



First Aid / CPR / AED Basics

FIRST AID CARE | I BET YOU DIDN'T KNOW that first-aid supplies must be provided and OSHA offers recommendations for specific materials based upon the type of business and the number of workers you employ. Do you have a First Aid Kit? Is it stocked with usable items?

What You Need to Know | Even a small scratch, cut, puncture wound or burn can become infected. And unless properly cared for, cleansed or protected, it can cause blood poisoning or introduction of dangerous organisms into the bloodstream. Additionally, if you give first aid to others, always protect yourself from exposure to BBP by wearing gloves, masks, and eye protection. Do not be foolish. Get first aid when you need it, even if you just have a small cut or splinter. While it is best to leave major first-aid treatment to those who have professional training, all workers should know basic first aid:

- Whatever you use as a dressing to stop the bleeding, it must remain in place until treated by a professional. If more dressing is required to absorb the blood, place it on top of the original dressing.
- In case of a broken bone, you should be able to apply a splint to immobilize the limb.
- If a victim is in contact with electricity, make sure the current is off before attempting to help the victim, or use a nonconductor, such as a dry wooden pole to remove the victim from the contact. If necessary, have an experienced person perform CPR.
- If the eye is splashed with an irritant, immediately flush the eye with clean water for at least 15 minutes.
- Never try to remove any objects from an eye with a sharp instrument. Grasping the upper lashes and pull the upper lid out and down. Often the object will attach to the inside of the upper lid and be swept away by tears. If the injury is serious, put a clean cloth or gauze pad over the eye.
- An average adult can lose one pint of blood in 15 to 20 minutes without serious danger. To stop heavy bleeding, first elevate the limb (if no fracture is suspected) and apply direct pressure to the affected area.
- Treating for Shock: ensure the victim can breathe comfortably and place covers under and over victim. If they are unconscious place them on their side and monitor the airway.
- A deep puncture wound is perhaps the most likely to become infected; this is even more likely than the torn edges of a laceration. Apply antiseptics to cleanse the wound to prevent infection.
- Heat Exhaustion - may result from physical exertion in hot environments. Symptoms may include profuse sweating, weakness, paleness of the skin, rapid pulse, dizziness, nausea, headache, vomiting, & unconsciousness. The skin is cool and clammy with sweat. Body temperature may be normal or subnormal. First Aid - Rest in the shade or cool place. Drink plenty of fluids water.

Whether you buy a first aid kit or put one together, make sure it has all the items you may need:

- Include any personal items such as medications and emergency phone numbers or other items your health-care provider may suggest.
- Check the kit regularly.
- Make sure the flashlight batteries work.
- Check expiration dates and replace any used or out-of-date contents.

The Red Cross recommends that all first aid kits for a family of four include the following:

2 absorbent compress dressings (5 x 9 ") 25 adhesive bandages (assorted sizes) 1 adhesive cloth tape (10 yds x 1") 5 antibiotic ointment packets (approximately 1 gram) 1 instant cold compress First aid instruction booklet	5 antiseptic wipe packets 2 packets of aspirin (81 mg ea) 1 blanket (space blanket) 1 breathing barrier (with one-way valve) 2 pair of non-latex gloves (size: large) 2 triangular bandages Tweezers	2 hydrocortisone ointment packets (approximately 1 gram each) Scissors 1 roller bandage (3" wide) 1 roller bandage (4" wide) 5 sterile gauze pads (3 x 3") 5 sterile gauze pads (4 x 4") Oral thermometer
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Proper training & certification are the best approach to learning CPR, but the basics are and should be public knowledge | CPR can help to keep someone alive in case of an accident long enough for emergency help to arrive, but studies show that, properly performed, it also helps to improve the quality of health for victims of heart attack after the accident, and can improve their recovery significantly. While many occupations require CPR certification, knowledge of CPR techniques could be useful to absolutely anyone in the event that one becomes incapacitated.

However, improper practice of the technique can cause damage to a healthy person and could complicate an already life-threatening situation. As such, those who are CPR certified should keep not only their paper certification, but their memory up-to-date, and those who are not should seek certification before trying to perform CPR if at all possible. Remember these rules, first, when confronted with a situation that might require CPR. First, only consider performing CPR if the following three conditions are met:

- Breathing has stopped completely.
- There are no signs of circulation, such as pulse or physical response to rescue breathing.
- You are the individual present with the most training in CPR, or are the most fit to perform the procedure.

