

# First-aid Program

Effective Date:  
Revision #:

# OSHA

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Prepared by:

Date:

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Date:

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# First-aid Program

Effective Date:  
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## Reference Standard

This procedure is developed in accordance with provisions as outlined in OSHA standard 29 CFR 1910.151 (First Aid Standard).

## Purpose

This policy establishes training and operational procedures that will be followed at to ensure prompt and knowledgeable treatment of injured employees, which will prevent minor injuries from becoming severe.

## Scope

This policy applies to all employees and all visitors or vendors.

## Responsibilities

The following responsibilities apply to various levels within the company.

Senior management will:

- Require the full application and integration of this policy into daily operations, as applicable, in all areas of responsibility and with all direct reports.
- Assess managers and supervisors on their ability to apply this policy in their areas of responsibility.

The Safety Administrator will administer all aspects of this policy to include:

- Maintaining and updating the written program as required.
- Coordinating necessary training for all affected employees.
- Providing necessary technical assistance to managers and supervisors.
- Periodically assessing the effectiveness of this program and its implementation in all affected areas of the company.

Managers and supervisors will:

- Know how this policy applies to their areas, and know which employees are trained to be first responders and when they require retraining.
- Decide where it is necessary and appropriate to place first aid kits in their areas and ensure that the kits are restocked after use.
- Integrate and enforce the provisions of this policy in their areas of responsibility.
- Periodically audit the effectiveness of this policy in their areas of responsibility.
- Coordinate training for all affected employees, including those that will become first responders.
- Provide appropriate coaching and corrective action when necessary to ensure this policy is fully integrated.

All affected employees will:

- Seek care when injured and report all work-related injuries to their supervisor. If hosting a guest, they will similarly report a guest injury.
- Follow all training, instructions and directives relative to this policy.
- Seek clarification whenever there are questions concerning the application of this policy into daily operations.

## Policy Evaluations and Updates

It is our goal to maintain a safety program that is understandable, effective and one that promotes a safe work environment. Any employee can make recommendations for improvement to this program or any other aspect of our safety system. These suggestions should be directed to any member of management, any safety committee member or to the safety administrator.

As a matter of policy, this program will be reviewed on an annual basis by the safety administrator to determine if all aspects still meet the needs of this organization. If there are significant events that take place during the year that indicate the program is less than effective, an immediate evaluation will be conducted and appropriate steps taken to increase the reliability of this plan.

Date of Review	Name of Reviewer	Changes Required Yes or No	Current Revision Number

## Definitions

The following definitions help clarify words or phrases found in this policy:

**Emergency:** An unplanned event that could jeopardize the safety of people or property in our facility. An emergency can originate on our site or off-site, and it has an impact on either the people within our facility or property.

**First Aid:** Emergency care provided for injury or sudden illness before emergency medical treatment is available.

**First Aid Injury:** An injury that can be adequately treated using topical wound cleaning, topical medications, ice, heat, nonprescription medications (at nonprescription strength), temporary splinting during transport, simple splinter removal or blister drainage, tetanus immunization, adhesive bandages or wound closures, non-rigid splints, irrigation for a foreign body and the use of eye patches or finger guards.

**First Aid Kit:** Medical supplies suitable for the provision of basic first aid.

**First Responder:** Employee of who has undergone first aid training and has been certified to administer first aid in the event of a medical emergency.

**Emergency Medical Treatment:** Treatment by a physician or other licensed health care professional, or treatment using prescription-strength medications. Immunizations besides tetanus, such as hepatitis B or rabies, are considered medical treatment.

## Procedure

### Overview

In many cases, prompt and knowledgeable treatment of injured employees prevents minor injuries from becoming major. will train personnel in basic first aid and bloodborne pathogens exposure. Only these trained individuals will respond to medical problems or medical emergencies.

### Injured Employees

Any employee injured on the job should immediately seek care and report their injury to a supervisor.

### Co-Workers of Injured Employees

Treatment and supplies can be administered only by designated, trained personnel. All incidents must be properly documented. You will find the following information listed: (INSERT SPECIFIC LOCATION(S) IN FACILITY)

- Names and departments of first aid workers
- Name and telephone number of company physician
- Name and telephone number of nearest hospital and ambulance service

If a co-worker is trained as a first responder, it is permissible to provide care using the nearest first aid kit. If untrained or uncomfortable providing care, co-workers should help locate another first responder on the premises. Co-workers may consider assisting the injured employee in getting transportation, seeking help or notifying management. When in doubt, co-workers should contact supervisors, first responders and emergency medical care.

### First Aid Supplies

First aid supplies should be monitored and restocked on a periodic basis. (SPECIFY NAME OF POSITION) will be responsible for choosing types and amounts of first-aid supplies and maintaining those supplies. The supplies will be adequate and will reflect the most common injuries in the facility. First aid cabinets or kits will be maintained in accessible places in all parts of the facility. They will be regularly stocked and monitored to ensure availability in the event of an emergency.

