

First Aid for Motorcyclists

budgetyatri 

— पथिक —

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“Only a calm mind can act, panic weakens intellect”

Medical ID bracelets, dog tags have been effective for identification and information.

Bikers, get it.



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1. Bleeding

1.1 In case of heavy bleeding

- Put pressure on the wound with palm, fingers to stop or slow down the flow of the blood.
- Call local emergency numbers or ask for help to get to.
- Keep pressure on the wound until the help arrives.

1.2 Shock due to injury (Person feels cold and dizzy and looks pale)

It means there isn't enough blood flowing through the body. It can be life-threatening because it can very quickly lead to other conditions, such as lack of oxygen in the body's tissues, heart attack or organ damage. This physical response to an injury or illness is called shock.

If you suspect someone is going into shock, lie him down and lift his feet higher than the rest of his body. Such that the legs are higher than the heart in this position, which helps increase blood flow to their brain and heart.

1.3 Only minor wounds should be washed

For minor cuts and grazes, one can wash the wound to remove any dirt. Washing a wound that is bleeding heavily is not recommended. When a heavy bleeding wound placed under a tap, all clotting agents may get washed away and thereby increasing the bleeding.

1.4 Do's and Don'ts for heavy bleeding

Do's for heavy bleeding

- Reassure the victim that help is on the way
- Call ambulance immediately
- Check the victim's status regularly
- Use direct pressure to stop bleeding
- Check to see if the victim's airways are clear
- If no pulse or respiration, start CPR
- Raise head if bleeding in upper body areas
- Raise feet if bleeding in lower body areas

Don'ts for heavy bleeding

- Don't move the patient if not required
- Always suspect "spinal injury" (and don't move the victim)

- Don't set fractures and breaks (simply immobilize the victim)
- Use "direct" pressure to stop bleeding
- Don't remove items imbedded in the eye
- Don't use burn ointments

1.5 Action before the ambulance arrives:- FIRST AIDER ACTION

- Call for help
- Ensure someone watching traffic all the time
- Make sure you guard yourself against incoming traffic by placing at least 1 vehicle between the rescue scene and the injured person.
- Check the victim's responsiveness
- Maintain patient Airway by Jaw thrust technique avoid head tilt chin lift.
- Do CPR if the victim is not breathing.
- Attempt to stop any external bleeding by using a clean handkerchief and applying direct pressure to the site of bleeding.
- Wait for the ambulance to arrive instead of attempting to transport the victim to the hospital in any other vehicle. You may do further damage in the process of transporting him/her.

Do Not

- Enter the scene unless it is safe and proper traffic management in place.
- Do NOT remove any penetrating objects (ex. Broken glass/metal)
- Do NOT lift the victim because neck injuries are likely and may paralyze the victim permanently

2. Burns

2.1 Do's and Don'ts for heavy bleeding

Do's for burns

- Call an ambulance for any serious burns.
- Apply CPR if the person is not breathing normally.
- Try to remove clothes and jewellery (from the area that has been burned) only if it is not sticking to the burned area.
- Hold the burned area under gently running water, for about 10 minutes to half an hour.
- To prevent corneal damage (in the case of chemical burns to the eyes), immediately irrigate the eyes with water or a saline solution.
- For second degree burns on the limbs – elevate the limbs higher than the heart.
- To reduce shock as well as the loss of body heat, place clean, dry, non-fluffy cloths lightly over the burn.
- Cover the person with a cool, wet, lint-free cloth, while waiting for an ambulance or when transporting the person to the hospital.

Don'ts for burns

- Apply lotions, butter, grease or oil to the burned area.
- Use ice, as it may cause frostbite.

3. Fainting, Unconsciousness

- If a patient is unconscious, his head should be tilted backwards. This is done to avoid tongue to fall backwards and block the airway. Tilting the head backwards and pulling the tongue forward will help to clear the airways.
- If one suspects a back or neck injury, it is still advisable to move them onto their side. The priority is to keep them breathing. Try to keep their spine in a straight line when turning them. If possible, get someone's else to help to turn them.
- If someone is feeling faint, advise them to lie down on their back and raise their legs to improve blood flow to the brain. Fainting is caused by a temporary reduction in the flow of blood to the brain and can result in a brief loss of consciousness. A person who has fainted should quickly regain consciousness. If they don't, treat them as an unconscious person.

4. Head injury

- If a person suffers a blow to the head, the brain can be shaken inside the skull. This is called a concussion. It tends to result in a short loss of consciousness (a few seconds to a few minutes). Most people make a full recovery from a concussion, but occasionally it may become more serious. If you think someone has a concussion, call medical emergency.
- Symptoms of a concussion:
 - Dizziness
 - Headache
 - Confusion
 - Feeling sick
 - Blurred vision
 - Having no memory of what happened.
- Painkillers are **not** advised for headache out of accident because they can mask the signs and symptoms of a serious head injury.

5. First aid kit content

- Emergency telephone numbers for emergency medical services
- Antiseptic wipe
- Antiseptic cream for minor burns and abrasions
- Bandages
 - Sterile lint-free dressing swab
 - Cotton gauzes for wrapping the wound
 - Crepe bandage
 - Adhesive bandage
- Medical adhesive tape
- Pain reliever tablet (Acetaminophen, ibuprofen)
- Small cutter knife/scissor
- Tweezers to pull out peripheral foreign materials
- Safety pins



Source credits and reference:

<https://www.nhp.gov.in/miscellaneous/first-aid>

<https://ndma.gov.in/images/pdf/FirstAid%20-MODULE.pdf>