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# WHAT TO DO AT THE SCENE OF AN ACCIDENT

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Below are some interesting and thought-provoking statistics on road traffic accidents, illustrating the need to be prepared to deal with accidents:

- Every year some 60 000 road traffic accidents occur in the Cape
   Town Metropolitan area. Each year
   5 000 people are injured and 500
   die in road traffic accidents in this
   area. 500 people die every year in
   road traffic accidents in the Cape

   Town Metropolitan area.
- Of those who die, 55% are pedestrians. Of those injured, 32% are pedestrians. Of pedestrians injured, 40% are children.
- Most accidents occur at night and in winter and Friday is the worst day of the week for accidents.

It is the first, simple interventions that save lives. The first decision made, phoning the correct number for help, giving the exact location, opening the injured person's airway, stopping the bleeding — these are basic actions that can save a life. Acquiring emergency care skills does however require some training. Approach your local first-aid training organisation for advice; the duration of a basic course is about 20 hours. Be prepared!

# What do you do if you come across an accident?

If you are qualified in first aid, or if you are a nurse, doctor or paramedic and stop at an accident where the emergency services are already on the scene, introduce yourself and offer to help. You may be asked to identify yourself. Don't take offence — the emergency personnel are only trying to protect patients from people who pretend to be doctors. The following is a very simple way of remembering what to do, based on the system used to teach people how to do cardiopulmonary resuscitation (CPR):

# H H H A B C — Hazards — Hello — Help — Airway — Breathing — Circulation.

## Hazards

If you come across an incident/accident there are several dangers to yourself, other bystanders and the injured. Safety must be your first and primary consideration; don't go where angels fear to tread; fools rush in! If it's not safe then don't go near! Hazards making the scene unsafe can be classified as follows:

## With regard to the environment

- Electric wires. A pole may have been knocked over and the live wires may be lying exposed in the road. They should be avoided. The wires must not touch other metal objects.
- Fuel and fire. Petrol could easily ignite or explode and cause severe burns to bystanders and patients.
   Never ever smoke near an accident scene. Fire in a vehicle containing a patient is one of the few times that the patient should be moved from the vehicle with only basic

- prior spinal immobilisation.
- Poisonous substances. There are several poisonous substances being transported on trucks on our roads. Normally these are marked by hazardous substances warning diamonds. The best reaction to a hazardous substances spill is to get as far away from the spill as possible.
- out of the way of other traffic and try not to block access to the accident scene by other emergency services. Do not cross roads unless it is safe and keep a sharp lookout for oncoming traffic.
- Sharp metal. Sharp edges of metal on damaged vehicles could cause injuries.
- Vehicles. Vehicles balancing on the edge of a roadway or on other vehicles could topple over and crush you. Airbags may not have deployed during the accident and as soon as you enter the car and put weight on a seat or provide mechanical stimulus the bags could deploy severely injuring you. Be aware of un undeployed airbag, and of headrest or seatbelt mechanisms.
- People. People stopping unnecessarily or slowing down to look at accidents cause traffic congestion and increase the possibility of another accident.

# With regard to the patient

• Blood and secretions may cause hepatitis B and HIV infection. It is a good idea to carry a pair of latex protective gloves in your car so that you can protect yourself if you come in contact with blood. Another useful device to put in your first-aid kit, that protects you from secretions when doing CPR or mouth-to-mouth breathing, is a pocket mask (can be bought at your local first-aid supplier).

If you feel you can help, park well away from the scene and walk to the accident

#### Hello

Once at the accident scene you need to establish the following:

- Are there people who are injured?
- How many people are injured?
- Are any people unconscious?
- Are any people trapped in the motor vehicles?
- Are there any other special hazards?

# Help

Now, using the information mentioned above, call for help by phoning one of the following national emergency numbers — 10177 or 10111, or 112 on your cellphone, and

- identify yourself
- give a call-back number (in case you are cut off or they need more information later)
- give your precise location (the nearest cross street)
- say exactly what is wrong (e.g. motor vehicle accident, taxi and car, 12 people injured, 1 person trapped in the vehicle)
- answer any questions the call-taker may ask you
- try to create a picture in the calltaker's mind of what is actually happening on the scene — you are his/her eyes.

Once you have made the call send someone with a red rag to wave down arriving emergency services, because your exact location or the location of the accident may not be easily visible from the roadway. Now you can attend to the injured. A basic first-aid kit would be quite useful, so make sure you have one in the car. It need only contain the absolute basics, such as:

- wound dressings
- bandages
- latex gloves
- pocket mask

- triangular bandages or linen strips
- a few splints.

Now, faced with many injured people, you have to decide who to treat first, sorting according to a triage system. Unconscious people are the first priority because if they are lying on their backs they may choke and die. All unconscious persons should be turned on their side, taking care to keep the neck in line with the rest of the vertebral column. Once you have quickly run around and determined who the seriously injured are, you can begin to treat them first. In addition, when the emergency services arrive, you will be able to point out those who are the most seriously injured.

Now assess each patient's ABCs.

#### **Airway**

Is each person's airway open, is air able to pass through the mouth and nose and into the lungs? If the person is talking, his/her airway is open. Any noisy breathing means the airway is obstructed.

Unconscious people should be turned on their side; this will open the airway. If the person is sitting in the car with the head flexed forward, the airway is closed. Lift the head back until the eyes are looking forward and maintain this position until help arrives. This is best performed from behind the patient, i.e. from the back seat.

## **Breathing**

Check for breathing. If there is no breathing use your pocket mask to give rescue breaths — 1 breath every 5 seconds.

## Circulation

Check for bleeding. If there is bleeding, apply direct pressure with a dressing, towel or piece of material over the bleeding area and maintain the pressure. Don't remove the dressing bandage — keep it in place, ensuring that the bleeding has been controlled. Splint any fractures in the position of most comfort for the patient. Splinting a fracture reduces internal bleeding and pain.

Go from patient to patient, helping each in turn. It may be a while before emergency services reach you, especially if you are in a rural area. Once you have managed each patient, repeat the assessment process and reevaluate each person. There may have been changes, e.g. bleeding may have started again, the person may have become unconscious. Re-evaluate your HHHABC protocol. Hazards may be worsening, you may need to call the emergency services again and you will definitely need to reassess the injured constantly.

Lastly, but most importantly, prevention of accidents is a priority. Make your environment safe and don't drink and drive, dive, swim, fly, walk or do any activity where you place yourself or others at risk.

No amount of alcohol is safe — don't drink and drive!

EMERGENCY UNIT
EQUIPMENT — PROPER
PREPARATION IS
PARAMOUNT!

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The Constitution of the Republic of South Africa states 'No one may be refused emergency medical treatment'. The South African Constitutional Court defines an emergency as 'a dramatic, sudden situation or event which is of a passing nature in terms of time'. Health facilities, whether private or public, are required to provide emergency treatment.

In an emergency the public, whether as patients, family members or friends, expect health care professionals to perform quickly and skilfully, using