**Instructions**

**YOU MUST COMPLETE THE WORKBOOK PRIOR TO ATTENDING THE COURSE AND BRING IT WITH YOU TO CLASS**

This workbook is intended to prepare you for the course. It will be reviewed by the assessor during the course.

### Course information

**What to wear**
Comfortable casual clothing

**What to bring**
- Completed workbook
- Blue or black pen

**Completion**
Upon successful completion of the course you will be issued with a Nationally Recognised Statement of Attainment for the units of competency completed.

Please note re-issue fees may apply.

**Assessment**
You will be required to demonstrate knowledge and practical skills throughout the day’s training.
You will be required to complete a 2 minute CPR assessment on a manikin on the floor.

If you have any potential difficulties or medical conditions please advise your assessor prior to the day of the course.

**Safety Corp Services**
Your Safety Corp assessor is part of a national network providing a large range of WHS Training. If you have requirements for the following courses please ask us about them:

- Asthma and Anaphylaxis
- Fire Warden, Evacuation, Extinguisher
- Confined Spaces
- Manual Handling
- Heights Safety
- Certificate IV in WHS
- Work Near Overhead Powerlines
- Customised WHS Training

**Refresh**
- CPR is recommended every 12 months
- First Aid is recommended every 3 years

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**Registered Training Organisation**
Safety Corp is a Registered Training Organisation, RTO Number 91694, registered to deliver training across Australia.
## Completion Record

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| This workbook must be completed prior to attending the following courses:  
  HLTAID003 Provide first aid  
  HLTAID004 Provide an emergency response in an education and care setting  
  Please circle the correct answer to all questions.  
  All these questions and additional ones will be covered at the course with your assessor. |

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**Trainer/Assessor Note:** This page must be attached and submitted with student assessment.
1. **Purpose of CPR**

The body requires a consistent flow of oxygen to all tissues and organs, including the brain. This is normally achieved via blood flow which is pumped by the heart. The heart is constantly circulating the blood to achieve oxygen and nutrition supply as well as remove waste products from the body.

Normally air is breathed into the lungs. The heart pumps the blood past the lungs. The lungs oxygenate the blood and remove the waste products. The clean oxygenated blood then returns to the heart and is transported around the body. When the heart stops regular and effective beating, blood flow in the body slows and then stops over a short time period.

The purpose of CPR is to manually achieve both air flow into the lungs through Rescue Breaths and compressing/pumping the heart to achieve blood flow to the lungs and then throughout the body.

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**What is the purpose of breathing into an unconscious non-breathing person’s mouth?**

- a. To provide oxygen to their lungs
- b. To get them to vomit
- c. To restart their heart
- d. To make them wake up

**What is the purpose of compressing an unconscious non-breathing person’s chest?**

- a. To massage them
- b. To suck air in and out of their lungs
- c. To manually pump their heart
- d. To crack their sternum

**You are able to stop performing CPR when?**

- a. The person starts breathing
- b. You are exhausted and cannot continue
- c. The Ambulance arrives and takes over
- d. All of the above

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2. **000 or 112**

The primary emergency number to access help or assistance in Australia is **000**. You are able to dial this number from a landline, mobile or payphone. After calling 000 you will be asked by the operator to direct your call to Police, Fire or Ambulance. If you think you need more than one service and a person has been injured you should ask for the ambulance first. You can then ask them for other services you may need.

You may also use 112 from GSM mobile phones, but not with a landline or fixed phone line. This number can only be dialled from GSM mobile phones and will work only if there is network coverage. 112 will transfer you to emergency services in any country you are in, it will unlock a locked phone and does not require a SIM card to make the emergency call.

**What 2 numbers can you dial in the event of an incident?**

- a. 000 or 112 from a mobile
- b. 911 or 119 from a mobile
- c. 111 or 999 from a mobile
- d. 132200 from both a landline and mobile

**Once you have checked for “Danger” and found the person unresponsive and therefore identified a serious incident has occurred, what would your next action be?**

- a. Run and tell somebody
- b. Get to the injured person as quickly as possible
- c. Call 000
- d. Wait for the Ambulance to arrive
A work colleague who is clearly injured tells you they are OK and does not consent to calling an Ambulance. As a First Aid responder, you are very concerned about their health. What should you do?

a. Get a witness and treat them anyway
b. Walk away, no need to record your actions or reasons
c. Call an Ambulance and ask their advice as to what you may be able to do
d. Call the police to say you have a person who is not cooperating

3. Chain of Survival
The Chain of Survival is recognised as the most effective way to ensure the survival of a person suffering cardiac arrest.