First aid kits include:

(INSERT CONTENTS BASED ON SPECIFIC NEED)

An automated external defibrillator (AED) is available for use by trained personnel; it is located (INSERT LOCATION).

### Emergency Eyewash Stations and Emergency Showers

Exposure to chemicals may happen even with good engineering controls and personal protective equipment (PPE) programs in place. To protect workers from serious injury, has installed emergency eyewash stations and emergency showers in the following locations:

(Work areas and operations that may require eyewash stations include battery charging areas, laboratories, high dust areas, spraying operations, dipping operations and hazardous substance dispensing areas. Employees should reach equipment in less than 10 seconds.)

(INSERT LOCATIONS)

(INSERT LOCATIONS)

The first 10 to 15 seconds after you are exposed to corrosive substances or hazardous chemicals are the most important for preventing serious injuries. Emergency eyewash stations and emergency showers

provide on-the-spot drenching facilities to allow workers to immediately wash away hazardous substances that might otherwise cause serious injury. Follow these guidelines to ensure that you receive the most protection possible from serious injury.

- Quickly remove contact lenses before using the eyewash station.
- Emergency showers and eyewashes should be used for a minimum of 15 minutes.
- If possible, notify a supervisor immediately.

All employees will receive training on the proper operation and location of the emergency eyewash stations and emergency showers at .

### **Transportation by Car**

There may be cases in which injured employees needing professional medical attention can be transported to the hospital or medical facility by car. However, in other cases, transportation by ambulance may be necessary. If there is any doubt about the appropriate mode of transportation, an employee must call an ambulance. The following are some examples of conditions that necessitate an ambulance:

- Employee is unconscious or in shock
- Hemorrhaging
- Severe abdominal cramps and/or vomiting
- An apparent fracture
- Other symptoms of internal injury

#### **Animal Bites**

Due to the possibility of rabies, all animal bites must receive prompt medical attention by a physician. In the event of a bite, every attempt to confine the animal should be made.

### **Cell Phone Use**

If the need for emergency medical services arises, personnel with cell phones may use them to call for assistance.

### **Medical Emergency**

In the event of a medical emergency, the following actions will be taken:

- Notify a member of management who will initiate the 911 notification system
- Evaluate scene safety – if there is any concern, all personnel should stay at a safe distance away from the scene
- Do not move the ill/injured person (unless s/he is in danger from their surroundings)
- Avoid all contact with blood and other bodily fluids
- Never attempt to provide first aid unless you are trained and equipped to do so
- A calm employee may stay with the ill/injured person to provide comfort
- The supervisor will assign at least two employees to wait for the EMS responders at the parking lot entrance and guide the responders to the scene of the emergency
- All uninvolved personnel should clear the area
- If there has been any blood or bodily fluid release, trained personnel will clean and sanitize the area after the emergency phase has concluded

## **Training**

First aid training will be administered by (Insert name of institution. OSHA recommends the American Red Cross®, the National Safety Council®, the American Heart Association® or other private institutions.)

Personnel designated to respond to medical problems or emergencies will receive training and periodic refresher courses (at least annually) in the following areas:

### **Preparing to Respond to a Health Emergency**

- Prevention as a strategy in reducing fatalities, illnesses and injuries
- Interacting with the local EMS system
- Maintaining a current list of emergency telephone numbers (police, fire, ambulance, poison control, etc.) accessible to all employees
- Understanding legal aspects of providing first-aid care, including good samaritan legislation, consent, abandonment, negligence, assault and battery, state laws and regulations
- Understanding the effects of stress, fear of infection or panic, how they interfere with performance and what to do to overcome them
- Learning the importance of universal precautions and body substance isolation to provide protection from bloodborne pathogens and other potentially infectious materials
- Learning how to properly use PPE, including gloves, eye protection, masks and respiratory barrier devices
- Learning proper management and disposal of blood-contaminated sharps and surfaces

### **Assessing the Scene and Victim(s)**

- Assessing the scene for safety, number of injured individuals and nature of the event
- Assessing the toxic potential of the environment and need for respiratory protection
- Establishing when a confined space necessitates respiratory protection or special training to perform a rescue
- Prioritizing care when there are several injured
- Assessing each victim for responsiveness, airway blockage, breathing, circulation and medical alert tags
- Taking a victim's history at the scene, including determining the mechanism of injury
- Performing a logical head-to-toe check for injuries
- Stressing the need to continuously monitor the victim
- Emphasizing early activation of EMS
- Indications for and methods

