Guideline 2 – Managing an Emergency

Summary

Who does this guideline apply to?

This guideline applies to all who are in need of immediate care ('person' or 'person in need').

Who is the audience for this guideline?

This guideline is for use by bystanders, first aiders or first aid providers, first responders and health professionals.

Recommendations

The Australian and New Zealand Committee on Resuscitation (ANZCOR) recommends that in all emergencies, the rescuer should:

1. Quickly assess the situation.
2. Ensure safety for the rescuer, person in need and bystanders (this may mean moving the person in need).
3. Send for help (call an ambulance).

Individuals who are unresponsive and breathing normally should be positioned into a lateral, side-lying recovery (lateral recumbent) position.

If the person in need is unresponsive and not breathing normally, follow the ANZCOR Basic Life Support Flowchart (Guideline 8).

Where more than one person requires attention, the care of an unconscious person has priority.

1.0 | Priorities in an Emergency

Early recognition is a key step in initiating early management of an emergency situation.[1-3]

In all emergencies, the rescuer should:

- quickly assess the situation
- Check for danger (assess and manage risks to the rescuer and others. This may mean moving the person in need)
- send for help (call an ambulance).

If the person is unresponsive and not breathing normally, follow the ANZCOR Basic Life Support Flowchart (Guideline 8).

Where more than one person requires attention, **THE CARE OF AN UNCONSCIOUS PERSON HAS PRIORITY.**

2.0 | General principles of management

After ensuring safety for the person in need, rescuer and bystanders and sending for help, the management of the collapsed or injured person involves:

- prevention of further harm or injury
- checking response to verbal and tactile stimuli (“talk and touch”)
- care of airway, and breathing
- control of bleeding (Guideline 9.1.1)
- checking for physical (eg. alert jewellery) or electronic alert devices (eg. smartphone application) that may be relevant to assessment or management
- protection from the weather
- other first aid measures depending on the circumstances
- gentle handling
- reassurance
- continued observation.

2.1 | Moving a person in need

The condition of a collapsed or injured person may be made worse by movement: increasing pain, injury, blood loss and shock. However, a person lying in a hazardous area, for example on a road or railway, may need to be moved to ensure safety.

A rescuer should move a person when needed to:

- ensure the safety of both rescuer and the person in need
- protect from extreme weather conditions
- enable evacuation from difficult terrain
- enable the care of airway and breathing (e.g. turning the unconscious breathing person onto the side or turning a collapsed person onto their back to perform cardiopulmonary resuscitation)
- enable the control of severe bleeding.

ANZCOR suggests that an unresponsive person who is breathing normally is positioned into a lateral, side-lying recovery (lateral recumbent) position as opposed to leaving them supine.[1,4,5] [2015/2020 CoSTRs, weak recommendation, very-low-certainty evidence]

It is reasonable to roll a face-down unresponsive person onto their back to assess airway and breathing and initiate resuscitation. [Good Practice Statement] Concern for protecting the neck should not hinder the evaluation process or life saving procedures.[6]

Ideally, the most experienced rescuer should take charge and stay with the person in need while another rescuer is sent to seek help. If movement is necessary and help is available, the rescuer in charge should explain clearly and simply the method of movement to the assistants, and to the person in need if they are conscious.

When ready to move the person in need:

- avoid bending or twisting the person's neck and back: a spinal injury (Guideline 9.1.6) can be aggravated by rough handling
- try to have three or more people to assist in the support of the head and neck, the chest, the pelvis and limbs while moving the person. A spine board may be used if available
- a single rescuer may need to drag the person. Either an ankle drag or arm-shoulder drag is acceptable
- make prompt arrangements for transport by ambulance to hospital.