- Early Access - Call 000 or 112 for an ambulance.
- Early CPR - Start CPR as early as possible.
- Early Defibrillation - Greatly increases chance of survival by returning the heart to a normal rhythm.
- Early Advanced Life Support - The earlier Paramedics or trained staff can administer effective drugs the greater the chances are of survival.

The four steps in the chain of Survival are?

a. Early Access, Early CPR, Early Defibrillation, Early Advanced Life Support
b. Early CPR, Early Advanced Life Support, Early Hospital, Early Operation
c. Danger, Response, Breathing, Compressions
d. Rest, Ice, Compression, Elevation

4. Accreditation
To be recognised as a designated First Aid Officer in Australian States and Territories, the minimum accreditation is HLTAID003 Provide First Aid. This is often referred to as Senior First Aid or Level 2 First Aid.

It is recommended that this qualification be refreshed every 3 years to maintain currency of skills.

The ARC (Australian Resuscitation Council) recommends that the CPR component of Provide First Aid (HLTAID001 Provide cardiopulmonary resuscitation) be refreshed every 12 months to ensure that resuscitation skills are updated, practiced and maintained.

How often does the Australian Resuscitation Council (ARC) recommend you refresh your CPR certificate?

a. Every 2 years
b. When you are about to perform CPR
c. Every 12 months
d. Every 3 years
5. Infection Control
It is recommended that the First Aider should always wash their hands prior to commencing treatment of a person where possible. For wounds or First Aid situations where the First Aider is exposed to blood or body fluids, disposable gloves should be worn when available. If performing CPR it is recommended that a CPR face shield or barrier be used when available.

What infection control measures should you take before treating a person?
- a. Use a resuscitation mask
- b. Wear gloves
- c. Approach with caution
- d. All of the above

6. Airway Management
When a person becomes unconscious all the muscles through the body relax. One of the most serious effects of this is upon the tongue and subsequently the airway. As the tongue relaxes it may fall back against the back of the throat blocking the airway. This can occur if the person is lying on their back or if they are sitting upright in a car seat but with their head tilted forward. Airway management takes precedence over all other injuries, including spinal. The simple way to clear the airway from this type of blockage is to gently tilt the head back thus clearing the tongue from the back of the throat. If the person has water or fluids in their mouth and airway they need to be rolled on to their side to clear the fluid from the airway.

If a person you are performing CPR on vomits, what should you do?
- a. Stop yourself from vomiting and then continue CPR
- b. Continue CPR with compressions only as the airway is blocked
- c. Give up because the person is deceased or you might catch something
- d. Roll them on their side to clear the airway and continue with CPR if necessary

If a person with suspected head, neck or spinal injury is conscious and breathing, you action should be to:
- a. Roll them on the side to ensure they continue breathing
- b. Carefully roll them on to their side
- c. Don’t move them whilst ensuring they maintain breathing
- d. Support their head carefully with pillows and cushions

7. DRSABCD
The Basic Life Support Flowchart is an integral part of ensuring the most effective way to deal with a serious incident should it occur.

It provides a sequence that ensures all essential steps are carried out to ensure your safety and the person is provided with the greatest chance of recovery.

Danger - Check for danger to ensure you, the person and bystanders will not be further injured. Remove the danger or move the person if possible. Do not expose yourself to life threatening Danger. Possible dangers include; Live electricity, snake or spiders still present, traffic zone, heat and fire.

Response - Check if the person is conscious. This is achieved by ‘talk and touch’. Speak calmly and clearly to the person whilst squeezing their shoulders or hands. You could say; “Can you hear me”, “Open your eyes”, “What’s your name”, “Squeeze my hands”. If the person does not respond but is clearly breathing you should roll the person on their side.

