Auckland kendo Club First Aid Instructions

First Aid

First aid recommended for injuries, illness in the dojo

Injury	Treatment
Anaphylactic shock (severe allergic reaction)	Maintain open airwayGive medication if availableTreat for shock
Asthma attack	 Seek medical assistance Sit upright, lean forward (if possible close to a table or back of another chair) keep back straight Reassure Loosen tight clothing Encourage, relax and control breathing Note: students with asthma must have their inhaler handy. No inhaler, no practice.
Bleeding nose	 Make comfortable Control bleeding (pinch nose between nostrils and bridge for ten minutes) Apply cold packs to forehead and back of neck. If bleeding does not stop seek medical assistance
Burns	 Cool the burn Remove contaminated or restrictive clothing, footwear or jewellery Cover burn with clean non-adhesive dressing Treat to minimise shock Seek medical assistance if necessary
Bruising	 Put in comfortable position Place cold pack on injured area for maximum of 20 minutes every 2 hours Rest Ice Compression Elevation Seek medical assistance if required

• Reassure, encourage them to cough

If necessary stand behind and give five

Choking

	abdominal inward and upward thrusts,
	interlocking hands under ribcage
	Make comfortable
Chest Injury	Cover any wound
	If suspect fractured ribs place padding under
	arm and over the fractured ribs and
	immobilise upper arm
	Seek medical assistance
	Avoid pressure over abdomen
	 Heel of hand on lower half of breastbone
	Check pulse after every four cycles
CPR	Continue until resuscitation occurs or medial
	assistance arrives
	The rate is 15 compressions to 2 breaths for
	adults; 5 compressions to 1 breath for
	children
Diabetes	If breathing but unconscious call ambulance
	If conscious try and get some food or sugar into the are
	into them
	Seek medical assistance if necessary
	Reassure and calm them Make comfortable
	Make comfortable Deplace to oth in original position
Dislodge teeth	Replace tooth in original position Replace piece of cloth over tooth
	Place piece of cloth over teethSeek dental assistance
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Dislocated shoulder	Use sling and self supportTake to hospital
	Apply direct pressure to the wound, using a
	pad
External bleeding	Elevate wound
	Apply pressure
	Seek medical assistance if required
	If serious dial 111
	If object can be removed flush with plenty of
	water and use a moistened swab or cloth if
Eye injuries	necessary
	If object cannot be removed cover eye with
	eye pad or clean cloth and secure in position.
	Cover both eyes.
Fits and seizures	Do not restrain or force mouth open
	Protect casualty from further damage (clear

	area around)
	 Place something soft under casualty's head
	 When seizure stops place in recovery position
	Talk calmly and quietly
	Control bleeding
	Make comfortable
Fractures (broken	Treat for shock
bones)	Minimise movement
•	Immobilise limbs
	Seek medical assistance
Heart attack	Make casualty comfortable
	Seek urgent medical assistance
	While waiting for assistance check airway,
	breathing, circulation, level of consciousness
	CPR if necessary (se above CPR)
	Reassure
Hyperventilation	Encourage slow regular breaths through the
	nose
	Get patient to breathe in and out of a paper
	bag until symptoms disappear
	 Seek medical assistance if symptoms assist
Kidney stones	Call ambulance
	Reassure
	Clear airway

	Clear airway
	Open mouth, remove any visible obstruction
	Tilt head backwards
	Check for breathing
	 Breathing absent, give two deep breaths using a barrier
	 Look for air being expired between each breath
Resuscitation	If chest does not rise check for obstruction
	Check pulse, if pulse present continue mouth-
	to-mouth; if pulse absent commence CPR;
	continue until medical assistance arrives or
	they start breathing
	Once breathing restored place in recovery
	position.
	 For adults and children over 8 years,
	maximum head tilt, breathe into nose or

	manufication full beautiful to the first of
	mouth, two full breaths to start and then one full breath every 5 seconds. Child 1 to 8 years, moderate head tilt, mouth or nose, two gentle breaths, one small breath every 4 seconds. • Make them comfortable
Shock	 Lay them down and raise legs Reassure Keep calm Moisten their lips if thirsty Do not give food, fluids or alcohol Seek medical assistance
Stroke	 Make comfortable Reassure Head and shoulders slightly raised Loosen tight clothing Turn on side if having difficulty breathing Seek medical assistance Monitor airways, breathing, pulse, level of consciousness
Suspected Fracture of Head or Damage to Neck and Back (after fall possibly)	 Do not move patient Support neck Remove helmet (cut himo) taking care not to move the head. If conscious ask how they are feeling i.e. is there any pain? If they complain of feeling strange in their limbs call 111 immediately Check ears for discharge or bleeding Ask patient questions re time, name, day etc, to assess degree of comprehension. If no adverse signs and patient can move then treat head injury with ice pack and observe If any concerns whatsoever call an ambulance
Unconsciousness	 Assess level of consciousness by shouted command "can you hear me, open your eyes" gentle shake of shoulders etc Open airway and clear if necessary Check for breathing Resuscitate

 Check for pulse CPR Place in recovery position unless spinal injury suspected
Seek urgent medical assistance

Note:

- 1) Shelf to be provided for first aid book, inhalers, medication etc.
- 2) All Kendoka with medications, inhalers etc to use this shelf.
- 3) First aid book to be present.