2.2 | Specific management of a person in need at a Road Accident

- Approach with caution and make the accident scene as safe as possible.
- Do not touch a vehicle, or attempt to rescue a person from within ten metres[7] of a fallen power line unless an appropriate electrical authority has declared the area safe.
- Use hazard lights, road triangles, or torches to warn oncoming traffic of the accident scene. Bystanders may also be used where it is safe to do so.
- Turn off the ignition of a crashed vehicle and activate the park brake. If unable to activate the park brake, place a chock under a wheel. Be cautious that airbags that have not deployed may activate following a crash.
- Remove a motorbike helmet from a person if it is necessary to manage the airway, assist breathing or control bleeding.
- If an unconscious breathing person can be managed within the vehicle, do not remove them

from the vehicle unless there is a threat to life. Clear the airway of foreign material; maintain head tilt and jaw support and continuously reassess the airway and breathing.
- If the person in the vehicle is unconscious and not breathing normally despite opening the airway, remove the person from the vehicle if possible and commence CPR immediately following the ANZCOR Basic Life Support Flowchart (Guideline 8).

2.3 | Specific Management of Electric Shock

- When power lines are in contact with a vehicle or a person, do not approach until the situation is declared safe by authorities. The rescuer should ensure that all bystanders remain at least ten metres clear of any electrified material; examples being a car body, cable, pool of water.[7] Metal and water conduct electricity and may be extremely hazardous.
- In a **domestic** or similar situation it is essential to promptly separate the person in need from the electricity supply. Turn off the supply of electricity and, if possible, unplug the appliance from the power outlet. Until the power is off, avoid direct skin contact with the person or any conducting material.
- If the person is unresponsive and not breathing normally, follow the ANZCOR Basic Life Support Flowchart (Guideline 8).
- Other injuries may require treatment. Burns are common and should be managed following ANZCOR Guideline 9.1.3.
- Promptly refer all who have suffered an electric shock for medical assessment.
- Assess the person who has been struck by lightning: if unresponsive and not breathing normally, follow the ANZCOR Basic Life Support Flowchart (Guideline 8).

References

1. Singletary EM, Zideman DA, Bendall JC, et al. 2020 International Consensus on First Aid Science With Treatment Recommendations. Resuscitation 2020;156:A240-A82.

2. Olasveengen TM, Mancini ME, Perkins GD, et al. Adult Basic Life Support: 2020 International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science With Treatment Recommendations. Circulation 2020;142:S41-S91.

3. Olasveengen TM, Mancini ME, Perkins GD, et al. Adult Basic Life Support: International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science With Treatment Recommendations. Resuscitation 2020;156:A35-A79.

4. Zideman DA, Singletary EM, De Buck EDJ, et al. Part 9: First aid 2015 International Consensus on Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science With Treatment Recommendations. Resuscitation 2015;95:e225-e61.

5. Singletary EM, Zideman DA, Bendall JC, et al. 2020 International Consensus on First Aid

Science With Treatment Recommendations. Circulation 2020;142:S284-S334.

6. Hood N, Considine J. Spinal immobilisaton in pre-hospital and emergency care: a systematic review of the literature. Australasian Emergency Nursing Journal 2015;18:118-37.

7. Electrical Safety: Look up and Live. Energy Safe Victoria. Accessed 12 November 2020 from https://esv.vic.gov.au/campaigns/look-up-and-live/ 2020.

Further Reading

ANZCOR Guideline 3 Recognition and First Aid Management of the Unconscious Person

ANZCOR Guideline 4 Airway

ANZCOR Guideline 5 Breathing

ANZCOR Guideline 8 Cardiopulmonary Resuscitation

ANZCOR Guideline 9.1.3 Burns

ANZCOR Guideline 9.1.6 Management of suspected spinal injury

ANZCOR Guideline 9.2.3 Shock

About this Guideline

Search date/s	ILCOR literature search details and dates are available on the CoSTR page of the ILCOR website (https://costr.ilcor.org) and the relevant CoSTR documents: CPR Prior to Call for Help (BLS): Systematic Review https://costr.ilcor.org/document/cpr-prior-to-call-for-help-task-force-systematic-review-costr
Questions/PICOs:	Are described in the CoSTR documents (https://costr.ilcor.org)
Method:	Mixed methods including ARC NHMRC methodology before 2017 and ILCOR GRADE methodology described in ILCOR publications since 2017.
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Referencing this guideline

When citing the ANZCOR Guidelines we recommend:

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