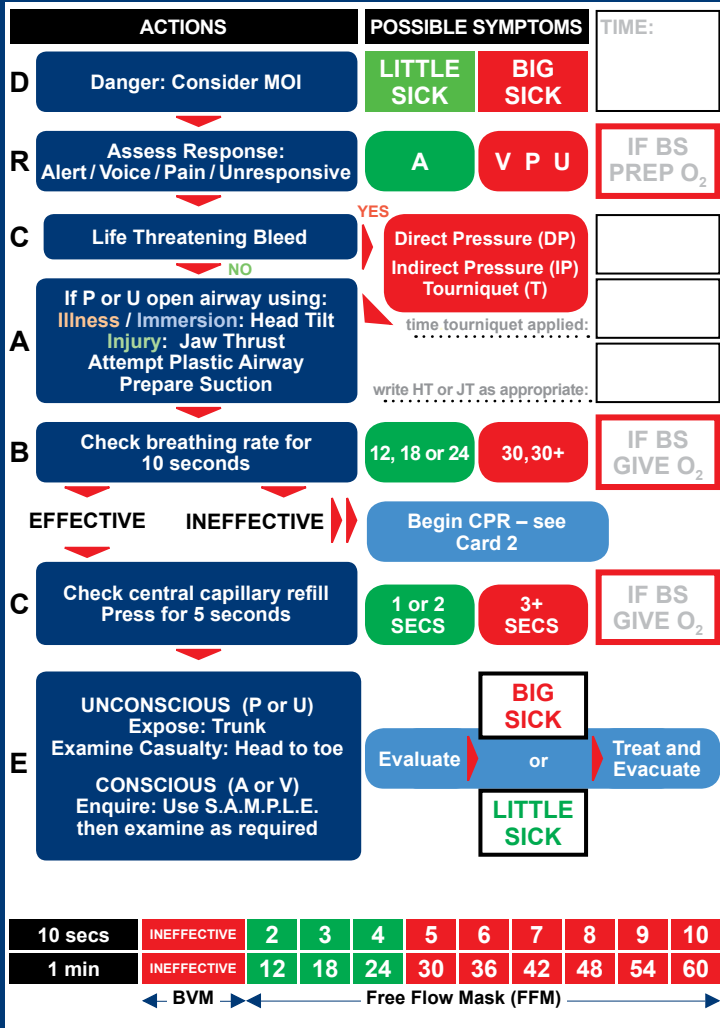


RNLI
CASUALTY CARE
Check Cards



TP-FA-136-02

ASSESSMENT



Signs and symptoms

Allergies

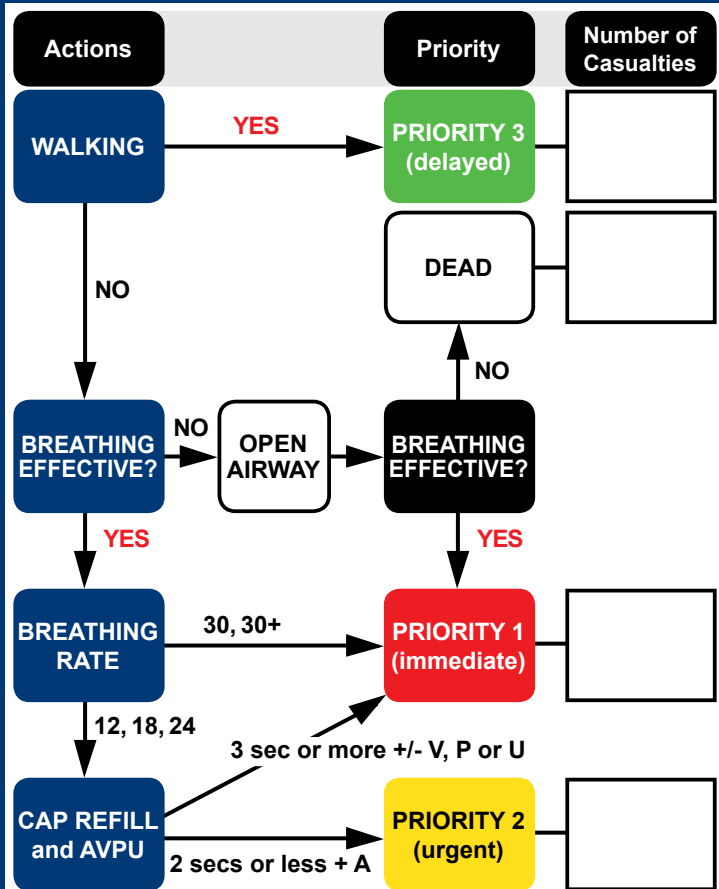
Medications prescribed

Past relevant medical history

Last meal

Events leading to incident

TRIAGE



NOTE: ALL TOURNIQUET CASUALTIES ARE **PRIORITY 1 (P1)**

10 secs	INEFFECTIVE	2	3	4	5	6	7	8	9	10
1 min	INEFFECTIVE	12	18	24	30	36	42	48	54	60