Send for Help - If the person does not respond or responds in a manner that indicates they are injured or unwell you should dial 000 or 112 and request an ambulance.
Airway - When a person is unconscious the tongue may relax and fall against the back of the throat. This may have the effect of closing the person’s airway. Additionally, there may be foreign matter in the airway such as dentures, food or vomit. If this does happen the most important thing you can do is to clear the airway. The head should be gently tilted back by lifting the chin with one hand and pressing the forehead with the other hand. The mouth should then gently be opened to observe if there is any foreign matter in the mouth. If there is water or vomit visible the person needs to be rolled on to their side to allow the liquid to run out of the airway.

Breathing - You should then check the person for breathing whilst maintaining head tilt. This may be done whilst the person is on their back or their side and usually involved the First Aider to “Look, listen and feel” for any normal breathing.

CPR - Persons who are gasping or breathing abnormally and are unresponsive require resuscitation. Commence CPR and deliver 30 compressions followed by 2 rescue breaths. The required depth of compression is 1/3 the depth of the person’s chest. Repeat this process until the person recovers or the ambulance arrives and takes over.

Defibrillation - When the defibrillator arrives, turn on the machine and follow the voice prompts. Attach the pads as directed and then follow instructions provided by the machine.

What does DRSABCD stand for?

a. Danger, Response, Send for Help, Airway, Breathing, CPR, Defibrillation
b. Danger, Response, Send for Help, Airway, Breathing, Circulation, Defibrillation
c. Defibrillation, Response, Soreness, Airway, Pulse, Circulation, Defibrillation
d. Danger, Response, Send for Help, Airway, Breathing, Circulation, Danger

Why should you maintain head tilt when providing rescue breaths to an adult?

a. To stretch their neck out
b. To stop them from vomiting
c. To ensure they don’t hurt their neck
d. To maintain a clear airway

When performing CPR on adult or children how deep should you push the person’s chest?

a. 7/8 of the chest
b. Till you hear the bones crack
c. 1/3 of the chest
d. 1/2 of the chest

8. Support for First Aiders

When dealing with the post incident analysis following an incident, it is important to recognise that it is common for First Aiders to experience a wide range of effects. The body reacts to these effects in physical, mental and emotional ways. The most important thing to recognise is that it is common for First Aiders to experience this range of effects and that there are support mechanisms available to help the First Aider deal with these reactions. These support mechanisms are;

- Counselling Services offered by employers, counsels and other government bodies
- Professional Counselling Services
- Friends and Family
- Lifeline on 13 11 44

A student on a sports trip has performed successful CPR on a fellow team member. What support should be offered to the student after the incident?

a. Appropriate counselling and professional support
b. Send them home to talk with their parents
c. Gather a group of students together to talk about the experience
d. Assign a teacher to watch them to see if they are alright
9. Resuscitation Hygiene
ANZCOR suggests that those who are trained and willing to give breaths do so for all persons who are unresponsive and not breathing normally. Risk of disease transmission is very low, and rescuers need not be deterred from providing rescue breaths without a barrier device. However, rescuers should consider using a barrier device if this is available. It is strongly recommended that a ‘Mouth to Mask’ technique be used to create a bacteria/ fluid barrier between the First Aider and person. If a Mask is not available, the First Aider has the option to commence CPR. If there is a perceived danger, it is recommended to avoid contact with a person’s mouth and commence compressions only. Most importantly, CPR should not be delayed whilst searching for a mask.

If a person requires CPR and you do not have a resuscitation mask, what is the ARC recommended procedure?

a. Perform CPR unless you perceive a danger to yourself
b. Do not perform any CPR because you may catch something
c. Call the Ambulance and tell them to hurry up
d. Roll the person into the recovery position

10. CPR Ratios
CPR is proven to be more effective if delivered as a combination of 30 compressions followed by 2 rescue breaths. The ratios of compressions to breaths for First Aiders delivering CPR is; Compressions 30, Rescue Breaths 2 at a Rate of 100 compressions per minute.
These ratios apply whether CPR is being delivered by 2 people or 1. This ratio applies to adults, children and infants.
Often when one person is doing CPR many things are happening and the First Aider may lose count of the number of compressions. It is vitally important that the First Aider completes at least 30 compressions for each set of breaths.

