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DAV COLLEGE AMRITSAR



FIRST AID MANUAL

THE STEP-BY-STEP GUIDE FOR EVERYONE

Katra Sher Singh, Amritsar-143006 (Pb.) India

Ph. : 0183-2553377, 2534971 Fax: 91-183-2291577

email: davasr@yahoo.com URL: www.davcollegeasr.org

Efforts by:

Dr. Rajni Bala
Associate Professor
Department of Botany

Dr. Rupinder Kaur
Assistant Professor
Department of Biotechnology

Dr. Neerja
Assistant Professor
PG Department of Physics & Electronics

Prof. Rajinder Singh Minhas
Associate Professor
PG Department of Computer Science & IT

Dr. Gaurav Sharma
Assistant Professor
Department of Political Science
Associate NCC Officer, NCC Naval Wing

From Principal's Desk

Education not only imparts bookish knowledge, but also equips the students with valuable life skills which are not only handy for earning their livelihood but also in navigating through different situations arising in life. The holistic education imparts additional skills for dealing with Disaster Management, Civil Defence and First Aid, which prove life saving for a person.



DAV College, Amritsar regularly undertakes such activities to develop the skills among its students and the First Aid manual in hand, is one such step in this direction. The knowledge of First Aid is everybody's requirement and can be needed at any time. It proves to be life saving by just acquiring few skills as it mitigates the danger to the life of the victims. This manual provides an overview about the methods to be used and steps to be followed in different undesirable emergent situations, such as road accidents, electric shocks, fires and drowning etc. and will be extremely helpful for the readers to be observant, tactful, dexterous and more sympathetic. So.....

Be a Hero, Learn First Aid & Save Lives!!!

GOD BLESS ALL

A handwritten signature in green ink that reads "Rajesh Kumar". The signature is written in a cursive style and is positioned above the printed name.

Dr. Rajesh Kumar
Principal

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FIRST AID is the assistance given to any person suffering a sudden illness or injury to preserve life, prevent the condition from worsening or to promote recovery. It includes initial intervention in a serious condition prior to professional medical help being available. It often consists of a one-time, short term treatment and requires little technology or training to administer.

General Guidelines

STEP 1: Make the area safe

Your own safety should always come first. As a first aider, you should:

- ❖ try to find out what has just happened;
- ❖ check for any danger;
- ❖ is there a threat from traffic, fire, electricity cables, etc.; never approach the scene of an accident if you are putting yourself in danger;
- ❖ do your best to protect both the injured person(s) and other people on the scene;
- ❖ seek police or emergency help if an accident scene is unsafe and you cannot offer help without putting yourself in danger.

STEP 2: Evaluate the condition of the sick or injured person

- ❖ If it is safe, you can evaluate the sick or injured person's condition.
- ❖ Always check that he is conscious and breathing normally.
- ❖ Situations in which consciousness or breathing are impaired, are often life threatening.
- ❖ Bleeding can also happen inside the body and can be life-threatening although the loss of blood is not seen.

STEP 3: Seek help

Once you have evaluated the sick or injured person's condition, you can decide if help is needed urgently. If help is needed, ask a bystander to call for help. Ask him

to come back and confirm that help is underway. If you call for help, be prepared to have the following information available:

- ❖ the location where the help is required (address, street, specific reference points, location; if in a building: floor, room);
- ❖ the telephone or mobile number you are calling from;
- ❖ the nature of the problem;
- ❖ what happened (car accident, fall, sudden illness, explosion, ...);
- ❖ how many injured;
- ❖ nature of the injuries (if you know);
- ❖ what type of help is needed:
- ❖ ambulance, police, fire brigade, or other services;
- ❖ If an ambulance can be obtained in a short time, it is best to call for one and use it to transport the injured or sick person to the healthcare facility.

STEP 4: Provide First Aid

Give first aid in accordance with the instructions given in the following sections in this manual. When providing first aid, try to protect an ill or injured person from cold and heat. Do not give anything to eat or drink to a person who is:

- ❖ severely injured,
- ❖ feeling nausea,
- ❖ becoming sleepy, or
- ❖ falling unconscious.

