



**CLI
FIRST AID CARE
CARDS**

**CANADIAN LIFEBOAT
INSTITUTION**

THE EMERGENCY MEDICAL SYSTEM (EMS) EVOLVED

Because it was recognized that patients who received EFFICIENT CARE PRIOR TO ARRIVING AT THE HOSPITAL had a better chance of survival and recovered more quickly





THE TEAM IS MADE UP OF

- **1. EMERGENCY MEDICAL DISPATCH**
- **2. EMERGENCY RESPONDERS**
- **3. AMBULANCE SERVICES**
- **4. PHYSICIANS**



**PROTECTED
FROM
LIABILITY**

**WE IN BC ARE COVERED FROM
LIABILITY AT THE IMMEDIATE SCENE
OF AN ACCIDENT, WHEN RENDERING
FIRST AID TO AN ILL, INJURED OR
UNCONSCIOUS PERSON BY THE**

GOOD SAMARITAN ACT

- **“WE ARE REQUIRED TO PERFORM OUR DUTIES TO THE BEST OF OUR ABILITIES WHILE WORKING WITHIN OUR SCOPE OF PRACTISE AND THE LEGISLATION OF OUR PROVINCE**

AS A FIRST AIDER WHAT ARE YOUR FIRST DUTIES.....

1. GET PERMISSION, IF POSSIBLE

2. ONLY GIVE THE CARE YOU WERE TRAINED TO DO

3. CONTINUE GIVING CARE UNTIL

- ANOTHER TRAINED PERSON TAKES OVER**
- YOU ARE TOO EXHAUSTED TO CONTINUE**
- THE SCENE BECOMES UNSAFE**
- THE PERSON'S CONDITION IMPROVES AND CARE IS NO LONGER NEEDED**

GETTING PERMISSION.....

- **1. FOR AN UNRESPONSIVE PERSON , THE LAW ASSUMES YOU HAVE PERMISSION**
- **2. FOR YOUNG CHILD WITHOUT A CAREGIVER, GO AHEAD AND PROVIDE CARE**
- **3. IF A PERSON REFUSES CARE, CALLN 911 AND STAND BY IF IT IS SAFE TO DO SO**

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2. FOR YOUNG CHILD WITHOUT A CAREGIVER, GO AHEAD AND PROVIDE CARE

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OTHER IMPORTANT DUTIES OF THE FIRST AIDER.....

- **1. CLEANING AND RE STOCKING OF
EQUIPMENT**
- **2. DOCUMENTATION**
- **3. CONTINUING FIRST AID TRAINING**

GLOSSARY

- **VITAL SIGNS:**

UNLESS OTHERWISE STATED VITAL SIGNS INCLUDE TAKING **AND DOCUMENTING BLOOD PRESSURE, PULSE AND RESPIRATIONS**

- **LEVEL OF CONSCIOUSNESS**

THIS ASKS YOU TO RECORD for example; **ARE THEY AWAKE, ALERT, SLEEPY CONFUSED????**

- **DOCUMENT:**

THIS MEANS WRITE ABOUT THE **PATIENT'S CONDITION, TREATMENTS**, WHO YOU HAV NOTIFIED, **HANDED OVER TO PLUS PERTINENT TIMES (LIKE TOURNIQUET APPLIED, 1410)ETC.**

- **O2 SATS, MEANS OXYGEN SATURATIONS;**

as read on **PULSE OXYMETER**

- GIVE OXYGEN AS REQUIRED;**

THIS MEANS GIVE ENOUGH SUPPLEMENTAL **OXYGEN TO KEEP OXYGENSATJURATIONS TO AT LEAST 95%**

EMOJI: WHEN YOU SEE THIS EMOJI FINISH YOUR DOCUMENTMENTATION, TRANSFER THE PATIENT TO

COAST GUARD OR AMBULANCE AND GET THEM TO THE HOSPITAL



EMOJI WHEN YOU SEE THIS EMOJI IT MEANS THEY DO NOT HAVE TO GO TO HOSPITAL BUT INSTEAD CAN BE DRIVEN

HOME BY A RESPONSIBLE ADULT



MEDICAL RELEASE WAIVER

I, the undersigned, do hereby agree that following the First Aid treatment I received from the Canadian Lifeboat Institution, I relinquish without reservation all rights to any action or liability against the Canadian Lifeboat Institution and its members.

Furthermore I was advised to seek medical attention within twenty-four hours following this incident. I understand that should I FAIL to seek said MEDICAL CARE following this incident, I have relinquished all rights to any action against the Canadian Lifeboat Institution or its volunteer members.