You are performing CPR and lose count of the number of compressions. What should you do?

a. Continue compressions until you have completed at least 30 compressions. Then continue CPR as normal
b. Give up because if you don’t do exactly 30 the CPR will be ineffective
c. Stop compressions, breathe into the person’s mouth once and then continue CPR as normal
d. Stop, call 000 and ask their advice

11. Legal Issues
In First Aid, there are 4 key issues relating to the legal considerations of a First Aider. These are; Consent, Duty of Care, Recording and Confidentiality.

Consent - A First Aider must obtain consent from the person before treating that person. If a person is unconscious or unable to communicate consent is implied. If a child is under 18 years of age consent must be gained from the parent or guardian. If this is not available consent is implied.

Duty of Care - Duty of care is the legal obligation that some First Aiders have to provide First Aid to an injured person. These First Aiders are in positions of care such as: Doctors, childcare workers or designated First Aid Officers within workplaces. This obligation of care is not required for every individual however. There is no legal obligation to provide assistance outside of a work or care environment for qualified and current First Aiders.

Recording - Recording an incident can be extremely useful in a number of circumstances. If a brief report is provided to the paramedics or hospital upon arrival it may assist medical and nursing staff with initial treatment. In a work environment a written report is useful as a reference tool for later revision of the incident and potential issues that may occur as a result of the injury.
It is important to remember that such a report is a legal document required under state and territory WHS legislation, so the report should be;
• written only in ink,
• the report should be signed and dated,
• no correction fluid should be used, any entries or errors should be clearly crossed out and initialled

Confidentiality - First Aiders are required under legislation to keep the details of any reports or details on persons confidential. They should only talk with Emergency Services workers or hospital staff regarding the details of that specific incident.

Who should you tell about a person’s condition?
  a. Nobody except the person
  b. Their family members and friends only
  c. Emergency Services workers on the scene
  d. Anybody who says they need to know

When completing an incident report form what are the essential actions you take?
  a. Use a blue or black pen
  b. Never use correction fluid
  c. Sign and date the form
  d. All of the above

12. Defibrillation
Many workplaces now have a Defibrillator on hand if required. A Defibrillator substantially improves the likelihood that a person will recommence normal breathing and normal heart rhythm. A Defibrillator works to restore the normal heart rhythm of a person. Use of a Defibrillator is easy. Simply switch the machine on and follow the voice prompts.
It is not possible on an automated machine to shock a person if they do not require the shock.

A Defibrillator:
  a. Restarts a stopped heart
  b. Gives them a shock to wake them up
  c. Gives the heart an electric shock to restart the normal rhythm
  d. Pumps blood around the body

13. Emergency Services - Ambulance

When you have made contact with the ambulance service they will ask a number of questions. They will need to have you tell them your location so they can see their closest available service. This may include a cross street to make it easier to find the exact address. They will ask for the phone number so they can call back if you hang up before they have all the information they need, or if they need to ring back to ask for more information or clarification. Now that they have your location and contact details, they will ask about the person:
  • What happened?
  • Gender and approx. age?
  • Are they conscious?
  • Are they breathing?
They may then ask more questions for clarification, but they usually need at least the answers to the noted questions. It may facilitate aid if you can have this information ready for them.
You have called an Ambulance for a work colleague. What information will the Ambulance Operator require of you?

a. What is the exact address of the emergency? (Include nearest cross street). What is the phone number you are calling from?
b. What is the problem, tell me exactly what happened? How old is s/he? If unsure, approximately

c. Is she/he conscious? Is she/he breathing?
d. All of the above

14. Heart Problems
The symptoms commonly associated with Heart attack may be caused by a large number of factors. As a First Aider it is not possible to immediately diagnose if an individual is having heart problems as there are a range of other medical complaints with similar symptoms such as angina or indigestion. It is important for a first aider to act quickly and call 000 if they suspect heart problems. Ambulance Paramedics or other medically trained staff are then able to diagnose what is causing the symptoms being shown and can then act accordingly. At times a person will have their own medication which they ask your assistance to provide. You may assist them to take any medication they have with them. The ambulance may prompt you to give the person aspirin (300 mg). If so, dissolvable aspirin is preferred.