Be aware that experiencing an emergency situation is a very stressful experience for the injured or sick person. To support him through the ordeal with, follow these simple tips:

- ❖ tell the sick or injured person your name, explain how you are going to help him and reassure him. This will help to relax him;

- ❖ listen to the person and show concern and kindness;
- ❖ make him as comfortable as possible;
- ❖ if he is worried, tell him that it is normal to be afraid;
- ❖ if it is safe to do so, encourage family and loved ones to stay with him; and
- ❖ explain to the sick or injured person what has happened and what is going to happen.

First Aid Kit

- ❖ 1 tube silver sulfadiazine ointment 15 g
- ❖ 1 tube Betadine ointment or a bottle of Betadine liquid
- ❖ 2 sterilized first aid field dressings
- ❖ 2 sterilized eye pads
- ❖ 1 bottle savlon, dettol or cetavlon 112 ml
- ❖ 1 mouth-to-mouth resuscitator
- ❖ 1 torch (2 battery cells)
- ❖ 1 writing pad and pen and 1 record card in plastic cover
- ❖ 1 first aid leaflet form
- ❖ Mask and Sanitizer

Life Rescue Techniques

❖ Cardiopulmonary Resuscitation (CPR)

❖ Expired Air Resuscitation (EAR)

Cardiopulmonary Resuscitation: People without first aid training can save a life by using CPR. Use this technique when an adult is not breathing at all and in case of a child or infant, when they are not breathing normally or if the adult or child is not responding when you talk to them or tap them because giving CPR can ensure the supply of oxygen-rich blood to the brain. This is important, as without oxygen, someone can sustain permanent brain damage or die in under 8 minutes.



A person may stop breathing in any of the following circumstances:

- ❖ a cardiac arrest or heart attack
- ❖ choking
- ❖ a road traffic accident
- ❖ near-drowning
- ❖ suffocation
- ❖ poisoning

- ❖ a drug or alcohol overdose
- ❖ smoke inhalation
- ❖ electrocution
- ❖ suspected sudden infant death syndrome

Stages of CPR

Preparation Stage

Before performing CPR on an adult, use the following preparation steps:

Step 1. Call 108 : First, check the scene for factors that could put you in danger, such as traffic, fire, or falling masonry. Next, check the person. Do they need help? Tap their shoulder and shout, “Are you **OK?**”

If they are not responding, call 108 or ask a bystander to call 108 before performing CPR. If possible, ask a bystander to go and search for an AED (Automated External Defibrillator) machine. People can find these in offices and many other public buildings.

Step 2. Place the person on their back and open their airway

Place the person carefully on their back and kneel beside their chest. Tilt their head back slightly by lifting their chin.

Open their mouth and check for any obstruction, such as food or vomit. Remove any obstruction, if it is loose. If it is not loose, trying to grasp it, may push it farther into the airway.

Step 3. Check for breathing

Place your ear next to the person’s mouth and listen for no more than 10 seconds. If you do not hear breathing, or you only hear occasional gasps, begin CPR. **In case of infants, breathing patterns are normal as they usually have periodic breathing.**

If someone is unconscious but still breathing, do not perform CPR. Instead, if they do not seem to have a spinal injury, place them in the recovery position. Keep monitoring their breathing and perform CPR, if they stop breathing.

