

of sublingual nitrates or with a duration of greater than 15 minutes is an indication for immediate ambulance transport to hospital. Many other serious causes of chest pain exist, so medical review should always be sought.

## Choking

If a person who is choking is conscious, encourage coughing. Examine the mouth for a foreign body, which can be removed. If the person is losing consciousness deliver up to five back blows between the patient's scapula with the heel of the hand. Infants should be held face down over one arm or thigh whilst this is performed. Up to five chest thrusts should be used if back blows are ineffective. Chest thrusts are performed using the same technique as for external cardiac compression, but sharper and delivered at a slower rate. The airway should be checked after each chest thrust to see if the obstruction is relieved. If not, alternate five back blows and five chest thrusts.<sup>1</sup>

If the person stops or is not breathing, start expired air resuscitation.

## Eye injuries

If chemicals have entered the eye, first remove any solid particles, then wash with copious quantities of water. This should continue for at least 30 minutes. The eye should then be covered with a pad strapped in place with adhesive tape. If there is physical trauma to the eye, cover the eye with an eye shield. Direct pressure on the globe itself should be avoided as this may worsen damage if ocular penetration has occurred.<sup>8</sup>

Medical attention should always be sought for eye injuries.

## Fainting

Prior to fainting, a person typically feels unwell, or weak, turns pale or ashen, and has a slow pulse. A person with hypoglycaemia may faint, become confused or disorientated, or act as if drunk. Sweating may be present. If conscious, a glucose drink should be given. If unconscious, urgent medical help is required.

## Fractures

Possible fractures should be immobilised with a splint and bandage. If the limb is deformed and the fingers or toes are white, urgent transport to hospital is required.

## Pain

Severe pain is always potentially serious, and it is often difficult to distinguish a life-threatening condition from a harmless one. Therefore, referral to a medical practitioner is required.

Eye pain and earache need medical assessment regardless of severity.

## Poisoning

See '[First aid for poisoning](#)', Section F.

## Respiratory distress

Any person who claims to be or appears to be having difficulty breathing requires close monitoring and referral to a medical practitioner. Sit the person comfortably upright; be calm and reassuring. Some conditions requiring medical assessment are:

- croup, epiglottitis or inhaled foreign body
- sudden swelling of face and neck, usually due to allergy. If the person has an adrenaline syringe for self-administration and/or a reliever inhaler and has difficulty breathing, these should be used
- asthma. If the person has a reliever inhaler, use the "4 x 4 x 4" first aid protocol. Give four puffs, one puff at a time, with four breaths after each puff. Use a spacer if available. Wait four minutes and then repeat. If there is little or no improvement, call an ambulance immediately and say the person is having an asthma attack. Keep administering the reliever until the ambulance arrives. For children, four puffs every four minutes is a safe dose. For adults, up to six to eight puffs may be given every five minutes for a severe attack.<sup>9</sup>

## Seizures

The most common form of seizure is a generalised tonic-clonic seizure. The person may experience an 'aura' or warning of the attack prior to onset. They may then cry out and collapse at the onset of the seizure. A generalised seizure has a characteristic tonic (stiff) phase, and a clonic (alternating stiffness and relaxation) phase with jerky movements that usually last one to two minutes. There may be frothing of the mouth, cyanosis (blueness) or loss of bowel or bladder control.<sup>10</sup> This is followed by a period of unconsciousness, which usually resolves within 30 minutes. An accurate history of the sequence of events is an important part of the medical assessment.

Treatment is aimed at preventing injury and maintaining the Airway and Breathing. Roll the person onto their side in a 'coma' position until they awaken. Do not force the mouth open during the seizure nor attempt to insert anything in the mouth. An ambulance should be called for all people with seizures as some will have multiple seizures or require anticonvulsant drugs to terminate the seizure.