



Expedition Training

**Emergency Procedures &
Incident Management**



Accidents can happen
Even to fit experienced
walkers
You will be carrying a
large rucksack
You will be walking a
Be prepared
Call for help
Keep warm & safe



- Introduction/ Context - follow on from First Aid Training
- Understanding what risks of Injury on the expedition.
- Understanding what Outcomes are how to treat them
- Where to get further information
- What First Aid equipment will we have

Action Plan

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This Action Plan is a vital aid to the first aider in assessing whether the victim has any life-threatening conditions and if any immediate first aid is necessary. They are **DRABC** .

D - Check for **DANGER**

- ❖ To you
- ❖ To others
- ❖ To victim

R - Check **RESPONSE**

- ❖ Is victim conscious?
- ❖ Is victim unconscious?

A - Check **AIRWAY**

- ❖ Is airway clear of objects?
- ❖ Is airway open?

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B - Check for **BREATHING**

- ❖ Is chest rising and falling?
- ❖ Can you hear victim's breathing?
- ❖ Can you feel the breath on your cheek?

C - Check for **CIRCULATION**

- ❖ Can you feel a pulse?
- ❖ Can you see any obvious signs of life?

- Review: -
- Dr ABC?
- First response – keep safe, stay alive – we're not doctors!
- What are the likely injuries or emergencies on your expedition department's objectives?

- Broken Limbs – falls/slips/Trips
- Cuts/Grazes
- Burns – from cooking equipment
- Stings/Bites
- Allergic Reactions
- Blisters
- Choking
- Hypothermia
- Sunburn
- Shock

- Can you think of any others?

Broken Limbs

- Likely Cause – falls, trips and slips
- Signs – Pain, loss of power, unnatural movement, swelling and deformed
- Treatment
 - Keep the casualty still and warm ensuring there is no further danger
 - If need be put tent up for shelter
 - Call 999 for emergency help if
 - Casualty has suspected injury to the spine, head or neck
 - The casualty has difficulty breathing
 - The bone has come through the skin
 - Don't try bandaging or immobilising the injury – keep still and cover with sterile dressing if open wound.

Bleeding – Treatment - SEEP

- Likely Cause – Falls, trips etc

- Treatment = SEEP

S – Sit or Lay

Sit or lay the casualty down appropriately.

E – Examine

Examine the wound . Look for foreign objects and note how the wound is bleeding.

E – Elevate

Elevate the wound. Ensure the wound is above the level of the heart, using gravity to reduce the blood flow to injury

P - Pressure

Apply pressure over the wound to stem the bleeding.

If there is an embedded object in the wound , you may be able to apply pressure to either side of the object

Burns

- Likely Cause – Burns from Cooking , Hot water etc
- Treatment
 - Cool the Burn
 - Ideally under cool running water for 10 mins
 - If water not available – any other cold liquid (milk etc) – or in a cold stream?
 - Take care not to cool large areas of burns to induce Hypothermia.
 - Remove jewellery and Loose clothing
 - Remove constricting items because area might swell
 - Remove clothing as it may stick to the burn
 - If clothing is loose – leave as it is
 - Dress the burn
 - With a sterile dressing that won't stick (cling film – but even a clean plastic bag with help)
- If Burn is severe or casualty has breathed in smoke or fumes – call 999.

Stings, bites, Allergic Reactions

- Likely Cause – Insect stings, bites or Allergic reactions from food, plants etc
- Prevention – ensure you know any medical conditions for team members and any allergies (e.g nuts etc)
- Signs –
 - Swelling of area around stings
 - Red, blotchy rash on the skin
 - Fast pulse

Minor injuries – Cuts, grazes, Blisters

- Likely Cause – slips, trips and badly fitting Boots...
- Prevention –
 - ensure you have good boots and have walked them in!!
 - Wear two pairs of socks ??
- Signs – as soon as you feel sore feet –
 - Stop and put a plaster on the area of concern.
 - Do not pop blisters- as this can lead to infection
 - Use Compede plasters to cover the blister
- Treatment –
 - Keep wounds as clean as possible
 - Cover with sterile plaster /dressing as required

Choking

- Likely Cause – Choking on food..
- Treatment
 - Encourage casualty to cough
 - 1) Back Blows
 - Bend casualty forward and 5 firm blows on the back
 - 2) Abdominal thrusts
 - Stand behind casualty and place arms around their waist
 - Make a fist with one hand just above belly button.
 - Grasp this hand with other hand and pull sharply upwards and inwards – 5 times.



Repeat Steps 1 and 2

- If Casualty becomes unconscious start CPR

Hypothermia

Likely Cause – Body heat loss: being wet, in wind, unclothed

Prevention is better than cure – wear the correct gear, waterproofs, hats, gloves, layers, not single items

Signs –

- Constant shivering

- Tiredness/ low energy

- Hyperventilation

- Disorientation, slurred speech, confusion, even hallucination

Treatment

- The casualty is usually unaware that they have it, often feeling too warm when far advanced.

