

Appendix 6: What to do in a medical emergency

Field teams should store copies of this document in first aid kits for referral in the event of a medical emergency. If in a group, uninjured parties should divide responsibilities. If you are alone, follow steps 1-6 to stabilize the patient(s).

1. **Call emergency services (e.g. 911) immediately.** Use your GPS unit or phone to provide location coordinates to the dispatcher. If you are out of cell phone service, your first priority is to stabilize the injured team member.
2. If an injured team member is conscious, **obtain consent to provide first aid** and include them in any treatment or evacuation decisions.
3. If you suspect a spinal injury and there is no imminent danger (fire, flood, landslide), **do not move the patient** and keep them as still as possible.
4. Follow the ABCDEs:
 - a. Check to make sure **Airways are clear**
 - b. Check for **Breathing** by listening or holding a mirror.
 - c. Check **Circulation** by feeling for pulse at neck or wrist
 - d. **Disability decision** - if you can't rule out a spine injury, keep them still
 - e. **Expose injuries** for treatment and apply pressure to active bleeding.
5. **Perform CPR immediately** if team member is unconscious and has no circulation
6. **Stop active bleeding immediately** by applying pressure and elevating the injured area, if possible. **Do not remove an object that has impaled a team member.** This could cause more severe bleeding; instead, wrap the wound and object so that it is secure and does not move. If you remove the object, don't put it back in.
7. Look, listen, feel, smell, and ask for **signs of more subtle injuries**, including bleeding, fluids, skin discoloration, or limb hardness, tenderness, or numbness.
8. **Check and record vitals** by using a watch or phone to time heart rate and breathing.
9. Take notes on the team member's **medical history and account of what happened**, including allergies, medications, and relevant medical history. Record the injured team members' responsiveness to questions, signs of disorientation, and skin color and temperature.
10. **Refer to the field medicine guide** for specific treatment advice. Record all treatments given and team member's response to treatments.
11. Once the injured team member is stabilized, you can make decisions on how to get the team member the fastest emergency medical services. If you are able to reach an emergency dispatcher, they can guide your decisions. If you cannot call emergency services, you will need to work with the field team to either get a medevac team for the

injured team member OR carry the injured team member to a road that is accessible to an emergency medical vehicle.