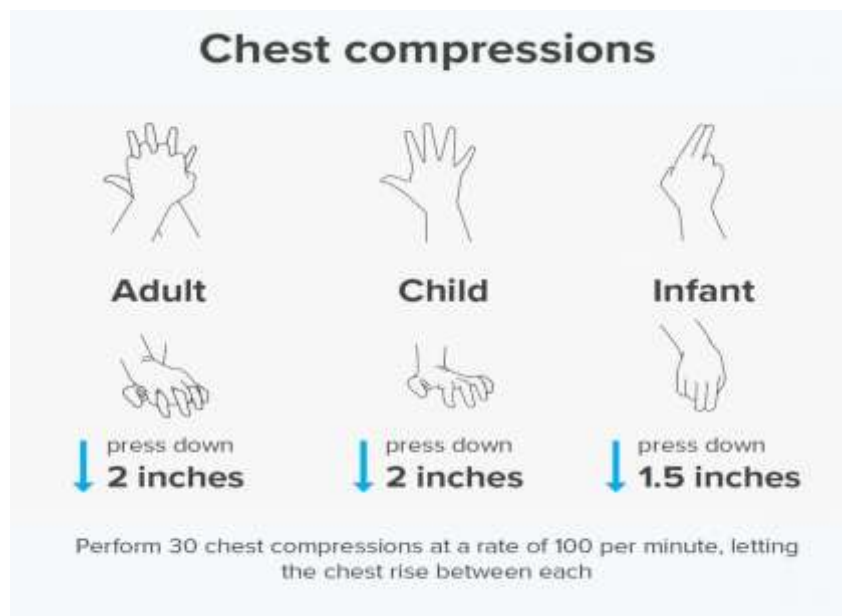
CPR Stage

Use the following steps to perform CPR:

Step 4. Perform 30 chest compressions

Place one of your hands on top of the other and clasp them together. With the heel of the hands and straight elbows, push hard and fast in the center of the chest, slightly below the nipples.

Push at least 2 inches deep. Compress their chest at a rate of least 100 times per minute. Let the chest rise fully between compressions. **The same method is followed in child but in case of infant, place your mouth over their nose and mouth and blow for 1 second to make their chest rise. Then deliver two rescue breaths.**



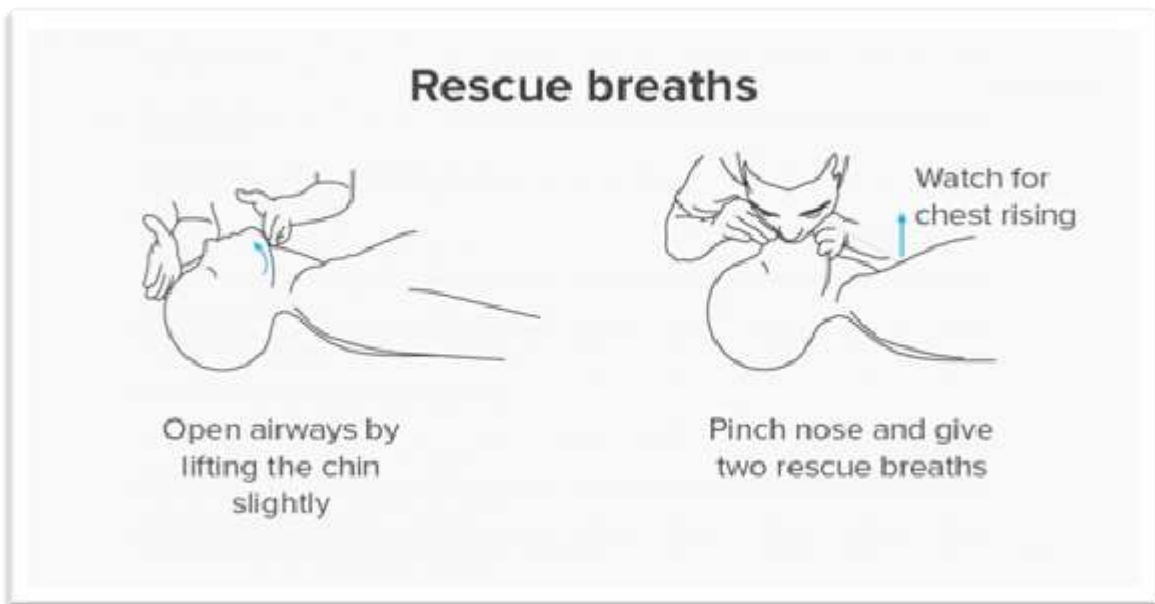
Step 5. Perform two rescue breaths

Making sure their mouth is clear, tilt their head back slightly and lift their chin. Pinch their nose shut, place your mouth fully over theirs, and blow to make their chest rise.

The same method is followed in child but in case of infant, use two fingers. Place your fingers in the center of their chest, between and slightly below the nipples. Perform 30 quick compressions around 1.5 inches deep.