### **Responding to Life-Threatening Emergencies**

- Establishing responsiveness
- Establishing and maintaining an open and clear airway
- Performing rescue breathing
- Treating airway obstruction in a conscious victim
- Performing CPR
- Using an AED
- Recognizing the signs and symptoms of shock and providing first aid for shock due to illness or injury
- Assessing and treating a victim who has an unexplained change in level of consciousness or sudden illness
- Controlling bleeding with direct pressure

## **Poisoning**

- Ingested poisons: alkali, acid and systemic poisons and the role of the Poison Control Center (800-222-1222)

- Inhaled poisons: carbon monoxide, hydrogen sulfide, smoke, chemical fumes, vapors and gases
- Knowledge of the chemicals at the worksite and of first aid and treatment for inhalation or ingestion
- Effects of alcohol and illicit drugs so the provider can recognize the physiologic and behavioral effects of these substances

**Recognizing asphyxiation and the danger of entering a confined space without appropriate respiratory protection**

**Responding to Medical Emergencies**

- Chest pain
- Stroke
- Breathing problems
- Anaphylactic reaction
- Hypoglycemia in diabetics taking insulin
- Seizures
- Pregnancy complications
- Abdominal injury
- Reduced level of consciousness
- Impaled object

**Responding to Non-Life-Threatening Emergencies**

- Wounds
  - o Assessment and first aid for abrasions, cuts, lacerations, punctures avulsions, amputations and crush injuries
  - o Principles of wound care, including infection precautions
  - o Principles of body substance isolation, universal precautions and use of PPE
- Burns
  - o Assessing the severity of a burn
  - o Recognizing whether a burn is thermal, electrical or chemical and administering the appropriate first aid
  - o Reviewing corrosive chemicals at a specific worksite along with administering appropriate first aid
- Extreme Temperatures
  - o Exposure to cold, including frostbite and hypothermia
  - o Exposure to heat, including heat cramps, heat exhaustion and heat stroke
- Musculoskeletal Injuries
  - o Fractures
  - o Sprains, strains, contusions and cramps
  - o Head, neck, back and spinal injuries
  - o Appropriate handling of amputated body parts
- Eye injuries
  - o First aid for eye injuries
  - o First aid for chemical burns
- Mouth and Teeth Injuries
  - o Oral injuries, lip and tongue injuries, broken and missing teeth
  - o The importance of preventing aspiration of blood and/or teeth
- Bites and Stings
  - o Human and animal bites
  - o Bites and stings from insects, instruction in first-aid treatment of anaphylactic shock

## Evaluation

Employees undergoing the first aid training must pass written and practical tests before receiving certification as a First Responder.

## Frequency of Training

At a minimum, training will be conducted:

- Upon hire
- When this plan changes
- When employee duties change

## Training for Non-First Responders

Training will consist of:

- Methods of alerting employees of an emergency
- Employee duties upon discovering an emergency
- Evacuation routes and evacuation locations
- Procedures to be followed upon notification of emergency
- Special critical operations duties assigned to employees
- Operation and location of eyewash stations and emergency showers

## Recordkeeping

Some medical emergency procedures may be considered "medical treatment" for OSHA recordkeeping purposes. The OSHA Recording and Reporting Occupational Injuries and Illnesses regulation (29 CFR 1904) requires that if any procedure considered to be medical treatment is performed on an employee with an occupational injury or illness, then the injury or illness will be regarded as recordable on the OSHA 300 Log.

Each injury or illness that requires the administration of first aid by a first responder will be fully documented and investigated so as to prevent future incidents of a similar nature.

## Revision History Record:

Revision Number	Section	Revised By	Description
0	NA	NA	Original document.



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## First Aid Basics

### *Assisting the Injured*

An accident requires prompt action to help employees who are injured. For example, if you are in the company of one of your co-workers who trips and starts bleeding, your knowledge of simple first aid basics may be essential.

#### **Bleeding**

Should you or a co-worker receive a cut, the most important action is to stop the bleeding immediately. Have the victim lie down, then apply direct pressure on top of the wound with a sterile pad or the cleanest piece of cloth you can find. If the cloth becomes saturated with blood, keep adding more pads or cloth and secure them with a bandage.

If the wound is on an arm or a leg, and the blood flow is particularly hard to stop, you can try pressing on the brachial or femoral arteries to reduce the flow. Always seek immediate medical attention for any profuse bleeding.

#### **Chemicals**

You may also need to work with chemicals from time to time. Whenever possible, put on appropriate personal protective equipment (PPE), including goggles and gloves. Should chemicals get into the eye, use the emergency eyewash station. If one is not provided or nearby, dilute the chemical by pouring water into the eyes. Pour at least a quart of water into the corner of the eye so that it runs over the surface and flows out the other side.

If chemicals get onto the skin, wash the area repeatedly with large amounts of water. Remove any contaminated clothing. Check the label on the chemical to see if any additional steps should be taken.