A work colleague begins complaining of chest pain and shortness of breath. She is conscious but confused and disorientated. What should you do?

a. Call 000, provide location details and wait for them to arrive
b. Call 000, Provide location details, and Assist the person with any heart medication they may have, reassure them and wait for the Ambulance to arrive
c. Drive them to hospital straight away
d. Ask them to let you know how they are feeling in 15 minutes

15. Choking or Foreign Body obstruction
If a person is unable to breathe treatment should follow this procedure:

• Encourage them to cough. If unsuccessful Call 000.
• Commence 4-5 solid back blows between the shoulder blades.
• If this does not work lie them on their back and perform 4-5 chest compressions/thrusts to the centre of the chest, similar to CPR chest compressions.
• Alternate until either the obstruction is dislodged or the ambulance arrives.
• If the foreign object still fails to dislodge and the person fails to begin breathing CPR should commence by starting with 30 effective compressions.

You are having dinner with somebody who starts to choke. They are making no sound. What action should you take?

a. Do the Heimlich manoeuvre as quickly as possible
b. Give them a drink of water
c. Have somebody call 000. Commence 4-5 back blows, followed by 4-5 chest thrusts if unsuccessful
d. Put your hand down their throat to pull the blockage out

16. Asthma
Asthma is a condition that restricts the air passages in the lungs. These passages become swollen and inflamed and restrict the flow of air in the person. Usually a person will find it harder to exhale during an attack.
Asthma should be treated using a reliever, blue/grey puffer that assists to reduce inflammation of the airways. To substantially increase the volume of medication reaching the airways an Asthma Spacer should be used if available. If the person has a personal written asthma action plan then that plan should be followed.

If a person has any signs of a severe asthma attack, call an ambulance straight away and follow the Asthma First Aid Plan while waiting for the ambulance to arrive. If there is no action plan in place then use the following Asthma First Aid plan.

**Step 1:** Sit the person comfortably upright. Be calm and reassuring. Do not leave the person alone.

**Step 2:** Without delay give four to six separate puffs of a “reliever”. The medication is best given one puff at a time via a spacer device. If a spacer is not available, simply use the inhaler. The first aid rescuer should provide assistance with administration of the bronchodilator reliever inhaler if required. Ask the person to take four breaths from the spacer after each puff of medication. Use the person’s own inhaler if possible. If not, use the first aid kit inhaler if available or borrow one from someone else.

**Step 3:** Wait four minutes. If there is little or no improvement give another four puffs.

**Step 4:** If there is still no improvement, call an ambulance immediately. Keep giving four to six puffs every four to six minutes until the ambulance arrives.

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If you or someone else is having a severe Asthma attack and you have called an ambulance, what should YOU do next?

- a. Give preventer medication first
- b. Wait until they are unconscious and follow DRSABCD
- c. Give reliever medication as per Asthma Action Plan or the four-puffs / four-minute rule
- d. Give them a chair to sit on and reassure them

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### 17. Moving a Person

You should not move a seriously injured person unless you or they are in immediate danger. You may roll a person or tilt their head if the airway becomes obstructed or move a person from the area if there is danger to you or the person. Moving a person for any other reason can result in further injury being caused. When moving a person you should be aware of limiting further injury to the person and not injuring yourself in the process.

**Under what conditions would you move a person who has been injured at work?**

- a. When you need to get them closer to the Ambulance
- b. Only when you and they are in danger
- c. Only if they have a spinal injury
- d. Never under any circumstances should you move a person

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### 18. Shock

Shock occurs for many reasons and may be a life threatening emergency. It occurs when blood pressure within the body drops and the body’s vital organs are not provided with enough oxygen to maintain life. These organs may be damaged or shut down after an extended period of the condition. There are many causes of shock but any major injury can lead to the condition. Management includes:

- Call 000 for an ambulance.
- Lie the person on their back, (on their side if unconscious)
- Treat any other injuries the person may have.
- Reassure the person regularly and calmly.