If their chest does not rise with the first breath, re-tilt their head. If their chest still does not rise with a second breath, the person might be choking.

In case of child and infant, step 5 comes first and then step 4.



Step 6. Repeat

Repeat the cycle of 30 chest compressions and two rescue breaths until the person starts breathing or help arrives. **In case of child and infant, repeat the cycle of rescue breaths and chest compressions until the child starts breathing or help arrives.** If an AED (Automated External Defibrillator) arrives, carry on performing CPR until the machine is set up and ready to use.

Expired Air Resuscitation (mouth to mouth resuscitation): If the victim is still not breathing, give him artificial breathing. Mouth to mouth resuscitation is a form of artificial ventilation given to person who fainted or drowned . In this method the rescuer put's his mouth to the victim's mouth and blows air to his lungs

through the mouth. This is done for a person who is not doing well with his or her breathing and fainted. Mouth to mouth resuscitation is usually done as a continuation of CPR.



Steps to follow:

1. Place the victim on a hard or plain surface.
2. Ensure that the mouth and throat are clean or clear for the air to pass. If something is stuck in the throat or mouth try to sweep it out with your fingers.
3. Turn the victim onto the back to open the airways.
4. Tilt head back, support jaw, keep your fingers clear of throat;
5. With good mouth to mouth seal and your cheek sealing the victim's nose, blow into the mouth until the chest rises;
6. Lift your mouth, turn your head to see chest fall and listen and feel for air escaping from nose and mouth. Listen for the sounds of breathing. Feel for the breath on your cheek. If breathing does not start on its own, repeat the procedure.
7. Continue mouth-to-mouth resuscitation until breathing is restored. Blow every four seconds with adults and every three seconds with children.

Road Accident

Causes of road accidents

The most common causes of road accidents in India are:

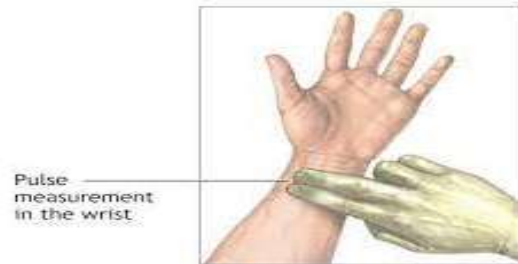
- ❖ **Distracted Driving**
- ❖ **Drunk Driving**
- ❖ **Speeding/ Reckless Driving**
- ❖ **Not Wearing Seat Belt**
- ❖ **Rain or Wet Roads**
- ❖ **Potholes and Bad Road Condition**
- ❖ **Breaking Traffic Rules**
- ❖ **Tailgating**
- ❖ **Not Crossing Roads at Pedestrian Crossings.**
- ❖ **Ongoing construction work**
- ❖ **Lack of adequate road signs**

Steps to be followed after an Accident

- ❖ **Check yourself first:** If you have been injured in the accident, first check yourself for any injuries. Try to assess how well you can move your limbs, and if you experience symptoms such as dizziness etc. Remember you need to be fit enough to help the others.
- ❖ **Check the other person(s) for injuries:** If other people are injured, first assess the extent of his/ her injuries. For example; is he bleeding from the head, neck, arms legs, abdomen back etc? Treat the quietest person first, they are usually more seriously injured or cannot breathe. People who can talk or scream, on the other hand, can breathe therefore can be treated a little later. Ask for the patient's name, if he responds, it means he is able to understand the situation and has most likely not suffered a severe head injury.
- ❖ **Look for signs of breathing:** Next, check if the person is breathing and if he has

a pulse. Check the blood pressure, heartbeat and pulse of a person. This can be done by placing three fingers on the wrist towards thumb side and count the beats for 10 seconds and then multiply with 6 to get pulse per minute. In any case pulse should not be less than 60/min. Also check for speed or whether it is continuous or missing in between.

Note: if the pulse of a person sitting or lie down is between 60-120 per min, it's a sign that person is out of danger.



