

CHAPTER 21

FIRST AID AND MEDICAL SERVICES PROGRAM

INTRODUCTION

Even though it is the intent of HTS AmeriTek to provide and maintain a workplace free of safety and health hazards, and to establish policies for safe work practices and procedures, and expect its employees to perform their work in a safe manner, the potential for accidents and injuries to occur still exists.

OSHA Regulation 29CFR1910.151 requires employers to provide prompt medical services and first aid prior to commencement of a project, and for injured or ill workers during the course of their employment. With this directive in mind, the following guidelines are being established, and its procedures will be effectively implemented by trained employees. Training on annual bases will be provided to all full time supervisors that may be required to render First Aid.

TRAINED PERSONNEL

There shall be at least one certified First Aid trained person on duty at all times, for HTS AmeriTek First Aid/CPR training will be provided by contract training resources that meets nationally recognized medical organization criteria.

EMERGENCY CONTACTS

Before work begins at this location, all employees will be made aware of all emergency phone numbers if needed for the transportation of injured personnel. These numbers are conspicuously posted at HTS AmeriTek offices, job-sites, or as communicated by various job-site Foremen. In the event of a serious injury requiring medical attention **other than minor First Aid**, only qualified, certified personnel shall manage the injured person until professional medical help has arrived. The following telephone numbers may be contacted for professional assistance:

See Following Attachments For All Offices:

NOTIFY APPROPRIATE MANAGEMENT

(Methods = 2-way radio & base station, telephone, or cell phone)

EMERGENCY ACTION

First aid measures are of extreme importance within the first few minutes for a worker that has incurred a serious or incapacitating injury. A primary assessment by an emergency responder will determine the nature and extent of the injury experienced. If you are assigned this responsibility, and before you initiate any action, take note of the immediate surroundings to make sure you don't become a victim yourself!

- Stay calm, take a deep, relaxing breath (possible adrenaline rush)
- Look for mechanisms or forces that caused this incident
- Be aware of environmental limitations (cold, heat, moisture)
- Control outside interference (traffic, crowds, bystanders)
- Check unknown hazards (gas, chemical, electrical, fire, explosion, lack of oxygen, radiation, weapons, etc.)

BODY BARRIERS AND FIRST AID KITS

Your goal is to protect yourself and your patient, utilizing disposable barriers consisting of latex disposable gloves, mouth-to-mouth barrier, eye-shield, mouth-covering and protective clothing if provided. This equipment for blood-borne pathogen protection is located with the First Aid Kits, which are located in the job Trailer at each job-site. The First Aid Kit consists of the following items, and is to be checked weekly by the job-site foreman, for items to be replenished. These kits are maintained on a monthly inspection basis by the safety department. You should notify the job-site foreman for requisition of any needed supplies. These Physician-approved First Aid kits shall be easily accessible, maintained in a serviceable condition, and are to be used for no other type of storage, inside or on top of the cabinet. Individual packaging and sealing shall be required only for those items, which must be kept sterile.

Stop after 4 cycles of compression/breathing and check pulse for 3 to 5 seconds. Continue compressions and breaths until restored or professional medical assistance arrives.

CHECK FOR AND CONTROL SERIOUS, PROFUSE BLEEDING. Use firm, direct pressure and a clean compress. Do not “peek” under a blood-soaked compress, as you will diminish any clotting that has occurred. Just add more compress bandages. Never apply a tourniquet. Elevation of the affected area, or applying pressure at a point directly above the affected area can also be effective in controlling blood loss.

CHECK FOR SIGNS OF SHOCK, such as:

- overall weakness, disorientation, confused, unresponsive, faint
- dizziness or nausea with possible vomiting
- restlessness, fear, or combativeness
- thirst
- breathing rapid and shallow
- skin cool and clammy, face pale and/or lips, tongue, earlobes blue
- eyes lackluster and pupils dilated
- pulse rapid and weak

All of these symptoms may present themselves at different times or in combinations, there is no set pattern. To combat these, have the patient lie down at rest, keep the airway open and control any external bleeding. Keep warm with coverings, but do not overheat. If the face is pale then elevate their legs 8-12 inches, if the face is red, then elevate the head and shoulders.

These are general guidelines to follow, unless fractures or spinal injuries are present, which will not allow for any elevation. Do not give the patient anything by mouth even if serious thirst is expressed. Monitor vital signs. You will most likely be unable to bring a patient out of shock, but you may be able to prevent shock or keep it from worsening by following the outlined procedures.

