tape	
Steristrips (Paper Stiches)	
Triangular Bandage	
Elastocrepe Bandage 5cm x 5m	
Elastocrepe Bandage 7.5cm x 5m	
Kling Crepe Bandage 5cm x 5m	
Tubigauz Finger Bandage	
Opticlude Eye Patch	
Savlon Antiseptic Cream	
Savlon Wound Wash 100ml	
Savlon Dry Spray 50/100ml	
Dry Spray 50ml/ 150ml	
Mediswabs	
Savlon Handwash	
Disposable Gloves	
Optrex Eye Lotion	
Burn Spray	
Freeze Spray	
Cold/ Hot Comfort Pack	
Cotton Wool (Hospital Quality)	
Scissors	
Tweezers	
Safety Pins	



First Aid

RYAN'S
PHARMACY

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EDENDERRY Tel:(046) 9731046

DAINGEAN Tel/Fax: (057) 9353767

www.ryanspharmacy.ie



First Aid Guidelines

Always remember to keep your First Aid Kit well stocked and replace any used items as soon as you can. Regularly check the 'use by' dates for items such as creams.

In an Emergency Situation It Is Important To:

Make the area safe

Assess the situation and arrange to get help immediately

Identify, if possible, the condition or injury

Administer the right treatment A.S.A.P

Arrange to get patient to Doctor/Hospital

Stay with the patient until professional help arrives

Keep yourself out of danger

Assess The Casualty

Check for consciousness by gently shaking the casualty and speaking loudly.

If unconscious- Dial 999 immediately and ask for a cardiac ambulance. Lie the casualty on the flat of their back on a firm surface and open airway. Remove any obstructions from the mouth and nose. Tilt the head back by pushing gently on the chin and placing your hand on the forehead.

Check for breathing. Put your ear near the casualty's nose and mouth whilst looking towards their chest, feel for breath on your cheek, look towards his chest for movement. Listen for breathing sounds. If no breathing begin mouth to mouth ventilation.

Check for pulse. If no pulse is found dial 999 for ambulance then give mouth to mouth and chest compression until help arrives. If pulse is found, give 10 breaths of mouth to mouth ventilation then dial 999 for ambulance. Continue mouth to mouth until help arrives.

If an unconscious patient is breathing they should always be placed in the recovery position to keep the airway open and allow saliva and vomit to drain away.

The Recovery Position

Kneel alongside the patient facing his chest.

If he is on his back, place his nearest arm by his side.

Lift his nearest hip and place his hand well underneath with the fingers straight.

Holding his far leg under the knee or ankle, bring it towards you and cross it over his near leg.

Bring his forearm over the front of his chest.

Support his head with one hand. With the other, grasp his clothing at the hip furthest from you and pull him towards you. Support him on his side against your thighs. Still supporting his body, readjust his head to make sure the airways is open. Bend his uppermost knee at a right angle to bring his thigh well forward to support the lower body. Carefully pull his arm out from under him, working from the shoulder down. Leave it lying parallel to him to prevent him rolling back. Check that the final position is stable, that he cannot roll forwards or backwards, that no more than half his chest is touching the ground and that his head remains tilted and jaw forward to maintain an open airway.

A B C Of Resuscitation

A is for **Airway** – tilting the head backwards keeps it open.

B is for **Breathing**- do mouth to mouth if casualty is not breathing.

C is for **Circulation**- if no pulse do chest compressions to force blood through the heart and around the body.

Mouth To Mouth Ventilation

Lay the casualty on his back and make sure the airway is open. Tilt his head back and keep his nostrils closed by pinching them.

Breathe in and put your lips firmly around the casualty's mouth. Blow until you see the chest rise.

Take your mouth away, letting the air out of his lungs. Keep going at a rate of about 10 breaths per minute until help arrives. Check pulse for 5-10 seconds.

Chest Compression

Lay the casualty on his back on a firm surface. Place 'heel' of one hand in the middle of his chest just above the bottom of the breastbone then put the other hand on top, interlinking your fingers.

Keep your arms straight, and press the chest down about 2 inches and then release the pressure. Do not remove hands from their position. Keep going at the rate of about 80 per minute until help arrives.

To combine with mouth to mouth ventilation do 15 compressions and then 2 breaths until help arrives. Repeat 4 times and check for pulse.

General First Aid Guidelines

Minor Cuts and Grazes

Rinse the area by holding it under the cold tap or wash it out using wound wash e.g. Savlon wound wash, alternatively clean with a sterile medi- swab.

Pat the area dry with a sterile swab and apply an antiseptic cream e.g. Savlon cream.

Apply a plaster to the area.

Medical advice should be sought if:

There is a foreign body in the wound and if there is a high risk of infection.

Dog Bites: infection occurs in 5-15% of bites and risk is increased in the elderly and those who delay treatment by more than 24 hours especially if a deep puncture wound.

Cat Bites: most result in puncture wounds and risk of infection is high. A wound starts to become infected after a period of time.

Insect Bites And Stings

A bee sting in the skin:

Remove the sting with a pair of tweezers if it is still there.

Apply a cold compress.

Apply an antiseptic healing cream e.g. Savlon cream
(traditional remedies such as applying vinegar to a wasp sting and sodium bicarbonate to bee stings may be useful if an antiseptic cream is not at hand).

Chemical Burns

Remove any contaminated clothing, which is not stuck to skin.

Flush the area with sterile normal saline or tap water.

Apply a sterile dressing to the affected area. Refer to hospital.

Eye Injuries

Chemicals in the eye: flush continuously with clean, cool water for about 15 minutes and refer to hospital.

Foreign body in the eye: flush the eye with clean, cool water. Cover the affected area with a sterile dressing and then bandage.
Most serious eye injuries are accompanied by a reduction in visual acuity- treat as a medical emergency.