

DROWNING

CAUTION

- Take care to avoid putting yourself in danger when rescuing a person from water (p.36).
- If the liquid is a chemical or a waste liquid such as in a slurry tank be aware that there may be toxic fumes in the atmosphere.
- Many casualties who drown may regurgitate stomach contents so be prepared to roll him onto his side to clear his airway (p.68).
- If you are a trained rescuer and it is safe to do so, start rescue breaths while removing the casualty from the liquid.
- Call 999/112 for emergency help** even if a casualty appears to recover immediately after rescue.

WHAT TO DO

- When the casualty is rescued from liquid (p.36), start the primary survey. Check his level of response, open his airway and check breathing.
- If he is unresponsive and not breathing normally shout for help and **call 999/112 for emergency help** or ask someone to make the call and request an AED.
- Check that the airway is open and give FIVE initial rescue breaths. Follow this with 30 chest compressions, then TWO rescue breaths.

DROWNING CHAIN OF SURVIVAL



Prevent drowning
Advise the casualty

Recognize distress
Ask someone to call

Provide flotation
This can prevent

Remove from water
Do this only if it is

Provide care as needed
Seek medical attention

Drowning causes breathing impairment as a result of

submersion or immersion in a liquid. Drowning begins when a casualty is unable to breathe because the nose, mouth and air passages are submerged below the surface of a liquid. Any incident involving immersion when there is no problem with breathing is not defined as drowning but as a rescue (p.36).

A casualty rescued from a drowning incident must be assessed using the primary survey (pp.44–45) to establish whether or not CPR is required. If he is unresponsive and not breathing, give five initial rescue breaths before you start chest compressions, then continue with CPR at a rate of 30 chest compressions to two rescue breaths. Always **call 999/112 for the emergency services**.

YOUR AIMS

- To restore breathing
- To arrange urgent removal to hospital

- Continue CPR at a rate of 30:2 until help arrives, the casualty shows signs of becoming responsive – coughing, opening his eyes, speaking, or moving purposefully – and starts breathing normally, or you are too exhausted to continue.
- If an AED is available attach while continuing CPR (pp.84–86).
- If the casualty starts to breathe normally, treat him for hypothermia (pp.186–87) by covering him with warm clothes and blankets. If possible replace wet clothes with dry ones. Monitor and record the casualty's vital signs – breathing, pulse and level of response (pp.52–53) until help arrives.

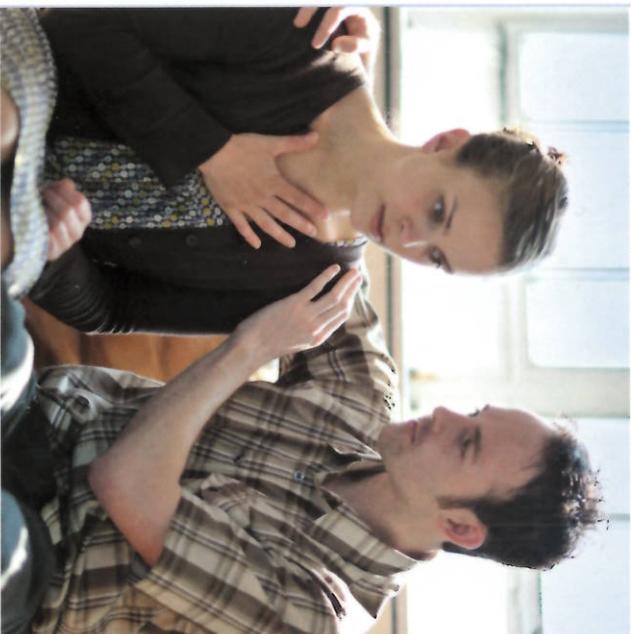
HYPERVENTILATION

This is commonly a manifestation of acute anxiety and may accompany a panic attack. It may occur in individuals who have recently experienced an emotional upset or those with a history of panic attacks.

The unnaturally fast or deep breathing of hyperventilation causes an increased loss of carbon dioxide from the blood, which leads to chemical changes within the blood. These changes result in symptoms such as dizziness and trembling, as well as tingling in the hands. As breathing returns to normal, these symptoms will gradually subside.

WHAT TO DO

- When speaking to the casualty be kind and reassuring. If possible, lead the casualty away to a quiet place where she may be able to regain control of her breathing more easily and quickly. If this is not possible, ask any bystanders to leave.



- Encourage the casualty to seek medical advice on preventing and controlling panic attacks in the future.

CAUTION

- Do not advise the casualty to rebreathe her own air from a paper bag as it may aggravate a more serious illness.
- Hyperventilation due to acute anxiety is rare in children. Look for other causes.
- Be aware that serious illness may also cause rapid breathing and anxiety.

RECOGNITION

- Unnaturally fast or deep breathing
- Fast pulse rate
- Apprehension

There may also be:

- Dizziness or faintness
- Trembling, sweating and dry mouth, or marked tingling in the hands
- Tingling and cramps in the hands and feet and around the mouth

YOUR AIMS

- To remove the casualty from the cause of distress
- To reassure the casualty and calm her down