- ❖ **Call for help:** Immediately call for an ambulance or rush the person to a hospital. Once you know more about the patient's condition you will be in a better position to tell the doctors about his/her condition.
- ❖ **Check for obstructions in the person's mouth and throat:** If you do not hear any breath sounds, check his/her mouth for any obstructions. If there is something obstructing the airway, use your index and middle finger to clear the airway.
- ❖ **Perform life saving techniques:** If there is no pulse, start CPR or EAR. Keep the person's neck straight to start EAR (Expired Air Resuscitation) or CPR (Cardio pulmonary resuscitation). There are 3 types of EAR; Mouth-to-mouth, Mouth-to-Nose, Mouth-to-Mask.
- ❖ **Ways to help him/her in grave situations:** If there is bleeding from the mouth or the patient is vomiting, turn the person to his/her side. This will avoid any chances of the person choking. Place the person's arm that is under him straight out and the arm closest to you across his chest.
- ❖ **Deal with open wounds:** If there are extensive wounds, try to control the bleeding using pressure to the area using a cloth. Press down with your palms rather than your finger tips. If the victim's body is becoming pale or white and is asking for water and feeling difficulty in breathing, speaking and listening and

not moving eye lids then there are chances of internal bleeding in the abdomen, chest and head. Do not give water to drink and something to eat. Bleeding limbs should be elevated to prevent bleeding. Apply pads and bandage them around the wound. Do the same if broken bones are visible.

Note: If blood is coming out of the mouth, nose and ear, do not stop the blood, as blood may revert back to the brain or may enter in the airway (breathing track). This blood may clot in the brain and victim may undergo coma for long time and victim may lose eyesight, speech, ear damage and memory loss.

- ❖ **Always suspect spinal injuries:** If the person's neck is in an awkward position (not normally placed) or the person is unconscious, do not move the patient. Get help immediately. This could mean that the person's neck is broken, and moving him/her in such a situation can cause more harm than good.
- ❖ **Keep the person warm:** Usually accident victims feel excessively cold due to shock. Therefore keeping them warm is essential to survival. You can use whatever you have to do this, such as a T-shirt, jacket, etc.
- ❖ **Avoid feeding the person:** Do not give the person any water, food or other fluids through the mouth, it could lead to the patient choking.

Tips to remember while shifting a person to the hospital

- ❖ The patient should be transported on a stretcher or a stiff board. This is important as reducing the amount of movement the person experiences, is essential to avoid his/her injuries from becoming worse.
- ❖ Keep the person's neck and back straight. You could place a rolled up towel or thick cloth under the neck for better support.
- ❖ Ensure that the person is lying down flat.
- ❖ If there is only a limb injury, the patient can be transported in a sitting position.
- ❖ In case of a bleeding injury, lift the injured part above the person's body level and apply pressure on the region. Keep applying pressure till you reach the hospital. This helps control and eventually stop the bleeding.

- ❖ Make sure the person has a pulse and is breathing on the way to the hospital. If he/she stops breathing, be prepared to start CPR or EAR in the vehicle.

Electric Shock

An electric shock happens when an electric current passes through your body. This can burn both internal and external tissue and cause organ damage. A range of things can cause an electric shock, including:

- ❖ power lines
- ❖ electric machinery
- ❖ Lab appliances
- ❖ electrical outlets
- ❖ lightening

Aside from the source of the shock, several other factors determining the effect of an electric shock are:

- ❖ voltage
- ❖ length of time in contact with the source
- ❖ overall health
- ❖ electricity's path through your body
- ❖ type of current (an alternating current is often more harmful than a direct current because it causes muscle spasms that make it harder to drop the source of electricity)

If someone else has experienced minor shock, he/she may not need emergency treatment, but one should still see a doctor as soon as possible. Internal damage from electric shocks are often hard to detect without a thorough medical exam.

Symptoms

The symptoms of an electric shock depend on how severe it is.

