Motorcycle First-Aid

I. INTRODUCTION

- A. Acknowledgements and Thanks
- B. Instructor(s) intro
 - 1. Qualifications
 - 2. Contact info
- D. Legal Stuff
 - 1. The "Good Samaritan Law", Red Cross/AHA/50-State AED

Applicable to whom?

Updated 2009 as a result of Van Horn v. Watson

2. The "Duty to Act", "Gross Negligence"

II. PREPARATION AND TRAINING

- A. Prevention of C-V Emergencies
 - 1. Risk Factors (Preventable vs. Non-Preventable)
- B. Basic Anatomy of the:
 - 1. Airway
 - 2. Pulmonary System
 - 3. Cardiovascular System
 - 4. Central Nervous System
- C. Recognition of C-V Emergencies
 - 1. Signs and Symptoms of Heart Attack

Classic signs

"Silent" – Who?

- Signs and Symptoms of Stroke (Brain Attack)
 Droop, slur, gaze, weakness
- 4. Mechanism of Injury and Major Trauma

Accident dynamics, coup contra coup, 3 impacts - vehicle, body, internal organs

- D. Brief Review of CPR
 - 1. Techniques latest info breathing? Hard and fast?
 - 2. Effectiveness of Traumatic CPR vs. Medical CPR
 - 3. Automatic External Defibrillators (AED's)
- E. Riding Specific Concerns
 - 1. Typical Injuries Sustained by Riders
 - 2. The Importance of Good Riding Skills and Practice
 - 3. The Importance and Benefits of Good Protective Gear
 - 4. Your Emergency Information Needed by Medical Personnel

III. ON THE SCENE (Red Cross: CHECK, CALL, CARE)

- A. Secure the Scene
 - 1. Protect Yourself, the Bikes, Fellow Riders/Rescuers, Patient
 - a. Traffic, Other Hazards (i.e. Fire, Downed Wires, Fluids)
 - b. Emergency Relocation: Drags and Carries (spinal alignment)

B. Assess the Patient(s)

- 1. The "Kill Zone" aka The "Primary Survey" (Triage ALL Patients)
 - a. Conscious? Yes/No (Alert, Talking, Swearing)
 - i. Orientation (Ask Name, Date, What Happened)
 - ii. Follows Commands: "Squeeze My Fingers"
 - iii. Response to Painful Stimulus (Axillary Pinch)
 - iv. Do NOT Shake or Roll Patient Over
 - v. Never Move Injured Pt. Unless Life Threatening
 - b. Breathing? Yes/No (Check the Airway)
 - i. Breathing Rate/Depth/Quality
 - ii. Obstruction to Airway (Bleeding, Facial Damage)

iv.	Only Remove Helmet if Airway is Not Secure Continually Reassess Airway Throughout Rescue Breathing, if Required
c. Pulse?	Yes/No (formerly: "Signs of Circulation") (carotid, radial, femoral)
i.	A Breathing Pt. Has a Pulse
ii.	A Non-Breathing Pt. May or May Not Have a Pulse
d. Bleedin	g? (Assess and Control Any Bleeding)
i.	Direct Pressure
ii.	Elevation
iii.	Pressure Points (Tourniquets) Lessons learned from Iraq, Afghanistan,
e. Spinal/I	Neurological Status
i.	Is Pt. Moving All Extremities Equally?
ii.	Injury/Deformity to Neck/Spine?
iii.	Sufficient "Mechanism of Injury" to Suspect?

- iv. Techniques of Spinal Immobilization
- v. Techniques of Safe Helmet Removal
- h. Signs of Shock? (RPM-30,2,CanDo...Treat For Shock)
 - i. Respirations (>30/min?)
 - ii. Perfusion (Capillary Refill <2 Seconds)
 - iii. Mental Status (Oriented/Follows Commands/Can Do)

C. Quickly Assess Your Needs

etc.