1. CALL | Check the victim for unresponsiveness. If the person is not responsive and not breathing or not breathing normally. Call 911 and return to the victim. In most locations the emergency dispatcher can assist you with CPR instructions



2. PUMP | If the victim is still not breathing normally, coughing or moving, begin chest compressions. Push down in the center of the chest 2 inches 30 times. Pump hard and fast at the rate of at least 100/minute, faster than once per second.



3. BLOW | Tilt the head back and lift the chin. Pinch nose and cover the mouth with yours and blow until you see the chest rise. Give 2 breaths. Each breath should take 1 second



CONTINUE WITH 30 PUMPS AND 2 BREATHS UNTIL HELP ARRIVES

NOTE: This ratio is the same for one-person & two-person CPR. In two-person CPR the person pumping the chest stops while the other gives mouth-to-mouth breathing.

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- Turn on the AED | Wipe the chest dry | Attach pads to bare chest | Plug in the connector, if necessary
 - Make sure no one, including you, is touching the person ** Tell everyone to "STAND CLEAR" **
 - Push the analyze button if necessary, let the AED analyze heart rhythm
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- If AED advises you to shock the person:
 - Make sure no one, including you, is touching the person ** Tell everyone to "STAND CLEAR" **
 - Push the "shock" button, if necessary.
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Each County Owned AED has clear and simple instructions located with the machine. Those County Locations are: City Hall Council Chambers | City Hall Ponderosa Room Hallway | LHS Gym | VFW Banquet Hall | Memorial Center

Ergonomic Safety Principles

Following ergonomic safety practices at work and at home greatly reduces your risk of suffering from the painful cumulative damage that stress and strain places on your body. Ergonomic principles of safety refer to making sure that the products and methods a worker uses are a correct match to the worker's specific job and personal capabilities. The importance of ensuring that a worker and the conditions and demands of their job setting are a good fit has a tremendous impact on both workers and the companies that employ them. Generally, when ergonomic principles and practices are followed there is:

- A reduced risk of illnesses and injuries
- Higher productivity levels
- A greater sense of satisfaction among the employees

Ergonomic Risk Factors

Often when people hear the term ergonomics they think of an office setting with an ergonomic chair and computer keyboard. However, ergonomic risk factors exist in many different types of workplaces, as well as in homes and home offices. Examples of risk factors include jobs that require:

- Repetitive, forceful or prolonged use of the fingers, wrist or hands
- Excessive, repetitive or constant stress on any part of the body
- Sitting in one position for long periods of time
- Heavy & Frequent lifting
- Carrying, pulling or pushing heavy objects
- Prolonged positions requiring postures that are uncomfortable or awkward
- Working in areas with constant vibrations, and extreme hot or cold temperatures



Common Injuries

The resulting injuries develop over time and are known as repetitive stress injuries or cumulative stress disorders that result in injuries to the worker's musculoskeletal system often resulting in chronic painful conditions including:

- Back pain
- Neck pain
- Pain between the shoulders
- Muscle strains
- Weakness in an arm, hand or fingers
- A tingling sensation in an arm, hand or fingers
- Loss of feeling in an arm, hand or fingers
- Carpal Tunnel Syndrome
- Tennis elbow
- Eye strain



More Safety Tips

As you go throughout your day, you can utilize ergonomic safety practices in many areas by:

- Arranging work areas so that you do not have to overstretch. Keep the things that you use most often within reach and below shoulder height.
- Using tools that are made to fit the size of your hand.
- Using kneepads when gardening and doing other jobs that require kneeling
- Wearing a back brace or support belt when lifting or moving heavy objects or doing a strenuous task
- Wearing a headset when talking on the telephone for extended lengths of time
- Bending or squatting at the knees when lifting something heavy



Self-inspection checklist

Ergonomics: general

- Can the work be performed without eye strain or glare?
- Can the task be done without repetitive lifting of the arms above the shoulder level?
- Can the task be done without the employee having to hold his or her elbows out and away from the body?
- Can employees keep their hands or wrists in a neutral position when they are working?
- Are mechanical assists available to the worker performing materials-handling tasks?
- Can the task be done without having to stoop the neck and shoulders to view the work?
- Are pressure points on body parts such as wrists, forearms, backs of thighs avoided?
- Can the work be done using the larger muscles of the body?
- Are there sufficient rest breaks, in addition to scheduled rest breaks, to relieve stress from repetitive-motion tasks?
- Are tools, instruments, and machinery shaped, positioned, and handled so that tasks can be performed comfortably?
- Are all pieces of furniture adjusted, positioned, and arranged to minimize strain on the body?
- Are lifts confined within the knuckle-to-shoulder zone?
- Is work arranged so that workers are not required to lift and carry too much weight?
- If workers have to push or pull objects using great amounts of force, are mechanical aids provided?