

## First Aid Notes

Hilary, Kirsty and Eamon have all been on First Aid courses recently. We would like to share some of the things we learnt with other First Aiders in Wimborne Orienteers.

This is not a comprehensive update and you may already know most of what we are reporting, but it is still worth repeating a few valuable messages:

- If someone has self-administered an adrenaline injection (eg Epipen) or a first aider has helped deliver an injection, the patient should still go to hospital, even if they appear to make a good recovery. When the first injection wears off they can go back into anaphylactic shock.
- Anyone with a head injury and loss of consciousness (knocked out) should go to A&E for assessment.
- Eye units in local hospitals can give telephone advice or may offer direct appointments for patients with eye injuries. Consider phoning them rather than sending the patient to A&E.
- In a case of a sudden collapse and absence of breathing - just get on with CPR, don't hesitate. Early effective bystander CPR is vital in this situation.
- Ambulance control will know the position of the nearest AED and the code to open it.
- Cold casualties have worse outcomes. Do everything you can to keep them warm and dry.
- Mobile phones can be registered with the emergency services (by texting 'register' to 999) to allow phone use in areas of poor mobile phone signal. Once the phone is registered then emergency information can be texted to 999.
- Consider using 112 instead of 999 if the mobile phone signal is weak.

Bournemouth Eye Hospital Acute Referral Unit: 01202704181 (weekdays) or 01202303626 (main switchboard)

Southampton Eye Unit 02381206592 (8am - 8pm) or 023080777222 (main switchboard)

Salisbury Eye Unit via main switchboard 01722336262