Potential symptoms of an electric shock include:

- ❖ loss of consciousness
- ❖ muscle spasms
- ❖ numbness or tingling
- ❖ breathing problems
- ❖ headache
- ❖ problems with vision or hearing
- ❖ burns
- ❖ seizures
- ❖ irregular heartbeat

Handling the Victim: Do's and Don'ts

If someone receives a shock, keep several things in mind to both help them and keep yourself safe:

- ❖ Don't touch someone who has been shocked if they're still in contact with the source of electricity.
- ❖ Don't move someone who has been shocked, unless they're in danger of further shock.
- ❖ Turn off the flow of electricity if possible. If you can't, move the source of electricity away from the person using a non-conducting object. Wood and rubber are both good options. Just make sure you don't use anything that's wet or metal based.
- ❖ Stay at least 20 feet away if they've been shocked by **high-voltage power lines that are still on.**
- ❖ Call local emergency services if the person was struck by lightning or if they came into contact with high-voltage electricity, such as power lines.
- ❖ If the person has trouble breathing, loses consciousness, has seizures, has

muscle pain or numbness, or is feeling symptoms of a heart issue, including a fast heartbeat, start **CPR if required** until emergency help arrives.

- ❖ If the person is showing signs of **shock**, such as vomiting or becoming faint or very pale, **elevate their legs and feet slightly, unless this causes too much pain.**
- ❖ Cover **burns** with sterile gauze if you can. **Don't use Band-Aids or anything else that might stick to the burn.**

Depending on the injuries, potential electric shock treatment include:

- ❖ Burn treatment, including the application of antibiotic ointment and sterile dressings
- ❖ To treat burns, If possible, wash your hands before taking care of the patient. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available. Try not to touch the person's wounds. Cover burn wounds with a clean cotton cloth
- ❖ Do not open blisters - leave them intact
- ❖ Pain medication: provide some pain killers to calm the victim if needed
- ❖ Intravenous fluids: in case of severe shocks for long time, the victim may get dehydrated, so provide fluids orally, if possibly or provide intravenous fluids by a trained professional
- ❖ A tetanus shot, depending on the source of the shock and how it occurred

FIRE

In case of fire, once the fire has been extinguished and/or it is safe for evacuation of the victims, first aid should be given.

Steps to be followed

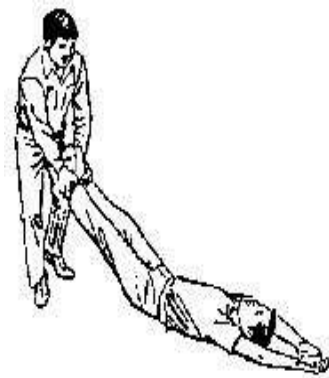
Shoulder Pull

- ❖ Grasp the victim by the clothing under the shoulders.
- ❖ Keep your arms on both sides of the head and support the head.
- ❖ Try to pull the victim in a straight line, if possible.



Ankle Pull

- ❖ Grasp the victim by both ankles and pant cuffs.
- ❖ Pull the victim. Use your legs to apply force to pull, not your back. Keep your back as straight as possible.
- ❖ Pull the victim in a straight line if possible.
- ❖ If the victim is lying on a sheet, a plastic or a blanket, pull the same as per convenience.



This method is the fastest method to move a victim over a short smooth distance. However it is not a preferred method as the head is unsupported and may bounce

over the surface bumps.

After evacuation of the victim, first aid should be given as per evaluated situation.

In case of situation arising due to fire the victims are primarily divided into two broad categories:

- ❖ Person under the effect of smoke and suffocating;
- ❖ Person exposed to direct heat and fire.

Person under the effect of smoke and suffocating

- ❖ Move the victim as quickly as possible away from the area
- ❖ Loosen the victim's clothes at neck and waist
- ❖ If the breathing stopped, call for help and start CPR
- ❖ Always arrange transport for the victim to a healthcare facility for further follow up

Person exposed to direct heat and fire

Burns to the face

- ❖ Approach the casualty as described for burns and scalds.
- ❖ Allow the victim to take a position that allows him to breathe best and is most comfortable.
- ❖ Loosen clothing that might hinder easy breathing.
- ❖ Especially observe the casualty's breathing and start CPR, if required.
- ❖ Always transport these burnt victims urgently to a healthcare facility or hospital.

Burns to the eyes

Flames or hot substances may have burned the eye(s). Prominent signs and symptoms may be scorched eyebrows, eyelashes; burn wounds around the eye; or red eyes with burning and itching sensation.

