



# FIRST AID PROCEDURES QUICK REFERENCE GUIDE

## Call Ambulance when:

- No breathing or pulse.
- Loss of consciousness that does not resolve right away, or leads to confusion or amnesia (all loss of consciousness *does* require prompt medical attention!).
- Shock symptoms that do not resolve quickly with rest and fluids.
- Major injury such as unstable fracture or rapid bleeding.
- Seizures that do not stop.

---

## The ABC's

- **Conscious? If not:**
  - Check **A**irway/**B**reathing/**C**irculation
  - Call an ambulance
  - CPR if necessary (as per senior first aid training)
- **Head/Neck injury**
  - Immobilize
  - If serious, call an ambulance

---

## Bleeding

- Universal Precautions (Gloves/Padding)
- Direct Pressure
- Elevation of bleeding area

---

## Shock

- Symptoms
  - Pale, dizzy, sweating, weak, confused
- Lie flat and elevate feet

---

## Injury

- Fracture/Dislocation
  - immobilize/stabilize
- Closed soft tissue
  - RICE (Rest, Ice, Compress, Elevate)
- Open wound
  - Universal precautions, cleanse, and cover

---

## **Additional Information**

- **Head Injury**

- Concussion Grade 1: *confusion, no amnesia, no loss of consciousness*
  - Evaluate rest and observe at least 20 minutes for being 100% symptom-free before return to activity.
- Concussion Grade 2: *confusion with amnesia, no loss of consciousness*
  - Evaluate rest and observe 24 hours (medical attention required), return to activity after one week symptom-free.
- Concussion Grade 3: *any loss of consciousness*
  - Immediate medical attention required, return to activity after 2-4 weeks symptom-free depending upon medical advice.

- **Diabetes**

- It may be difficult to differentiate too high blood sugar from too low blood sugar in some people. In the dojo it is safe to assume that the rapid onset of symptoms that may include pallor, sweating, weakness or confusion associated with exercising is caused by too low blood sugar. Position as for shock and administer sugar, either in the form of glucose tablets from the first aid kit, or by fortifying any liquid with a lot of sugar. If the person cannot take oral sugar due to weakness or loss of consciousness, **call an ambulance.**

- **Fractures**

- Evaluate all injuries for deformity, inability to bear weight, decreased range of motion, and pain (swelling and bruising may not be severe initially). Complex splinting and transport issues should not arise in the middle of a city with an ambulance functioning. Provide immobilization to the affected area and keep the person quietly resting until paramedics arrive or, as may be done in the case of smaller bones such as wrists or feet, other transport is arranged.

- **Neck Injury**

- If a neck injury is suspected due to the type of accident, the angle of the head, or any symptoms such as numbness of the extremities or difficulty with movement, do not move the person unless it is mandated by another emergency such as fire or falling debris. Provide reassurance, and immobilize the person's head and neck exactly as they are by sandbagging with anything available until the paramedics arrive. If a disaster necessitates moving the person, the head and neck must be supported / maintained exactly as they are to avoid risk of further injury to the spinal cord.

- **Shock**

- Shock symptoms may be caused by diabetes or other low blood sugar situations (see above), by illness, by blood loss, by dehydration, by overexertion, by massive allergy reaction or by heat. Pallor, with or without sweating; weakness, dizziness, confusion would be primary things to look for; sometimes there may be flushing instead of pallor. Lying down and then elevating the feet to above heart level is the key; provide fluids if the person is awake enough to swallow safely. If shortness of breath or laboured breathing predominate, the person may only feel relief if supported sitting up, leaning somewhat forward. Any shock-like symptoms that do not resolve within a few minutes should be considered an emergency (call an ambulance).

- **Seizure**

- The mat or carpeted floor is a safe place. Prevent harm during the seizure by removing objects from the vicinity but do not attempt to restrain the person except if needed to prevent harm; i.e. from banging into something. Do not attempt to force anything between the teeth. Sleepiness or confusion afterwards may be normal for some people.

---

**To minimize the risk of transmission of:**

- **HIV**
- **Hepatitis-B and**
- **other blood borne pathogens during training activities.**

Current available medical evidence suggests that the risk of transmission of HIV during the type of contact that occurs in Aikido training is extremely slight. However, all instructors and persons training in this dojo shall treat all exposed body fluids as if they were infected. Specifically, the following measures will be observed at all times:

1. If you have any open cuts or sores, you must clean them with a suitable antiseptic and cover them securely with a leak proof dressing before coming onto the mat. Make sure that the cut or sore stay covered while you are training. If your hands or feet have broken skin, suitable gloves or footwear may be worn to cover these areas. If you notice that someone else has an open cut or sore remind them of their obligation before training with that person, and notify the instructor immediately.
2. If a bleeding wound, even a minor one, occurs during training, the person bleeding shall immediately notify the instructor, stop training and leave the mat until the bleeding stops and the wound is securely covered. Immediate measures shall be taken to stop the bleeding. If the person needs assistance with this then each person assisting shall wear a pair of latex gloves (which are available in the dojo first aid kit). Hands shall be washed with soap and hot water immediately after gloves are removed. All used gloves, bloody dressings and rags, etc shall be placed in a leak proof plastic bag provided for that purpose. All contaminated items should be disposed of carefully. Minor bloodstains on Gi should be treated with a disinfectant provided for this purpose. If there are major blood stains the Gi shall be removed as soon as possible, placed into a leak proof container and handled carefully until it can be laundered or disposed of.
3. If you come into contact with the blood of another, you shall immediately notify the instructor, stop training, leave the training area and wash the exposed area thoroughly with soap and hot water before returning.
4. If blood is present on the mat, the training partner of the person bleeding shall insure that no one inadvertently comes into contact with the blood, while the bleeding person attends to his injury (in accordance with #2, above). The blood should be cleaned up as soon as possible by wiping the exposed surface with a disinfectant solution provided for this purpose. Each person assisting with this task shall put on a pair of latex gloves and shall wash their hands with soap and hot water immediately after the gloves are removed. It is preferable however that the person bleeding clean their own blood. Bloody rags and used gloves shall be disposed of as set out in Paragraph 2 above.