SIGNATURE: _____

PRINTED NAME: _____

DATE: _____

WITNESS: _____

Where applicable:

VESSEL OPERATOR: : _____

VESSEL NAME: _____

DATE: _____

WITNESS: _____

MEDICAL RELEASE FORM



EMERGENCY EVENTS

URGENT AND NON URGENT EVENTS

CONTENTS

EMERGENCY EVENTS

- CARD 1 CARDIOPULMONARY RESCUSITATION
- CARD 2 SHOCK
- CARD 3 UNCONSCIOUSNESS
- CARD 4 ARTERIAL BLEEDING
- CARD 5 STROKE
- CARD 6 CHEST INJURIES
- CARD 7 CHEST PAIN
- CARD 8 RESPIRATORY AND BREATHING EMERGENCIES
- CARD 9 HEAD, SPINAL AND PELVIC INJURIES
- CARD 10 COLD WATER IMMERSION
- CARD 11 INTERNAL BLEEDING
- CARD 12 VENOUS BLEEDING

URGENT AND NON URGENT EVENTS

- CARD 13 WOUND CARE AND BANDAGING
- CARD 14 PAIN MANAGEMENT
- CARD 15 FRACTURES AND SPRAINS
- CARD 16 ELECTRICAL BURNS
- CARD 17 CHEMICAL BURNS
- CARD 18 HEAT RELATED AND THERMAL BURNS
- CARD 19 HEAT STROKE AND HEAT EXHAUSTION
- CARD 20 SEIZURES
- CARD 21 DIVING RELATED EMERGENCIES
- CARD 22 EYE INJURIES 22a and 22b
- CARD 23 NOSE BLEEDS
- CARD 24 DROWNING OR COLD WATER SUBMERSION
- CARD 25 DIABETIC EMERGENCIES

Possible Signs and Symptoms:

Patient collapses; No heartbeat; No breathing;
Does not respond to efforts to wake them up.

Perform ABCs

Start CPR

Engage second rescuer

Option: Connect oxygen to pocket mask

Get AED and HOOK UP

If NO SHOCK recommended, Continue CPR

Call for Help (Coast Guard, 911)

Arrange Transport to Hospital ASAP via Ambulance

Monitor Patient's condition

Document

**Notes:**

Continue CPR until:

1. medical help arrives and takes over
2. a hear beat is detected
3. the patient wakes up

Check for hear beat after every 4 cycles (or two minutes) or if change is detected in patient's condition.

Possible Signs and Symptoms:

UNRESPONSIVE

(Casualty may be breathing or not breathing)

Perform ABCs

Insert Oral airway if needed

Start CPR if required

Attach Oximeter

Provide supplemental oxygen as needed ie if O2 Sat less than 95%

Take and Continue to Monitor vital signs, including level of consciousness (LOC)

Monitor patient's condition

Document

Arrange for immediate transfer to the hospital

**Notes:**

Assess for head injury, see CARD 5, 7, 9 and 16 or other cause of unconsciousness.

First Aid person is not there to diagnose, but to observe and document.

Possible Signs and Symptoms:

Bright red blood spurting with each heartbeat.
Serious and must be stopped, LIFE THREATENING

Press down hard on pressure point
between heart and bleeding site

Elevate site if possible

If bleeding not controlled, apply
tourniquet on Limbs, See CARD 13
(and notes below)

Document time tourniquet was
applied! (See Notes Below)

If unable to use tourniquet (ie in neck,
shoulder or armpit). Apply Gloves and
Pack wound with increasing amounts
of gauze using direct pressure until
bleeding stops.

Attach oximeter

Give supplemental oxygen as needed

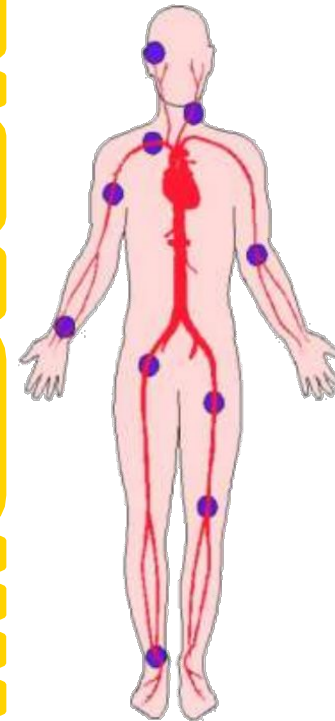
Watch for signs of Shock, see CARD 2

Take Vital Signs when possible

Monitor Patient's condition

Document

Arrange EMERGENCY transport



Pressure Points

**Notes:**

Severe Arterial bleeding can be fatal if not stopped.
Improvise tourniquet if necessary.
NEVER release tourniquet before TWO hours.

Possible Signs and Symptoms: F.A.S.T.:

FACE: Face droop on one side.

ARMS: Raise Both arms, only able to do on one side.

SPEECH: Speech slurred or altered.

TIME: to rapidly evacuate.

Confusion; Trouble seeing; Loss of balance; Severe headache; Nausea; Loss of Bowel and Bladder control.

Perform ABC's

CPR if unresponsive

Attach Oximeter

AED if appropriate

Do NOT give Aspirin

Supplemental Oxygen as needed (Oxygen sats less than 95%)

Check for head injury, cuts, bruises or other injuries

No fluids

Arrange emergency transport to hospital within 3 hours
Hospital must have CT Scanner

Take Vital Signs

Monitor Patient's condition

Document

**Notes: Stroke patients have a much better chance:**

1. Of survival
2. Of avoiding negative long term after effects
3. Of minimal or less brain damage

IF THEY ARRIVE at hospital within the 3 Hour "Golden Window" in order to receive a clot busting medication.

QUESTIONS