In case of burns to the eye:

- ❖ Shout or call for help if you are alone but do not leave the person unattended. Ask a bystander to seek help or to arrange urgent transport to the nearest healthcare facility or hospital. Tell him to come back to you to confirm if help has been secured.
- ❖ Rinse the eye immediately with plenty of water for 10-15 minutes, preferably from the nose outwards. Use clean water or water that has been boiled and cooled. Be careful: Room temperature water is more comfortable than cold water. Very warm water might burn the eye. Make sure no liquid or rinsing water runs into the other eye.
- ❖ If the person wears contact lenses, ask the person to take them out and keep them in a safe place.
- ❖ Arrange transport to the nearest healthcare facility or hospital.
- ❖ Do not put any medicine into the eye.
- ❖ Eye injuries have to be managed always with great care. Always refer these victims to the nearest healthcare facility or hospital.

Burns to other body parts

- ❖ Cool down the burn wounds. Use clean water. If there is no clean water available, use the available water. Pour water on the burn for 10-15 minutes or until the burn stops hurting. Do not use very cold water for cooling the burns. Burn victims can easily become hypothermic.
- ❖ If possible, wash your hands before taking care of the patient. Alcohol-based sanitizers can also be used, if available.
- ❖ Put on gloves if available. You can also use a clean plastic bag.
- ❖ Try not to touch the person's wounds.
- ❖ Cover burn wounds with a clean cotton cloth.

DROWNING AND FLOODS

Drowning is a type of suffocation induced by the submersion or immersion of the mouth and nose in a liquid.

Causes of drowning

- ❖ Not able to swim properly.
- ❖ Get panic inside the water.
- ❖ Near water bodies, leaving children to be unattended.
- ❖ Get fall from the thin ice.
- ❖ Increased consumption of alcohol during swimming or boating
- ❖ Seizure inside water
- ❖ The attempt of suicide

If a person is drowning you must follow these critical First Aid steps immediately;



- ❖ Remove the victim from the water as quickly and safely as you can
- ❖ If you don't suspect spinal injury, place the victim on the left side, so that water vomits out and secretions can drain from the upper airway
- ❖ Assess for breathing and pulse. If there is no breathing, establish an airway as rapidly as you can and begin ventilations
- ❖ If there is no pulse, begin chest compressions and perform CPR. Continue resuscitation until emergency team arrives

General Fainting and Unconsciousness of Students in the Classroom and Playground

Fainting occurs, when your brain temporarily doesn't receive enough blood supply, causing you to lose consciousness. This loss of consciousness is usually brief. It may be caused by a variety of factors including decreased blood sugar in the body, certain drugs, alcohol abuse, and complications related to the heart. Therefore, treat loss of consciousness as a medical emergency until the signs and symptoms are relieved, and the cause is known.

Signs and Symptoms of Fainting

- ❖ Sweating
- ❖ Face may appear pale
- ❖ Faster rate of heartbeat (palpitations)
- ❖ Nausea
- ❖ Dizziness or lightheadedness
- ❖ Loss of balance leading to falls
- ❖ Vision problems

If you feel that you are about to faint -

- ❖ **Lie down or sit down.** To reduce the chance of fainting again, don't get up too quickly.
- ❖ **Place your head between your knees,** if you sit down.

If someone else has fainted-

- ❖ **Position the person on his or her back.** If there are no injuries and the person is breathing, raise the person's legs above heart level – about 12 inches (30 centimeters) – if possible
- ❖ Loosen belts, collars or other constrictive clothing

- ❖ If there is any vomiting or bleeding from the mouth, turn the person onto their side, in order to prevent them from choking
- ❖ To reduce the chance of fainting again, don't get the person up too quickly. If the person doesn't regain consciousness within one minute, call local emergency number
- ❖ DO NOT move the person, if they have sustained any obvious neck or back injuries, while Fainting (or falling).

Check for breathing: Check airways for signs of breathing. If the person isn't breathing, begin CPR. Call your local emergency number. Continue CPR until help arrives or the person begins to breathe. If the person was injured in a fall associated with a faint, treat bumps, bruises or cuts appropriately. Control bleeding with direct pressure.

