



**NEAR  
 HOME  
 SAVIOURS**

FIRST RESPONDERS IN EMERGENCIES  
 an initiative by NHS Hospital



NASA & HUB SUPERSPECIALITY  
 300 m from Kapurthala Chowk, Near Sports College, Jalandhar  
 0181 - 4640181 **24/7** 0181 - 4633333





# Near Home Saviours



Near Home Saviours is an initiative by NHS Hospitals to ensure any person, anywhere in an emergency has the absolute best chance of survival and no lives are lost due to lack of medical knowledge or skills of the first responders and bystanders.

Every life is precious and we live by that.

With enough well equipped First Responders & Near Home Saviours in Jalandhar, we'll make sure there is one in every society, school and house to ensure emergencies are always in your control until our specialists arrive.

Protect your home. Protect your society. Protect your city.

Be a Near Home Saviour today!

# NEAR HOME SAVIOURS



## PROGRAM DETAILS & MORE

- STEP 01 Who are Near Home Saviours & What are their Objectives?
- STEP 02 Awareness Talk on Common Emergencies
- STEP 03 Importance of First Response & Role of First Responders in Emergencies
- STEP 04 First Responder Training - How to Handle Common Emergencies
- STEP 05 Training at NHS Hospital- 4 Further NHS Sessions for Willing Participants
- STEP 06 NHS Certificate on Completion of 4 Sessions at NHS Hospital
- STEP 07 Yearly Refresher Sessions for Certified Near Home Saviours
- STEP 08 NHS Sessions Continue in Jalandhar

## 01



### Introduction

In case of medical emergencies, the crucial factors like identifying the symptoms, diagnosis & immediate action towards the required care, will determine the speed and extent of recovery.

So, let's brace ourselves and step up to care for each other in crucial times. For this we need to understand the following:



### What is an Emergency?

A serious and often dangerous situation threatening the life of an individual. A medical emergency or an individual in an emergency situation if left untended, can be fatal and can result in loss of life.

#### Few common emergencies which we shall focus on:

- |                                    |                            |
|------------------------------------|----------------------------|
| Cuts & Wounds                      | Chemical Burns             |
| Road Traffic Accidents & Fractures | Seizures                   |
| Burns                              | Head Injury                |
| Electric Shocks                    | Choking                    |
| Chest Pain                         | Animal Bites               |
| Poisoning                          | Cardiovascular Emergencies |
| Hypoglycaemia                      | Stroke                     |



# 02



## First Responders in Emergencies

Who are First Responders in Emergencies?

First responders are people who are the first to arrive or happen to be at the scene of an emergency and are trained to control the situation until further help arrives.

What role do they play?

First responders help stabilize patients in critical conditions until further help arrives and help manage non-critical emergencies.

Who can be a First Responder in an Emergency?

Any one with a genuine intention to help others & has received medical training to provide pre-hospital care to control an emergency, can become a First Responder in an Emergency .

## Role of First Responders in Emergencies

The role of the first responder is an important and critical one. For example, when a cardiac arrest occurs, vigorous CPR (Cardio Pulmonary Resuscitation) needs to be done immediately to stabilize the patient.

## Duties

- A First Responder’s duties might include administering life support care and first aid, mobilizing injured people by transport and communicating with dispatchers and medical facilities about the condition of incoming patients.
- First responders also play the important role of being there as an advocate for you and your family, at the right time.



# 03



## Basic Life Support

Basic life support (BLS) is used for victims of life-threatening illnesses or injuries until they can be given full medical care at a hospital. It can be provided by trained medical personnel, including emergency medical technicians, paramedics, and by qualified bystanders.

- It is performed on any patient who is unresponsive or not breathing.
- **Assess Responsiveness:**
  - Shake and shout
  - Scan chest for breaths/movements
- **Call for Help**
  - Call NHS Emergency Number **0181 - 4633333**
- **Circulation**
  - Check carotid pulse.
  - Not for more than 10 seconds.
  - If pulse is absent, start chest compressions.

### For chest compressions:

- Depth of at least 2 inch.
- Rate at least 100/min.
- Push hard and fast.
- 30 compressions followed by 2 breaths= 1 cycle in adults & 15 compressions followed by 2 breaths = 1 cycle in children.
- Allow full chest recoil.
- Position for chest compressions : lower 1/3rd of sternum or on the center bone between two nipples.



# 04



## CPR (Cardio - Pulmonary Resuscitation)

1



Tilt the head back and lift the chin until the teeth almost touch. Look and listen for breathing.

2



If the person is not breathing, pinch the nose closed and cover the person's mouth with yours. Give 2 full breaths.

3



Put your hands in the center of the person's chest between the nipples. Place one hand on top of the other. Push down 30 times. Continue with 2 breaths then 30 pushes until medical help arrives or the person starts moving.



# 05



## Cuts & Wounds



- Use pressure to stop bleeding.
- Wash a minor wound with water and mild soap to clean it, and apply antibacterial ointment and a clean bandage that won't stick to it.
- Look to see if there are foreign objects in the wound (eg. glass) but do not pull it out - seek medical help.
- Get urgent medical attention if the cut won't stop bleeding and you think it may need stitches.