A person with a fracture must be treated carefully to prevent the injury from becoming worse and increasing shock potential. A fracture may be suspected if any of the following items are observed:

- abnormal shape of body part
- inability to move body part or extreme pain on movement
- swelling with skin color change

Utilize available materials to fashion a splint, and install this device on the limb in the position it was found. Do not attempt to realign anything

FIRST AID FOR BURNS, whether due to heat or cold are the same, by applying very cold water to the burned area. Do not attempt to remove materials stuck to the burned surface, and never apply oil, grease, butter or similar substances to a burned area. Cover with a loose dressing.

IF CHOKING IS OBSERVED, ask the person if they are choking, or observe them grasping for their throat, or skin color changing to blue. Approach the person from behind, wrapping your arms around the mid-section, just above the navel. Turn one hand with thumb knuckle into the stomach region and place the other hand over the first with the intent on thrusting together, up and inward into the abdomen. Perform a series of 5 abdominal thrusts with the intent on dislodging the object, unless the airway opens. If not, reassess patient airway, reposition hands and continue series of thrusts until successful.

WHERE THE EYES OR BODY of any employee may be exposed to injurious corrosive materials, suitable facilities shall be provided within the work area. HTS AmeriTek employees have access to eyewash fountain/deluge safety shower equipment located at various host-facility job-sites, and this equipment is routinely checked monthly by their respective Safety personnel. Flush eyes/body for a minimum of 15 minutes for corrosive exposures. When HTS AmeriTek employees are servicing accounts at host-facility work sites, they will be made aware of the presence and operation of that facility’s eye-wash/safety shower equipment during site-specific orientation.

ILLNESS ASSESSMENT would be performed based on the medical problems described by someone. A sign is something you see, hear, or feel, and a symptom is something the patient states. Illness assessment involves talking to the patient, and checking signs and symptoms.

- Check pulse (60 - 100 beats per min. in normal adult at rest)
- Check respiration (12 - 20 breaths per min.)
- Check body temperature (98.6 is normal)
- Check tissue color (look inside lips, under fingernails, lower eyelids)
- Ask patient how they feel
- Check medical history
- Ask about any medications being used
- Check for medical alert tags

CONCLUSION

Employees with known medical conditions or problems should disclose this information to their Job-site Foreman so immediate appropriate medical attention can be provided for instances of allergies, seizures, diabetes, cardiovascular conditions, respiratory problems, asthma, etc.

In the absence of a trained medical responder, the above mentioned guidelines can be implemented by a bystander as opposed to not participating and watching a person lose their life. This State provides for a Good Samaritan Law that protects you from civil liability if you act in good faith to provide care to the level of your training and to the best of your ability.

Actual consent must be stated or displayed by the victim before care can be initiated. Any refusal of care must be respected. A clear, informed victim’s decision must be made before you may proceed. If unconscious, confused, or so severely injured that a clear decision cannot be made, then implied consent is assumed and patient care initiated. Employee personnel files should list their family, address, phone number, next of kin, and personal physician name and phone number for any needed contact or support. Anticipatory orders from identified physicians should also be on file to cover emergency or routine care for special health problems.

Non-compliance by any HTS AmeriTek employee with any part of this described program will result in disciplinary action as outlined in the Company’s Corrective Action/Disciplinary Program found in Section 4 of this manual.

**HTS AmeriTek First Aid Kit
Minimum Contents Checklist Required in Rigs**

First Aid	Infection Control
72 pg. AMA First-Aid guide	1- Pair of latex gloves
1- Pair of scissors	1- Apron
10- Alcohol cleaning pads	1- Eye shield/face mask
10- Triple Antibiotic Ointment	1- Shoe cover
5- 2”x3” Non-stick pads with adhesive	1- Packet Red-Z absorbent
5- Knuckle bandages	1- 2oz bottle Sanitize disinfectant/cleaner
5- Finger bandages	2- Red Biohazard bags with twist ties
16 - ¾”x 3” Adhesive plastic bandages	1- Scraper
1- Latex gloves	1- Scooper
1- 4”x5” Instant cold compress	2- Paper towel
1-36”x51” Triangular sling/bandage (2) safety pins	1- Exposure report form
1- Disposable CPR mask	