Call 9-1-1 if dizziness, nausea, chest pains or shortness of breath are present.

#### **Particles**

If a foreign particle gets embedded into the eye, do not try to remove it like you would a chemical. Instead, have the victim lie flat, place a sterile pad over the eye, bandage it in place, and get medical help immediately. Avoid movement that could drive the particle deeper into the eye. If the particle is under the eyelid or floating on the surface of the eyeball, you can try removing it with the corner of a clean piece of cloth. But never rub the eye to get it out.

#### **Shock**

An accident often brings on a condition called shock. A person suffering from shock may exhibit the following symptoms:

- Weakness
- Confusion
- Cold, pale, clammy skin
- Nausea
- Vacant eyes with dilated pupils

To help someone in shock, place the victim on his/her back with feet elevated, unless head or chest injuries are present. Then, raise the head and shoulders with pillows. Next, place blankets over and under the body to conserve body heat. Don't administer any fluids unless expert medical help is delayed for at least 30 minutes. If that is the case, then give him/her half a glass of plain, lukewarm water every 15 minutes. Discontinue fluids if the person becomes nauseated.

Remember, first aid is the best immediate response to an injury, but you should always seek appropriate medical attention afterwards.



### **Know When to Go**

Brushing up on your first aid basics helps you to be prepared in the event of an unexpected workplace accident.

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# FIRST AID PROGRAM

## INSTRUCTOR NOTES

### Training Objectives

Review the first aid program at and remind employees what to do in the event of a workplace injury involving themselves or co-workers.

### Before Training

- Read the OSHA standard 29 CFR 1910.151 (Subpart K) or industry-specific first aid standards.
- Understand that this is an overview program and is not a substitute for the adequate training in first aid required by OSHA. Any employee designated to perform first aid needs hands-on instruction and oversight from an individual or organization that is qualified to provide first aid certification, including the American Red Cross®, the National Safety Council®, the American Heart Association® or other private institutions.
- Have examples of past injuries in which an employee's appropriate reaction helped emergency responders or prevented the injury from worsening.
- Identify the physical locations of emergency numbers and first aid kits.

### Introduction for Training

- Begin by stressing the overall importance of safety in your facility.
- Review with students the importance of staying calm and reacting quickly in the event of a medical emergency.
- Give examples of past injuries at and how they were handled.

### General Guidelines

- Stress the importance of the individual employee being committed to his/her own safety
- Be sure to be open to questions or comments.
- Clearly show employees the locations of emergency numbers and first aid kits.

### Conclusion

- Review the importance of safety in your facility.
- Encourage students to ask any final questions.

### Student Exercise

- Use the attached quiz to verify that students have retained the information.

### Quiz Answers:

- 1.) b 2.) d 3.) b 4.) d 5.) a 6.) a 7.) d 8.) b 9.) b 10.) b

# FIRST AID PROGRAM

## QUIZ

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Score: \_\_\_\_\_

### Place a checkmark on the line with the best answer for these 10 questions:

1. If you see that a co-worker has been injured, what is the best way to respond?
  - a.  Find the first aid kit and help the best you can.
  - b.  Contact a designated person that has undergone formal first aid training.
  - c.  Set off a fire alarm.
  
2. If there is an injury in the workplace, when should you call an ambulance?
  - a.  If the person is vomiting
  - b.  If there seems to be a broken bone
  - c.  If there is any doubt
  - d.  All of the above
  
3. What should you do if you are hurt while working?
  - a.  Locate the first aid kit and remedy the injury.
  - b.  Contact a supervisor or designated first aid provider.
  - c.  Leave the premises immediately.
  
4. Which of these is not necessarily true about the first aid kit?
  - a.  It must be easily accessible.
  - b.  It must be fully stocked.
  - c.  It must reflect common injuries at .
  - d.  Every employee must know how to use it.
  
5. Which of the following is not necessary after an animal bite?
  - a.  The person that has been bitten must get a tetanus shot if they don't already have one.
  - b.  The person that has been bitten must receive medical care.
  - c.  Every effort should be made to contain the animal.
  - d.  The person trained in first aid care should be contacted.
  
6. If the need for medical care arises, personnel with cell phones may use them to call for assistance.
  - a.  True
  - b.  False
  
7. When will training be conducted?
  - a.  Upon hire
  - b.  Once a year
  - c.  When procedures change
  - d.  All of the above
  
8. What is the best way to deal with injuries?
  - a.  Well-stocked first-aid kits
  - b.  Preventing them through good safety habits
  - c.  Good training
  
9. What is not necessary upon injury?
  - a.  Recordkeeping
  - b.  A hospital visit
  - c.  Attention by personnel trained in first aid
  
10. If you are injured, you may drive yourself to a medical facility.
  - a.  True
  - b.  False