**How should you treat a person who is suffering from shock?**

- a. Calm them, reassure them
- b. Keep them warm and relaxed
- c. Lie them on their back if possible
- d. All of the above
19. Open Abdominal Wounds
An abdominal wound may involve large amounts of bleeding or very little depending upon whether internal organs have been lacerated. Internal bleeding and injury should always be considered when dealing with an abdominal injury. Infection is a major issue when dealing with abdominal organs if they are protruding from the wound (evisceration). In this case a non-stick or wet dressing should be applied to the wound. For cases of abdominal wounds, the person should be treated by laying them on their back with their legs bent to assist in reducing pain to the area. Light pressure from a bandage may be applied if required.

What is the most effective way to restrict bleeding from an open abdominal wound?

a. Lie the person down. Bend their legs. Cover the wound with a non-stick dressing or a plastic wrap
b. Place a constrictive bandage around the abdomen and check for capillary refill beyond the wound
c. Apply direct pressure to the wound
d. Call an Ambulance and wait for it to arrive

20. Burns
Burns are usually caused by exposure to high heat such as flame, hot liquid or radiation or by exposure to chemicals that are corrosive to the skin thus burning it. Serious burns always require medical attention and an ambulance should be called as complications may result for up to 72 hours after a burn. Additionally, any person who has inhaled smoke or chemicals should seek medical attention. Heat burns should be placed under running water for at least 20 minutes. This ensures the burn is effectively cooled to the deepest layer of skin that is burnt. Chemical or bitumen burns should be placed under running water for 20-30 minutes. 

How long should you hold a burn under running water?

a. Until it stops hurting
b. For 5 minutes until the pain goes away
c. For at least 20 minutes
d. Not required put ice directly on the burn

21. Bites and Stings
Envenomation occurs when the poison from an animal such as a snake, insect, jellyfish or spider enters the body. This venom can poison the body on a localised or entire body level. Most poisons travel through the lymphatic or muscular system.

Snakes / Funnel Web Spider - To reduce the movement of this poison the Pressure Immobilisation technique is recommended for venomous bites such as a snake or funnel web spider. This involves rolling a crepe or elasticised bandage over the bite site as soon as possible. A second bandage is then applied starting at the fingers or toes and covering as much as the limb as possible. Restrict movement of the limb by rest and splinting then bring transport to the person if possible. The person should be taken by ambulance to medical care.

Spiders / Bees / Wasps - A Pressure Immobilisation bandage is not recommended for these bites as the venom moves more slowly and restricting blood flow will simply increase localised pain. Remove the stinger if applicable and apply a cold pack to the bite site. Note that ice should not come in to direct contact with the skin and should not be applied for more than 10 minutes at a time.

Blue Bottle - Remove the tentacles, wash the area with sea water and apply tolerably hot water.

How should you treat a snake bite?

a. Pressure Immobilisation
b. Cold Pack
c. Hot water
d. Vinegar
How should you treat a Blue Bottle sting?
   a. Pressure Immobilisation
   b. Cold Pack
   c. Hot water
   d. Vinegar

How should you treat a Red Back sider bite?
   a. Pressure Immobilisation
   b. Cold Pack
   c. Hot water
   d. Vinegar

22. Heat Exhaustion / Heat Stroke
Heat Exhaustion occurs when the body’s core body temperature rises to between 37 and 40 Degrees C. They are usually still sweating during Heat Exhaustion. They may feel cool to the touch due to the sweat evaporating. Heat stroke occurs when the core body temperature rises above 40 Degrees C. This can occur due to running out of fluid to produce sweat, and the person will be hot to the touch and not sweating. In all cases the First Aider should gently cool the body down by moving them to a cool place, removing tight and restrictive clothing, wetting their head, feet and clothes and making them as comfortable as possible. In severe cases the application of cold packs to the armpits and groin assist to cool the person more effectively.