PREVENTING FAINTING

A few helpful tips to avoid/prevent fainting include:

- ❖ Take breaks when working for long periods of time
- ❖ Move your toes in your shoes slowly and frequently when standing for longer durations especially the cadets during their NCC Drills and parades
- ❖ Drink enough fluids (especially during summer), to avoid dehydration
- ❖ Never go to your class or playground empty stomach
- ❖ Check blood glucose levels regularly; particularly if you are prone to have abnormal blood glucose levels or having a family history
- ❖ Check blood pressures regularly, if you have a history of high or low blood pressures.

Indian Red Cross Society

The Indian Red Cross is a voluntary humanitarian organization having a network of over 1100 branches throughout the country, providing relief in times of disasters/emergencies and promotes health & care of the vulnerable people and communities. It is a leading member of the largest independent humanitarian organization in the world, the International Red Cross & Red Crescent Movement. The movement has three main components, the International Committee of Red Cross (ICRC), National Societies and International Federation of Red Cross and Red Crescent Societies.

The Mission of the Indian Red Cross is to inspire, encourage and initiate at all times all forms of humanitarian activities so that human suffering can be minimized and even prevented and thus contribute to creating more congenial climate for peace.

- ❖ Indian Red Cross Society (IRCS) was established in 1920 under the Indian Red Cross Society Act and incorporated under Parliament Act XV of 1920. The act was last amended in 1992 and of rules were formed in 1994.
- ❖ The IRCS has 36 State / Union Territories Branches with their more than 1100 districts and sub district branches.
- ❖ Honourable President of India is the President and Hon'ble Union Health Minister is the Chairman of the Society.
- ❖ The Vice Chairman is elected by the members of the Managing Body.
- ❖ The National Managing Body consists of 18 members.
- ❖ The Chairman and 6 members are nominated by the President. The remaining 12 are elected by the state and union territory branches through an electoral college.
- ❖ The Managing Body is responsible for governance and supervision of the functions of the society through a number of committees.
- ❖ The Secretary General is the Chief Executive of the Society.

Fundamental Principles of Red Cross

- ❖ **Humanity:** The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all people.
- ❖ **Impartiality:** It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being solely by their needs, and to give priority to the most urgent cases of distress.
- ❖ **Neutrality:** In order to enjoy the confidence of all, the movement may not take sides in hostilities or engage in controversies of a political, racial, religious or ideological nature.
- ❖ **Independence:** The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.
- ❖ **Voluntary service:** It is voluntary relief movement not prompted in any manner by desire for gain.
- ❖ **Unity:** There can be only one Red Cross or Red Crescent in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.
- ❖ **Universality:** The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.

Emergency Contact Numbers

- ❖ Ambulance Helpline (Punjab) -108
- ❖ Anti-Poison - 1066
- ❖ Centralised Accident & Trauma Services (CATS) -1099
- ❖ Fire Control Room -101
- ❖ Indian Red Cross Society (Amritsar) - 0183-2500598
- ❖ National Disaster Management Authority - 1078
- ❖ N.D.R.F Helpline Number - 011-24363260
- ❖ Police Control Room - 100
- ❖ Railway Accident Emergency Service - 1072
- ❖ Road Accident Emergency Service - 1073
- ❖ Tourist Helpline - 1363
- ❖ Traffic Police Helpline-1095
- ❖ Women's Helpline -1091
- ❖ Women's Helpline Anywhere in India (Domestic Abuse) -181



The **FIRST AID MANUAL** is
a comprehensive guide for treating
casualties of all ages in any emergency.
It is the essential book to keep accessible
at home, at work or in the car.

RESUSCITATION

D

DANGER

Check for danger to yourself, bystanders and the patient



R

RESPONSE

Check for response, talk and touch



S

SEND FOR HELP

Call for an ambulance or get another person to make the call



A

AIRWAY

Open Airway, Head Tilt/Chin Lift



B

BREATHING

Check breathing, if not breathing normally, Commence CPR



C

CPR

30 compressions: 2 breaths
(If unwilling or unable to do breaths, consider doing chest compressions only)



D

DEFIBRILLATOR

Attach AED as soon as possible and follow its prompts

