

HEAD INJURY

- 1. Monitor breathing and pulse:**
 - casualty unconscious, follow DRABCD
 - keep casualty's airway open with fingers (if face badly injured).
- 2. Support head and neck:**
 - support casualty's head and neck during movement in case the spine is injured.
- 3. Control bleeding:**
 - place sterile pad or dressing over wound
 - apply direct pressure to wound **unless** you suspect a skull fracture
 - if blood or fluid comes from ear, secure a sterile dressing lightly in place and allow to drain.
- 4. Lie casualty down:**
 - place casualty in comfortable position with head and shoulders slightly raised
 - be prepared to turn casualty onto side if they vomit
 - clear the airway quickly after vomiting.
- 5. 📞 Call 000 for an ambulance.**

SIGNS & SYMPTOMS

- altered or abnormal response to commands and touch
- wounds to the scalp or face
- blood or clear fluid escaping from nose or ears
- pupils becoming unequal in size
- blurred vision
- loss of memory.

WARNING

Wear gloves, if possible, to protect against cross-infection.

If bleeding does not stop, without disturbing dressing, reposition pad and reapply pressure to control bleeding.

Use a **non adherent dressing** to cover wounds. *Non adherent dressings are available in the Medium Leisure Kit.* Call St John on 1300 360 455 and ask for further information about the full range of first aid kits.