- Don't breathe on an open wound.
- Don't try to clean a major wound.
- Don't push exposed body parts back in. Cover them with clean material until medical help arrives.



# 06

## Road Traffic Accidents and Fractures



- Always stop, help and call for help.
- Do establish whether there is a bone broken by looking for a deformity, swelling and an inability to move the limb normally.
- In case of head injury look for vomit, seizure, nose and ear bleed and loss of consciousness.



- Do not move the patient unnecessarily.
- Do not give anything to drink or eat.
- Don't move the limb unnecessarily, but do support it by immobilizing the injured area (using a sling or splint).



# 07

## Burns



- Gently flood the burnt area with cool running water.
- Use cool, clean fluid like soft drink or beer, if there is no water.
- Cover the burn with plastic wrap or a clean dressing to keep it sterile.



- Don't use very cold water or ice.
- Don't put creams or ointment on the burn, or break any blisters.
- Don't try to pull off any clothing stuck to the skin.
- Don't hesitate to call an ambulance if the person is in severe pain or badly injured. Get urgent help if the burn affects the eyes.



# 08

## Electric Shocks



- Make sure you are not putting yourself in danger, and that the electricity is switched off.
- Do put them on their back and start CPR if they are unconscious and not breathing.
- If they're unconscious but breathing, lie them on their side



- Don't approach somebody who is still connected to the electricity source (someone who is touching a live electrical cable or power line.)



# 09

## Chest Pain



- Do check for signs of life - look to see whether the person is breathing, moving or responsive.
- Do make sure your arms are straight and you are pushing in the middle of their chest.
- Do stop after 30 compressions to tilt back their head, pinch their nose and blow twice into their mouth. Then do 30 more compressions until help arrives.



- Don't waste time - start CPR as soon as possible if there are no signs of life. Put the patient on their back and push on their chest hard and fast 30 times.



# 10

## Poisoning



- Do look for signs of poisoning, like burns in and around the mouth, an altered state of consciousness, abdominal pain and nausea, or vomiting.
- Do call for help.
- Do place them on their side if they are unconscious.



- Don't induce vomiting.
- Don't give the patient anything to drink unless the qualified medical staff tells you to.



# 11

## Hypoglycaemia



### What is Hypoglycaemia?

Hypoglycaemia, also known as low blood sugar, is when blood sugar decreases to below normal levels. This may result in a variety of symptoms including clumsiness, trouble talking, confusion, loss of consciousness, seizures, or death. A feeling of hunger, sweating, shakiness, and weakness may also be present

### Signs and Symptoms:

- Shaking
- Trembling
- Sweating
- Feeling of pins and needles in lips and tongue
- Headache with difficulty in concentration
- Confusion
- Giddiness
- Decreased level on consciousness

### Treatment:

- Give glucose water i.e. water with sugar.
- Rush to the hospital immediately to treat the underlying cause.
- At the hospital, give 25% or 50% dextrose or glucagon.





# 12

## Chemical Burns



If a chemical burns the skin, follow these steps:

- Remove the cause of the burn by first brushing any remaining dry chemical and then rinsing the chemical off the skin surface with cool, gently running water for 10 to 20 minutes or more.
- Remove clothing/jewellery that has been contaminated by the chemical.
- Wrap the burned area loosely with a dry, sterile dressing (if available) or a clean cloth.
- Rewash the burned area for several more minutes if the person experiences increased burning after the initial washing.
- Take a pain reliever if needed for pain. These include aspirin, ibuprofen (Advil, Motrin, others), naproxen (Aleve) or acetaminophen (Tylenol, others).
- Use caution when giving aspirin to children or teenagers. Though aspirin is approved for children older than 2, children & teenagers recovering from chickenpox or flu-like symptoms should never take aspirin.
- Get a tetanus shot. All burns are susceptible to tetanus. Doctors recommend you get a tetanus shot every 10 years.
- Minor chemical burns usually heal without further treatment.



# 13

## Continued...

Seek emergency medical assistance if:

- The person shows signs of shock, such as fainting, pale complexion or breathing in a notably shallow manner.
- The chemical burn penetrated through the first layer of skin, and the resulting second-degree burn covers an area more than 3 inches (7.6 centimeters) in diameter.
- The chemical burn occurred on the eye, hands, feet, face, groin or buttocks or over a major joint.
- The person has pain that cannot be controlled with over-the-counter pain relievers.



# 14

## Seizures



### Action Points

- Stay calm, prevent injury.
- During the seizure, you can exercise your common sense by insuring there is nothing within reach that could harm the person if he/she struck it.
- Pay attention to the length of the seizure.
- Make the person as comfortable as possible.
- Keep onlookers away.
- Do not hold the person down.
- If the person having a seizure thrashes around there is no need for you to restrain them. Remember to consider your safety as well.
- Do not put anything in the person's mouth.
- Contrary to popular belief, a person having a seizure is incapable of swallowing his/her tongue so you can breathe easy in the knowledge that you do not have to stick your fingers into the mouth of someone in this condition.
- Do not give the person water, pills, or food until fully alert.
- If the seizure continues for longer than five minutes, call NHS emergency no. **0181 - 4633333**
- Be sensitive and supportive and ask others to do the same.