- Get casualty warm and dry

- Warm from the inside out, not too quickly

- Can share body heat once warming

- DO NOT** heat from external / chafe limbs etc, nor use alcohol

Sunburn / sunstroke

- Likely Cause – Sunburn / overexposure
 - Prevention is better than cure – use suntan cream, wear a hat to prevent
 - Signs –
 - Stopped sweating
 - Panting, heavy breathing
 - Slurred speech, disorientation
 - Red raw skin patches, hot to the touch
 - Treatment
 - Keep casualty out of the sun
 - Rehydrate - ensure casualty drinks lots of water
 - Cool the Burn
 - Ideally under cool running water for 10 mins
 - Use Aftersun cream if available
- If Burn is severe – seek help

Shock

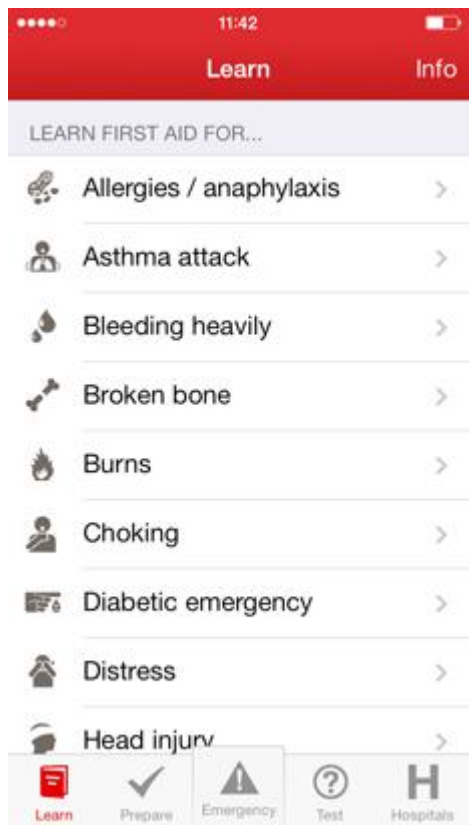
- Likely Cause – trauma
- Shock may occur after a delayed reaction, watch for symptoms in each other
- Signs –
 - Pale, cold, clammy skin
 - Rapid, weak pulse
 - Hyperventilation, yawning / sighing
 - Confusion, unable to make a proper sentence
- Treatment
 - Treat the cause of the shock
 - Lie patient down with legs raised
 - Keep warm and dry
 - Keep awake and aware

First Aid equipment and Team members



- Each group will have two first aid kits
- If group gets split up – ensure you have one kit per group
- Contents as per the D of E recommended list
- Ensure you are aware of any underlying medical conditions in your group.

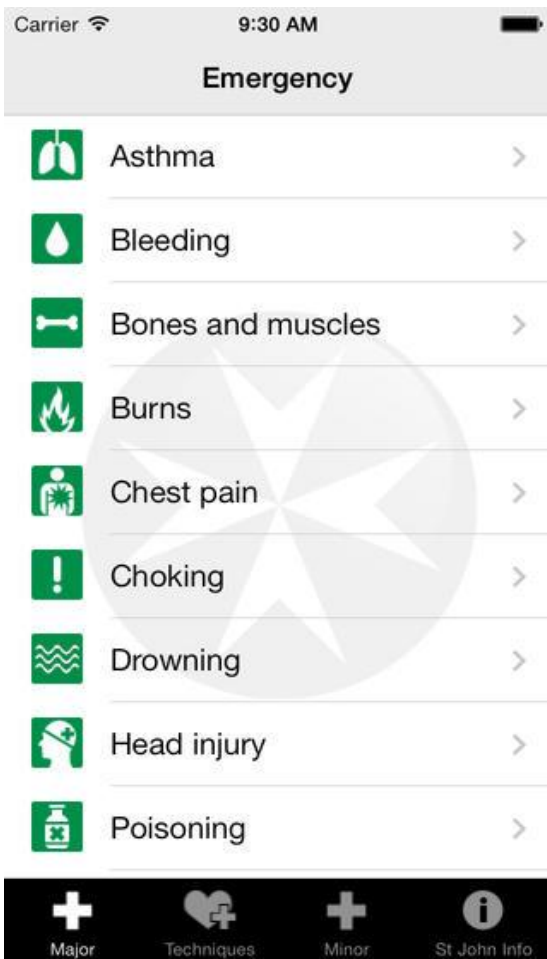
Further information – various apps



- First Aid by British Red Cross
- St John Ambulance



St John's Ambulance





Thankyou