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LIFESAVING INTERVENTIONS

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CARD 2 RESUSCITATION

CARD 3 LIFE THREATENING BLEED / CRUSH

CARD 4 INTERNAL BLEEDING

INJURY

CARD 5 FRACTURES

CARD 6 CHEST INJURIES

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CARD 9 SPINAL INJURIES

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ILLNESS

CARD 12 STINGS AND BITES

CARD 13 CARDIAC CHEST PAIN / DISCOMFORT

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CARD 21 DROWNING

CARD 22 COLD AND HYPOTHERMIA

CARD 23 HEAT EXHAUSTION AND HEAT STROKE

MISCELLANEOUS

CARD 24 POST INCIDENT REPORTING

CARD 25 CHOKING

Possible signs and symptoms:

Response P or U

(Casualty breathing effectively)

INJURY

Maintain airway using

JAW THRUST

Attempt plastic airway

Prepare suction

GIVE OXYGEN @15 l/min
via free flow mask

Treat traumatic injuries
Keep warm with blanket
Reassure

Consider use of glucose gel
Monitor and
rapidly evacuate

ILLNESS / IMMERSION

Maintain airway using

HEAD TILT / CHIN LIFT

Attempt plastic airway

Prepare suction

GIVE OXYGEN @15 l/min
via free flow mask

Place in recovery position
Keep warm with blanket
Reassure

Consider use of glucose gel
Monitor and
rapidly evacuate

NOTES

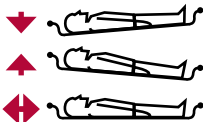
If at any point you cannot maintain the airway in an injured casualty – choose life over limb and use graduated head tilt / chin lift or the recovery position.

Place **pregnant** casualties on their **left** side.

Transport slightly **head down** except:

Transport **head up** if head or brain injury.

Transport **level** if diving illness/drowned.



Possible signs and symptoms:

- Breathing Rate 30+
- Central cap refill 3+ seconds
- Pain
- Pale and sweaty
- Swelling, deformity, discolouration

Keep injured casualties warm and handle gently

OPEN FRACTURES

Control life threatening bleeding, if present

Remove watches / jewellery from affected limb

If in pain give pain relief.

SEE PAIN RELIEF CARD

If **BIG SICK**
GIVE OXYGEN @15 l/min
via free flow mask

Apply dressing to wound, pack around bone ends but **DO NOT** push back in

Stabilise in location where possible.

If **DANGER** - move

Immobilise fracture using frac straps.
For lower limbs use 6 frac straps including a pelvic strap

CLOSED FRACTURES

Remove watches / jewellery from affected limb

If in pain give pain relief.

SEE PAIN RELIEF CARD

If **BIG SICK**
GIVE OXYGEN @15 l/min
via free flow mask

Stabilise in location where possible.

If **DANGER** - move

Immobilise fracture using frac straps.
For lower limbs use 6 frac straps including a pelvic strap

Monitor, insulate, reassure and evacuate

NOTES

If limb is crushed for more than **15 minutes** and evacuation is necessary, apply tourniquet **just prior to release**

Transport **HEAD DOWN** if unconscious.



Possible signs and symptoms: • Central chest pain • Central cap refill 3+ seconds • Crushing or constricting pain • Pain may also be present in shoulders, upper abdomen, neck, jaw and arms • Pale, cold and clammy • Nausea • Impending doom

Sit casualty down in **W** position,
loosen clothing and reassure.

If in pain - give Entonox **SEE PAIN RELIEF CARD**

If **BIG SICK** **GIVE OXYGEN**
@15 l/min via free flow mask

**CHECK CASUALTY IS OVER 18 AND HAS NOT TAKEN VIAGRA
OR SIMILAR IN LAST 24 HOURS**

Administer one spray of **GTN** under their tongue

**CHECK CASUALTY IS OVER 16, NOT ALLERGIC AND HAS NO
SEVERE LIVER DISEASE, STOMACH BLEED OR CLOTTING DISORDER**

Administer 300mg of **ASPIRIN**
Casualty chews tablet

Monitor closely. Be prepared to resuscitate

SEE CARD 2

If pain is still present, give second spray of **GTN**
DO NOT give until at least 5 minutes after the first
DO NOT give more than 2 sprays in total

During all transport avoid head down positions, unless
administering CPR

NOTES

300mg Aspirin can still be given if the casualty has already taken a daily 75mg dose.

Possible signs and symptoms:

- Agitation • Cough - may be frothy / bloody phlegm
- Breathing Rate 30+ • Unable to complete a sentence
- Pale and cold • Change in AVPU

CONSCIOUS

A or V

Rapidly remove from water and reassure

Carry out assessment

If **BIG SICK** ...

GIVE OXYGEN @15 l/min
via free flow mask

If appropriate, remove wet clothing, wrap in blankets and insulate from further heat loss

Rapidly evacuate

Make casualty aware of potential for later complications

UNCONSCIOUS

P or U

Rapidly remove from water

Carry out assessment

If breathing maintain airway using recovery position

SEE CARD 1

If not breathing normally start CPR

SEE CARD 2

NOTES

Transport **LEVEL**

Always attempt CPR unless submersion time is more than 90 minutes, the casualty is decomposed or is a victim of non-survivable trauma.

Have suction ready or be ready to clear airway - vomiting is usual.

Suspect casualty to also have hypothermia if immersion > 30 minutes



HANDOVER

Name:

Age:

Time of incident:

Mechanism (what happened?):

Injury / illness / immersion - Details of:

Signs and Symptoms:

Treatment given:



Lifeboats

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The contents of this publication have been adapted from an original course concept, which was conceived and designed by Paul Savage.