A teacher supervising a school athletics carnival has collapsed after spending the entire day supervising an event. They are hot to the touch and are not sweating. What should you do?
   a. Call 000, give them something to drink and keep them cool
   b. Call 000, Cool them down by taking them for a swim in the pool
   c. Call 000, place them in the shade, gently wet their skin/clothes and monitor them
   d. They should be alright if they stay cool for the afternoon

23. Hypothermia
Hypothermia is caused by a lowering of the body’s core temperature. Any temperature below 35 Degrees C is considered Hypothermic with core temperature below 33 Degrees C considered dangerous to the person. In all cases the person will be slow to react, will begin shivering but as the condition gets worse will cease to shiver, will have poor coordination and will eventually lose consciousness if the condition continues. The person should immediately be removed from the cold, wet or windy environment and their wet clothing should be removed if dry clothes or blankets are immediately available. Handle the person gently and keep them lying down. Slowly warm them ensuring they are not exposed to too much radiant heat. A substantial amount of heat is lost through the head and feet so ensure these areas are warmly covered at all times. Do not rub their hands and feet for them.

A child on a camping trip was lost and has just been found. You have already called 000. They are shivering and whilst conscious are acting confused. What should you do?
   a. Make them comfortable, gently warm them and reassure them
   b. Put them in a really hot room to get them hot as rapidly as possible
   c. Put them in the recovery position and wait until the Ambulance arrives
   d. Massage their limbs and wait until the Ambulance arrives

24. Poisons
There are 4 ways a poison may cause damage to a person. These are:
   Ingestion - swallowing the poison
   Inhalation - breathing the poison in to the lungs
Absorption - absorbing the poison through skin
Injection - via needle or sharp object.

The First Aider should try to establish what poison is affecting the person and immediately call the Poisons Information Line 131126 or 000 if you do not know the 131126 number and follow their advice. In all cases of poisoning the First Aider should take great care not to expose themselves to the poison. Gloves and appropriate protective equipment should be worn. Persons should not be made to vomit except under instruction from the Poisons Information Line.

A 6 year old child has swallowed a garden insecticide. What should you do?
- Make them vomit as soon as possible
- Give them milk to drink and call 000
- Call 131126 if you know the number or 000, find out what was taken and how much, follow Ambulance service advice
- Call 000 tell them to get there as quickly as possible

A man at the shopping centre starts to have a seizure. What is the first aid treatment?
- Roll him on his back, hold his tongue and have somebody call 000
- Hold him down so he doesn’t injure himself and have somebody call 000
- Roll him in the recovery position and wait for security to arrive
- Call 000, Remove any objects that may injure him, protect from bystanders and wait for Ambulance to arrive

25. Seizures
Seizures are caused by many factors. This may be medical conditions such as Epilepsy or other conditions such as head injury, infection in the brain (encephalitis) or Febrile convulsions in children (caused by sudden raising of the child’s body temperature). In all cases the only action possible is to ensure the safety of the person whilst the seizure is occurring. Remove any sharp or dangerous objects from the area and avoid restraining the person. Once the person is no longer exhibiting seizure symptoms they may be rolled in to the recovery position to ensure clear airway and comfort for the person.

26. Drug Overdose
It is important to remember that drug use may result in a number of behavioural problems such as violence, hallucinations, anxiety and hyperactivity. A First Aider should ensure their own safety before treating a person. Treatment for such condition is to:
- Ensure 000 has been called, (follow their recommendations and advice)
- Keep the person comfortable and Monitor their breathing.
- An unconscious person should be placed on their side and carefully monitored.

A person at a football game collapses next to you in the grandstand. You suspect they have taken or misused a drug or illicit substance. What should you do?
- Leave them be. They should recover after a few minutes
- Call an Ambulance and follow their advice
- Give them some coffee or a kebab to sober them up
- Let their friends help them
27. Stroke
Strokes are very common and affect thousands of Australians every year. They are caused by a blockage or a ruptured blood vessel in the brain resulting, in both instances, of the prevention of essential oxygen and nutrients to parts of the brain. The symptoms of a stroke can be assessed by F.A.S.T. -

Facial Weakness - can the person smile? Has their mouth or eye drooped?
Arm Weakness - can the person raise both arms?
Speech Problems - can they speak clearly?
Time - Is critical. If you see any of these signs call 000 immediately.

