

## St John First Aid Basics

### St John DRABCD Action Plan

This Action Plan is a vital aid to the first aider in assessing whether the casualty has any life threatening conditions and if any immediate first aid is necessary. It is always important to call 000 for an ambulance as soon as possible.

**D check for DANGER:** to you, others, and to casualty.

**R check for RESPONSE:** squeeze casualty's shoulders, ask casualty for their name. If casualty responds, check for other injuries.

**A check AIRWAY:** If casualty does not respond, look in mouth—is the airway clear of foreign material?

- If no foreign material is present, leave casualty on back and open airway.
- If foreign material is present, turn casualty to recovery position, clear airway with fingers.



**B check BREATHING:** look and feel for chest movement, listen for air escaping from mouth and nose (an occasional gasp is not adequate for normal breathing).

**If breathing** place in recovery position, call 000 for ambulance, regularly check for signs of life.

**If NOT breathing** ask someone to call 000.

- Open airway—tilt head backwards.
- Pinch nose closed.
- Lift chin and open mouth.
- Take a breath and blow into casualty's mouth—watch for chest to rise.
- Repeat to give two initial breaths.



**C CPR:** Check for signs of life: Is casualty breathing, responding, moving?

**If NO signs of life,** start CPR

**Adult/Child (over 1 year)**  
Place heel of hand on lower half of breastbone in centre of chest with other hand on top of first.

**Infant (under 1 year)**  
Place two fingers (index and middle) over lower half of breastbone.



- Press down 1/3 of depth of chest, give 30 compressions and 2 breaths.
- You should achieve 5 sets of CPR (30:2) in about 2 minutes.
- Continue CPR until ambulance arrives.

**D Apply a DEFIBRILLATOR:** (if available)  
• Follow voice prompts.

### Recovery Position

- Kneel beside the casualty.
- Place nearer arm across chest.
- Place farther arm at right angle to body.
- Lift nearer leg at knee so it is fully bent upwards.
- Roll casualty away from you onto side.
- Keep leg at right angle, with knee touching ground to prevent casualty rolling onto face.



### Choking

**Adult/Child (over 1 year)**

- Encourage casualty to relax, breathe deeply and cough to remove object.
- If coughing does not remove blockage, or if an infant—Call 000 for an ambulance.
- Bend casualty well forward and give 5 back blows between the shoulder blades—checking if blockage removed after each back blow.
- If unsuccessful, give 5 chest thrusts—in the CPR compression position, slower but sharper than compressions—checking if blockage removed after each chest thrust.
- If blockage not removed, alternate 5 back blows with 5 chest thrusts until medical aid arrives.



**If casualty becomes unconscious:**

- 1 Call 000 for an ambulance.
- 2 Remove any visible obstruction from the mouth.
- 3 Commence CPR.

### Poisoning

- Follow DRABCD Action Plan.
- Call 000 for an ambulance.
- Ring the Poisons Information Centre on 13 11 26.
- Monitor airway and breathing.

**WARNING—Do not attempt to induce vomiting unless advised to do so by the Poison Information Centre.**

### Burns

**1. Remove casualty from danger**

**If clothing on fire:**

- STOP, DROP AND ROLL.
- Wrap casualty in blanket.
- Roll casualty along ground until flames extinguish.

**2. Cool the burnt area**

- Hold burnt area under cold running water—for at least 10 minutes.
- If chemical burn, run cold water over burnt area for at least 20 minutes.
- Remove clothing and jewellery from burnt area unless sticking to burn.
- Place sterile non-adherent dressing or burns sheet over burn.
- Seek medical aid.



### Bleeding

**1. Apply pressure to the wound**

- Remove or cut casualty's clothing to expose wound.
- Wear gloves if available.
- Apply direct pressure over wound using sterile or clean dressing and pad.

**2. Raise and support injured part**

- Lie casualty down and then raise injured part above heart.

**3. Bandage wound**

- Bandage dressing and pad firmly in place.
- Apply another pad and bandage if bleeding continues.
- If bleeding persists seek medical aid.



### Sprains and Strains

**Follow RICE management plan:**

**REST:** the injured part in comfortable position.

**ICE:** icepacks (cold compress) wrapped in a wet cloth, apply for 15 minutes every 2 hours for 24 hours.

**COMPRESSION:** apply compression bandage firmly to extend well beyond the injury.

**ELEVATE:** the injured part unless you suspect a fracture.



### Minor Injuries

**Nosebleeds**

- Sit up with head slightly forward.
- Pinch soft part of nose for 10 minutes.
- Breathe through the mouth, do not blow nose.
- Loosen tight clothing around neck.
- Apply cold pack to neck and forehead.

**If bleeding persists, seek medical aid.**

**Scrapes and grazes**

- Wash with running water to remove dirt.
- Cover with non-stick dressing.
- Bandage or tape in place.

**Seek medical aid if anything is embedded in wound, or becomes red, painful, warm or swollen.**

**Tooth knocked out**

- Clean with milk or casualty's own saliva and replace in socket—unless casualty is a child under 7 years (baby tooth).
- Ask casualty to hold in place.
- If unable to put tooth back, wrap tooth in plastic or store in milk or sterile saline and take casualty and tooth to a dentist.
- If tooth has been in contact with dirt or soil, advise casualty to have tetanus injection.