
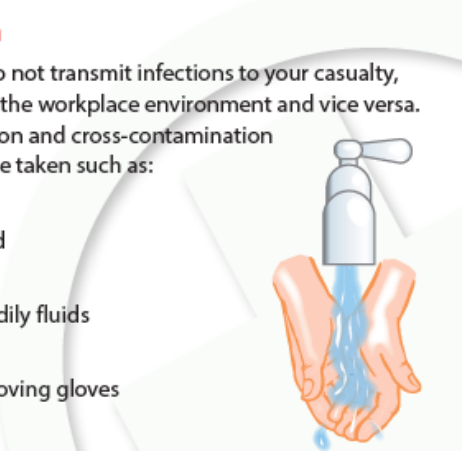


Paediatric First Aid Handbook

Twelfth edition: April 2022 ISBN: 978-1-912633-90-6

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April 2022

The following updates have been made to the twelfth edition of this publication.

Page No	Update comments
General	Terminology for bystander throughout the book has been updated to: Member or members of staff
5	<p>The responsibilities of the paediatric first aider has been updated to:</p> <p>The responsibilities of the paediatric first aider</p> <p>The responsibilities of the paediatric first aider will be dependent on the infant or childcare settings and their subsequent specific requirements. Responsibilities could include:</p> <ul style="list-style-type: none">⊕ preventing cross-contamination⊕ ensuring first-aid equipment is available to use and fit for purpose⊕ arriving at the scene⊕ assessing an incident and ensuring the scene is safe⊕ prioritising the treatment of casualties⊕ clearing up after an incident⊕ incident reporting and recording⊕ dealing with post incident stress 
5	<p>Minimising the risk of infection has been updated to:</p> <p>Minimising the risk of infection</p> <p>It is important that as a first aider you do not transmit infections to your casualty, work colleagues or other people within the workplace environment and vice versa. To assist in minimising the risk of infection and cross-contamination there are various precautions that can be taken such as:</p> <ul style="list-style-type: none">⊕ having good personal hygiene⊕ ensuring that barrier devices are used⊕ covering any open cuts or sores⊕ minimising contact with blood or bodily fluids⊕ changing gloves between casualties⊕ washing hands thoroughly after removing gloves 

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The information and contents of the first aid equipment has been updated as below:

First-aid equipment

Whenever infants and children are in your care there must always be a comprehensive first-aid kit available. First-aid kits should also be taken on outings and trips and also fitted in vehicles whenever they are being used to transport infants and children.

The content of the first-aid kit will be dependent on the assessment of first-aid needs that should be conducted. Considerations should include the number of infants or children, their age and ability, previous history of accidents and proposed or planned activities.



CONTENTS	Type of Kit															
	Leaflet	Contents list	Medium sterile dressing	Large sterile dressing	Triangular bandage	Eye pad sterile dressing	Sterile adhesive dressing	Alcohol free moist wipes	Adhesive tape roll	Nitrile gloves (pairs)	Finger sterile dressing	Resuscitation face shield	Foil blanket	Burn dressing	Shears	Conforming bandage
SMALL	1	1	2	2	2	2	40	20	1	6	2	1	1	1	1	1
MEDIUM	1	1	4	3	3	3	60	30	2	9	3	1	2	2	1	2
LARGE	1	1	6	4	4	4	100	40	3	12	4	2	3	2	1	2



8

The information in the acronym has been updated as follows:









Assessing an emergency situation safely

Conducting a scene survey

Upon arrival at an incident a scene survey must be conducted to ensure the safety of the infant or child, any members of staff and the first aider. The scene survey should be conducted by remembering the acronym **CLAP**.

- C** *Control the situation*
Stop, take a deep breath and take charge of others around you including infants and children.
- L** *Look for potential hazards*
Look for anything that could cause further harm to the infant or child, other members of staff or more importantly yourself within the immediate area.
- A** *Assess the situation*
Gather as much information about what has occurred from the child and other members of staff and try to make a diagnosis (history, signs and symptoms).
- P** *Protect and Prioritise*
Ensure protection is worn (gloves), and that casualties are prioritised (breathing, bleeding, bones/burns and other conditions). Try to gain assistance from other members of staff and contact the emergency services.

ACRONYM

14	<p>The wording for 'The recovery position: INFANT' has been updated to:</p> <p>The recovery position: INFANT</p> <p>If you have confirmed that the infant is breathing normally, but is unresponsive and is uninjured, call for an ambulance on 999. If help is available ask them to make the call; if no help is available call for an ambulance yourself, ensuring that you take the infant with you, held in the recovery position (1).</p> 				
15	<p>The wording for 'The recovery position: CHILD' has been updated to:</p> <p>The recovery position: CHILD</p> <p>When a child is breathing normally but is unresponsive/unconscious, and if uninjured, the next procedure would be to place them into the recovery position injured side down. This can be achieved even when the child is on their front or their side.</p> 				
24	<p>Recognising a choking infant or child has been updated to:</p> <p>Recognising a choking infant or child</p> <table border="0"> <tr> <td data-bbox="236 1010 280 1032">Mild</td> <td data-bbox="668 1010 735 1032">Severe</td> </tr> <tr> <td data-bbox="236 1043 635 1211"> <ul style="list-style-type: none"> ⊕ Coughing ⊕ Difficulty breathing and speaking (or making a sound in the case of an infant) ⊕ Redness of the face ⊕ Eyes enlarged and watering ⊕ Displaying distress </td> <td data-bbox="668 1043 943 1267"> <ul style="list-style-type: none"> ⊕ Grasping at the throat ⊕ Displaying distress ⊕ Unable to breathe or speak ⊕ Skin colour may develop a blue/grey tinge ⊕ Progressively getting weaker ⊕ Eventually they will become unconscious </td> </tr> </table>	Mild	Severe	<ul style="list-style-type: none"> ⊕ Coughing ⊕ Difficulty breathing and speaking (or making a sound in the case of an infant) ⊕ Redness of the face ⊕ Eyes enlarged and watering ⊕ Displaying distress 	<ul style="list-style-type: none"> ⊕ Grasping at the throat ⊕ Displaying distress ⊕ Unable to breathe or speak ⊕ Skin colour may develop a blue/grey tinge ⊕ Progressively getting weaker ⊕ Eventually they will become unconscious
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30	<p>Arterial bleeding and Venous bleeding have been updated as below (additional wording added highlighted):</p> <p>Types of external bleeding</p> <ul style="list-style-type: none">  ARTERIAL BLEEDING This is a bleed from an artery and will be bright red in colour (oxygenated blood). The blood will pump from the wound in time with the casualty's heartbeat. Arterial bleeding is a life-threatening condition.  VENOUS BLEEDING This is a bleed from a vein which will be dark red in colour (deoxygenated blood) and will gush or flow from the wound. Venous bleeding can be a life-threatening condition.  CAPILLARY BLEEDING This is a bleed that is red in colour and slowly oozes from the wound or from underneath the skin, for example, bruising. 				

The wording for the 3rd bullet for the 'treatment' of shock has been updated as highlighted:

- TREATMENT**
- ⊕ Call for an ambulance (**999**) immediately.
 - ⊕ Treat the cause if apparent (such as bleeding for example).
 - ⊕ If possible, lay the child down and raise their legs just above and in line with the level of their chest to increase circulation.
 - ⊕ Loosen tight clothing.
 - ⊕ Keep them warm with a blanket.
 - ⊕ Do not give them any fluids.
 - ⊕ Monitor their airway and breathing.

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