- 1. Multiple Patients? ("Triage" for Multiple Patients)
- 2. Extrication/Evacuation Required? (Let Dispatcher Know)
- 3. Major Trauma? (Get Air Medical on the Way ASAP)

D. Call For Help

- 1. Cell Phones (Give Very Specific Location) (Enhanced 911)
- 2. Landlines (Quickest--If Close By)
- 3. Runners (May Be Needed in Rural Settings; Out of Cell Range)
- 4. Satellite Alerting (SPOT)
- 5. Always Verify That Help Has Been Called
- E. The "Secondary Survey" (Including Head-to-Toe Exam)
 - 1. Talk to Patient, Calm and Reassure Them
 - a. Help Is on the Way (Don't Make False Promises)
 - b. Bike is Safe
 - c. Others Are Okay
 - d. Family Is Informed (or Being/Not Being Notified)
 - 2. Find Any Other Hidden Injuries
 - a. Need to Expose Body For Visualization
 - b. Protect/Maintain Proper Body Temperature
 - c. DO NOT Let Pt. Jump Up and Walk Around, If Possible
 - 3. Continually Re-Assess Mental Status, Airway, and Shock

Vital when compared to initial assessment. Changes? Trends?

- 4. Signs and Symptoms of a Closed Head Injury
 - a. Confusion (Not Fully Oriented to Person, Place, Event)
 - b. Repetitive Questioning (i.e. "What Happened?")
 - c. Behavioral Changes (Combativeness, Lethargy)
 - d. Changes in Respirations (Patterned Breathing)
- F. Gather Important Information
 - 1. Rider's Personal Information

a. I.D. (Driver's License)

b. Past Medical History

- i. Surgeries
- ii. Previous Accidents
- iii. Disabilities/Defecits, etc.
- c. Current Medical Conditions
 - i. Heart condition
 - ii. Diabetes
 - iii. Seizure Disorder
 - iv. Asthma, etc.
- d. Current Medications Taken (especially blood thinners)

epi-pen, inhalers, insulin

- e. Known Allergies (i.e. Drugs or Bee Venom)
- f. Emergency Contact Info
 - i. Names
 - ii. Phone Numbers
 - iii. Should You Contact, and Whom?
- g. Health Insurance Info (Subscriber Name/Group Number)
- h. Organ Donor Status ("Can we have your liver, then?")
- 2. Involved and/or Responsible Party(s)
 - a. Names
 - b. Contact Info
 - c. Vehicle Make/Model/Color/License Plate/VIN/Year
 - d. Insurance Info
- 3. Witnesses to the Accident
 - a. Names
 - b. Contact Info

- G. How to Share Information and With Whom
 - 1. Don't pass on any information you are not sure of
 - 2. Maintain confidentiality of parties involved
 - 3. Make a copy of pt.'s medical info for EMS (if possible)
 - 4. Make a copy of witnesses' contact info for Police (if possible)

IV. FIRST AID

- A. Basic Anatomy of a 1st-Aid kit (and Body Substance Isolation)
- B. Techniques for Controlling Bleeding
 - 1. Bandaging and Dresssing Wounds
- C. Sprains/Strains/Fractures/Dislocations (Treat With R.I.C.E.)
 - 1. Rest (Splinting and Immobilizing)
 - 2. Ice (or cold packs)
 - 3. Compression
 - 4. Elevation
- D. Hypothermia
- E. Hyperthermia
 - 1. Maintaining Proper Hydration
 - 2. Maintaining Proper Electrolyte Balance
 - 3. Recognizing Heat-Related Emergencies
- F. Burns (Including Sunburns)
- G. Bites/Stings
- H. Eye Injuries
- I. Amputations
 - 1. Care of Body Parts (Fingers, Teeth, etc.)

- J. Embedded/Impaled Objects
- K. Abdominal Emergencies
 - 1. Internal Bleeding
 - 2. Eviscerations
- L. Dehydration

V. FOLLOW-UP

- 1. After the Accident (Hand-Outs)
- 2. Thanks and Acknowledgements
- 3. Where to Go to Learn More
- 4. More Questions and Answers

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