

Medical Emergency Procedure

1. Medical Emergency

Any Staff or Worker / VISITOR WITNESSING a Medical Emergency:

- In case of any Medical Emergency, the first person to witness shall warn his subordinates and ask for assistance.
- In case the Medical Emergency is due to an accident, check your own safety before approaching the scene of the accident.
- Remove the victim to a safer place in case there is a chance of further injury; else do not touch the victim unless trained to do so.
- If you are an approved First Aider, provide first aid, else wait till a First Aider arrives and provides first aid as appropriate.
- Continue First Aid treatment till the Medical Team arrives and takes care of the victim.
- Assist the First aider/ MRT till the Emergency is brought under control.

2. Response to Medical Emergency:

- On the confirmation of any Medical Emergency, the first aider will go to the affected area.
- Incident manager will proceed to the area with the available EHS personnel in case any major accident is reported and take charge of the emergency.
- Coordinate with the EHS to control the emergency and seek for assistance in case of multiple injuries (from relevant services,).
- Arrange to restore the affected area.
- Safety team to start an investigation of the incident.

3. First Aid Tips:

NOTE: The following tips are intended to serve as a reminder for first aid team at your location. No unauthorized person is allowed to give any treatments to an injured person.

3.1 Bleeding:

- Call for help (if needed).
- Press directly onto the wound with sterile gauze, sanitary napkin, clean handkerchief, or bare hand.
- Maintain steady pressure for 5 to 15 minutes.
- If bleeding is from an arm or leg, elevate that limb until emergency personnel arrive.

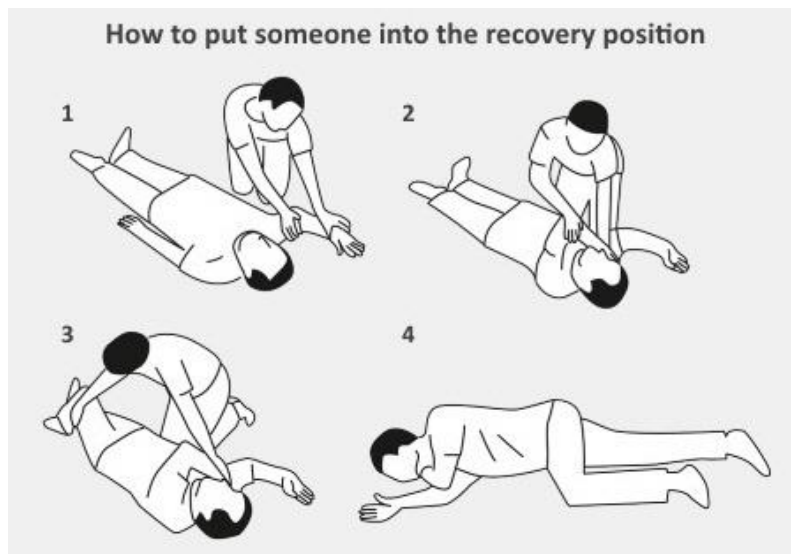
3.2 Burns, Chemical and Thermal:

- Call for help (if needed).
- Immerse burned area in cool water.
- Cover burn with dry bandage.
- Keep victim quiet and comfortable until Medical Response team arrive

3.3 Choking:

- Call for help (if needed).
- Do nothing if the victim is moving air by coughing or gasping.

- In case of mild choking encourage the victim to cough out continuously and try to spit out anything in the mouth and ensure that nobody will put their finger into the mouth of the victim to remove any food items as this could result in accidental biting.
- If the choking is serious commence by giving 3-5 sharp blows between shoulder blades with the heel of your hand (palm) before proceeding to abdominal thrusts by grabbing the victim from behind with your hands over the "belly button" area and quickly squeeze in and up.
- In case of fainting/unconsciousness the victim shall be placed in a recovery position.
- The recovery position refers to one of a series of variations on a lateral recumbent or three-quarters prone position of the body, in to which an unconscious but breathing casualty can be placed as part of first aid treatment



3.4 Fainting and Shock:

- Call for help (if needed).
- Have victim lie or sit down and rest (place victim on side if unconscious).
- Keep victim comfortable, not hot or cold.
- Ask or look for I.D.
- Treat other injuries as necessary until medical response team arrive.