Ensure 000 has been called and that the person is safe and comfortable. Lie them on their backs with their head and shoulders supported comfortably on a pillow. If they vomit or become unconscious, place on their side.

A conscious elderly person begins acting strangely, slurring words and a droopy left side of the face. What should be your course of action?

a. Make them comfortable, head/shoulders elevated, ring 000/112
b. Lie them down and raise their legs to allow blood to the brain
c. Stand them up and reassure them
d. Put them in the recovery position

28. Crush Injury
Crush Injury occurs when a large muscle mass, such as a thigh, has circulation prevented from reaching the muscle. Without blood flow to remove waste from the tissues, toxins build up in the affected area. If possible, the crushing force should be removed immediately only if it is safe to do so and you are physically able to without injury to yourself. Keep the person comfortable, treat other injuries and monitor their vital signs until the Ambulance arrives.

You hear a loud crash and investigate to find a person stuck under a heavy object that has fallen on their legs. There is no immediate danger present. What is the ARC recommended action you should take?

a. Leave them and try to find someone to help you
b. Call 000. Immediately remove the object if safe to do so and physically possible
c. Never remove the object, it’s too dangerous, stay with them and reassure them
d. Call 000 and always wait until the Ambulance arrives

29. Diabetes
Insulin is produced by the pancreas to assist sugar to be processed from the blood into the body’s tissues. Diabetes is a condition where the body is either not producing enough insulin or the insulin being produced is ineffective. Diabetics regularly monitor their own blood sugar levels to ensure they do not suffer a High Blood Sugar Level attack (Hyperglycaemia) or a Low Blood Sugar Level attack (Hypoglycaemia). All diabetics will experience both types of attacks over time. As a First Aider it is difficult for you to differentiate between them. The most common form of attack is a Hypoglycaemic (low blood sugar) attack which can be treated by providing sugar to the person in the form of a sugary drink, jelly beans, honey or similar. Usually there will be an improvement within 10 minutes. 000 should be called if the attack gets worse. As a First Aider you are not allowed to deliver, or assist to deliver, insulin to a person. The delivery of a non-required dose of insulin will reduce the amount of sugar in the blood and may lead to a life threatening consequence for the person.

A known diabetic at work becomes confused and starts acting strangely. What should you do?

a. Assist them to take a blood sugar reading immediately
b. Call an Ambulance and wait for it to arrive
c. Reassure, then send them home as they should not be at work
d. Give them glucose tablets or a sugary drink and if they don’t improve call 000
30. Penetrating Needle Injury

Viruses like Hepatitis and those that cause AIDS die relatively quickly on exposure to air. Therefore, in most instances the virus has died before a person treads or sits on the needle in the park or at the beach. Those at highest risk of catching blood borne disease from needles are those who work with live blood. Treatment for such a penetrating injury is to:

- Wash the area under running water and soap
- Apply an antiseptic
- Refer them to a doctor for a blood test and possible preventative action such as a tetanus injection.

You are walking on the beach and tread on an old needle. What should you do?

a. Rush immediately to the doctor to have some blood tests
b. Wash the wound, apply an antiseptic and seek medical attention
c. Apply an antiseptic. If it gets infected seek medical attention
d. Apply an immobilisation bandage to limit lymphatic and blood flow. Go to the hospital

31. Ear Injury/Insect

Any ear injury is dangerous and should be treated seriously. Any object, but specifically sharp objects, should not be put into ear canals except by trained personnel. The most effective way to remove an insect that has entered the ear canal is to seek Medical attention. If the person is in pain, or if there is any fluid coming out of the ear, then call 000. It may be appropriate to lie the person down with the ear facing downwards and place a bandage or cloth under the ear to catch the fluid for later observation.

Treatment would include:

- Reassurance
- Preventing the person from trying to remove the insect in any way
- Seeking medical assistance to remove the insect

A bush walker starts complaining of substantial pain in their right ear. What is your course of action?

a. Use tweezers to remove any object or insect as soon as possible
b. Prevent the person from poking in their own ear canal
c. Calm and reassure, seek medical assistance
d. Slap them on the head until something comes out

THANK YOU

PLEASE TAKE THIS COMPLETED WORKBOOK WITH YOU TO THE COURSE