# 15

## Head Injury



- What to look for?
  - Headache, vomiting, seizures, visual problems, altered mental status.
- What to do ?
  - Stabilize head and neck.
  - Seek medical help immediately.
  - Turn on one side if unconscious.
  - Do not elevate legs.
  - Do not give any thing to eat or drink



# 16

## Choking



### Action Points

If someone is choking, you need to act quickly - choking can cut off oxygen to the brain and be fatal.

- Use the heel of your hand to give the person five blows on their back between their shoulder blades.
- Then give them five abdominal thrusts (also known as the **Heimlich Manoeuvre**).

### Heimlich Manoeuvre

- It is performed by standing behind them, wrapping your arms around their waist and tipping them slightly forward. Make a fist with one hand and place it on their abdomen just above their navel.
- Then grasp the fist with your other hand and press hard with a quick, upward thrust, as if you're trying to lift them up.
- After five abdominal thrusts repeat the five back blows and so on until whatever's making them choke is dislodged.



# 17

## Animal Bites



### Snake Bite

- Do not panic.
- Do not touch the bite site with bare hands.
- Move the patient to safer area.
- Immobilize the area with crepe bandage.
- Keep the affected area lower than the heart.
- No cuts, sucking.
- Seek medical attention.
- For ASV (Anti Snake Venom) - go to a center where ASV is available.

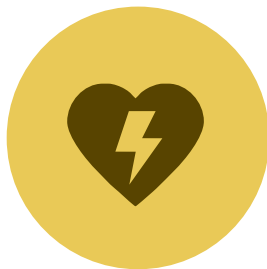
### Dog Bite

- Immediately cleaning with soap water reduces the chance of rabies by 60%, if done within first 15 minutes of bite.
- Seek medical attention - ask doctor about vaccine and immunoglobulin.



# 18

## Cardiovascular Emergency



- 5 Cycles or 2 Minutes of CPR
- Attach AED / DEFIBRILLATOR if available.

Step 1: Analyse

Step 2: Shock

Step 3: Resume CPR.

- Give 10-12 breaths / min. i.e.

-In adults : one breath every 5-6 seconds.

-In children : one breath every 3-5 seconds.

- Assess – A (Airway) B (Breathing), C (Circulation) every 2 minutes, i.e. after 5 cycles of CPR.

If breathing, place him in recovery position (for non trauma patients)



Recovery Position



# 19

## Stroke



### Spot a Stroke. BE FAST

Balance	Sudden loss of balance
Eyes	Loss of vision/blurriness
Face	Drooping to one side
Arms	Difficulty in raising both arms
Speech	Slurred speech
Time	Call emergency services

In case of a stroke, rush the patient to emergency care,

### Time is Brain

when it comes to stroke.



# 20

## Action Steps for First Responders

- **Protecting Yourself -**

First aiders 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.

- **Assess the Scene -**

Where are you? What stores, clubs, public buildings, etc. are nearby? Has anything here caused the injury? Does this area have motor vehicle traffic? Is this area known for violent crime? What time of day is it? What are the weather conditions?

- **Look for Clues -**

Things that could help you determine the reason for the patient's illness or injury may be obvious.

- **Get some History -**

If there are witnesses, ask them what's happened "Did you see what happened here?" and gain information such as how long ago it happened "How long have they been like this?"

- **Be Sure to Listen -**

While working on a victim you may overhear information from witnesses in the crowd. You may not see the person saying this. Everything should be taken into account should no witnesses want to become involved or you cannot ask questions. Note what is said and continue treatment.



# 21

## Continued...

- **Check for Responsiveness -**

Once you are confident that there is minimal danger to yourself in the situation, the next step is to assess how well (if at all) your victim responds to you. In an emergency setting, the level of responsiveness is categorized by using what is called the AVPU scale,

### AVPU:

Alert

Verbal

Pain

Unresponsive

- **Call for an Ambulance -**

If the victim is unconscious, the First Responder should immediately call for help at the NHS Emergency no. **0181 - 4633333**

- **Treatment -**

The last step is to actually provide care to the limits of the First Responder's training – but never beyond. Treatment should always be guided by the 4Ps:

Preserve life

Prevent further injury

Promote recovery

Protect the unconscious



# 22

## Summary



### The First Responder, on approaching a victim should have:

**D** - Checked for danger

**R** - Checked for responsiveness

**S** - Looked at the scene for clues about what has happened

**H** - Gained history on the incident

AVPU - Assessed to see how responsive the victim is This can be remembered as "DR SHAVPU" (Doctor Shavpu)

### Formula to Handle Patient: DRABC

**D:** Check for Danger


**R:** Check for Response

**A:** Check for Airway

**B:** Check for Breathing

**C:** Check for Cardiac Symptoms

Become a  
**Near Home Saviour**  
Today!

 **0181 - 4640181**

An Initiative by **NHS Hospital**

————— **Thank You** —————



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**HERE TO MAKE A DIFFERENCE**