3.5 Fractures and Sprains:

- Call for help (if needed).
- Keep victim quiet and comfortable.
- Keep injured area immobile until medical response team arrive

3.6 Poisoning and Overdose:

- Call for help (if needed).
- If choking, lower head.
- Determine what substance is involved and how taken.
- Give large volumes of water with or without emetic.
- Induce vomiting by stimulating throat with fingers.
- Stay with victim and assist as necessary until emergency personnel arrive.

3.7 Seizure:

- Call for help.
- Protect victim from self-injury.
- Watch for vomiting.

- Do not inhibit movement
- Loosen tight clothes and remove spectacles.
- Relocate to safe location.
- Keep victim comfortable until medical response team arrive.

3.8 Shock:

- Separate the person from Current's Source
- To turn off power: Unplug tools if plug is undamaged or shut off power via circuit breaker, fuse box, or outside switch.
- If you can't turn off power: Stand on something dry and non-conductive, such as dry newspapers, telephone book, or wooden board. Try to separate the person from current using non-conductive object such as wooden or plastic broom handle, chair, or rubber doormat.
- ***If high voltage lines are involved:***
 - The generators shut them off.
 - Do not try to separate the person from current if you feel a tingling sensation in your legs and lower body. Hop on one foot to a safe place where you can wait for lines to be disconnected.
 - Keep victim warm and calm, with legs slightly elevated, until emergency personnel arrive.

3.9 Unconscious/ Unresponsive:

- Call for help.
- Check for breathing. If victim is not breathing, initiate Rescue Breathing:
- Gently tilt head back to open the airway; watch chest and listen for air from mouth.
- If not breathing, pinch the nose and give 2 slow, full breaths. Watch the chest rise and fall during each breath.
- Breathe into the victim's mouth once every 5 seconds until medical response team arrive.
- Check for a pulse by gently pressing the side of the victim's throat.
- If no pulse, administer CPR as required. If you don't know CPR, continue with Rescue Breathing.

4. Heat related illness

4.1 Heat Stroke

Heat stroke is more serious than heat exhaustion or cramps and is a life threatening medical emergency. Since blood flow and sweat cannot cool the body enough, it becomes overheated affecting vital organs including the heart and brain.

4.1.1 Signs and Symptoms:

- A person affected by heat stroke may have:
 - Lack of sweating
 - Hot, dry, flushed skin
 - Deep, rapid breathing
 - A rapid, weak and possibly irregular pulse
 - Headache, nausea
 - Dizziness, confusion
 - Loss of consciousness
 - Convulsions

4.1.2 Treatment:

- Get medical treatment
- Rest in a cool or shady area
- Remove outer clothing

- Lower body temperature immediately with cold compresses, increasing air movement, preferably both.
- Give water or other fluids if conscious

4.2 Heat Exhaustion

Heat exhaustion is the body's response to an excessive loss of the water and salt, usually through excessive sweating. Workers most prone to heat exhaustion are those who are elderly, have high blood pressure and those working in a hot environment.

4.2.1 Signs and symptoms:

- Headache
- Nausea
- Dizziness
- Weakness
- Irritability
- Thirst
- Heavy sweating
- Elevated body temperature
- Decreased urine output

4.2.2 Treatment

- Get medical treatment
- Rest in a cool or shady area and give cold liquid to drink
- Remove outer clothing
- Lower body temperature immediately with cold compresses, increasing air movement, preferably both.
- Give water or other fluids if conscious

4.3 Heat cramps

Heat cramps usually affect workers who sweat a lot during strenuous activity. This sweating depletes the body's salt and moisture levels. Low salt levels in muscles causes painful cramps. Heat cramps may also be a symptom of heat exhaustion.

4.3.1 Signs and symptoms

Muscle cramps, pain or spasms in the abdomen, arms or legs

4.3.2 Treatment:

- Drink water/electrolyte replacement liquid every 15-20 minutes
- Avoid salt tablets
- Get medical help if heat cramps did not subside within 1 hour

4.4 Heat Rash

Heat Rash is a skin irritation caused by excessive sweating during hot, humid weather.

4.4.1 Sign and Symptom:

- Looks like red clusters of pimples or small blisters
- Usually appears on the neck, upper chest, groin, under the chest and in elbow creases.

4.4.2 Treatment:

- When possible, environment is best treatment cooler, less humid work environment is best treatment.
- Keep rash area dry
- Powder may be applying to increase comfort.