



**Critical Emergency Care**  
Trauma & Medical Emergency Services

# FIRST AID ESSENTIALS

A practical guide for adults: what to do in the first minutes of an emergency, before the ambulance arrives.



**EMERGENCY? DIAL 920**

Free guide · Botswana edition

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## How to use this guide

Read it once now, when things are calm. Keep a copy at home, at work and in the car. In a real emergency, call **920** first and follow the call-taker's instructions.

Each topic tells you **what to look for**, **what to do** and **what not to do**.

## Important

This guide is general information. It is not a replacement for a hands-on first aid course. Skills like CPR are best learned by practising with a trainer.

Critical Emergency Care runs First Aid, Fire Prevention and SHE Rep courses. Contact us to book.



# BEFORE YOU HELP: STAY SAFE

In any emergency, follow **DRSABCD**. It keeps you safe and makes sure the most important things happen first.

**D**

Danger

**R**

Response

**S**

Send for help

**A**

Airway

**B**

Breathing

**C**

CPR

**D**

Defibrillator

- 1 Danger.** Check for traffic, fire, electricity, gas, deep water or aggressive animals. Don't become a second patient. Only move the person if staying put is more dangerous.
- 2 Response.** Talk loudly and squeeze their shoulders: *"Can you hear me? Open your eyes."* Are they awake, confused or not responding?
- 3 Send for help.** Call **920**, or get someone else to call while you stay with the person. Put the phone on speaker.
- 4 Airway.** If they don't respond, lay them on their back, tilt the head back gently and lift the chin. Look in the mouth and clear anything obvious.
- 5 Breathing.** Look, listen and feel for normal breathing for up to 10 seconds. Occasional gasps are **not** normal breathing.
- 6 CPR.** If they are not breathing normally, start CPR straight away (page 5).
- 7 Defibrillator.** If an AED (automated external defibrillator) is available, send someone to get it. Switch it on and follow the voice instructions.

## Protect yourself

- ✓ Use gloves if you have them, or a plastic bag over your hand
- ✓ Wash your hands afterwards
- ✓ Switch off car engines at a crash scene

## Never

- ✗ Touch someone in contact with electricity until the power is off
- ✗ Enter water, fire or smoke to rescue someone unless trained
- ✗ Leave a person who is not breathing

# CALLING 920

Stay calm and speak clearly. Don't hang up until the call-taker tells you to. They can guide you through first aid while the crew is on the way.

## Tell us

- **Where you are:** street, ward, plot number, landmarks. On WhatsApp you can share a location pin.
- **What happened**, and how many people are hurt
- Is the person **awake**? Are they **breathing normally**?
- Any **dangers**: fire, traffic, chemicals
- Your **phone number**, in case we get cut off

## Help the crew find you

- Send someone to the road to wave the ambulance in
- Switch on outside lights at night
- Unlock gates and tie up dogs
- Have the patient's ID, medication and medical papers ready

## The recovery position

Use it for someone who is **breathing normally but not responding**, with no suspected spinal injury. It keeps the airway open and lets fluid drain from the mouth.

- 1 Kneel beside them. Place the arm nearest you at a right angle to their body, elbow bent, palm up.
- 2 Bring the other arm across the chest and hold the back of that hand against their cheek nearest you.
- 3 With your other hand, bend the far knee up so the foot is flat on the ground.
- 4 Pull on the bent knee to roll them towards you onto their side, keeping the hand pressed to the cheek.
- 5 Tilt the head back slightly to keep the airway open. Adjust the top leg so hip and knee are at right angles.
- 6 Keep checking their breathing until help arrives. If breathing stops, roll them onto their back and start CPR.

### Suspected spinal injury?

After a fall from height, a crash or a diving accident, keep the person still with their head in line with the body. Only roll them if you must keep the airway clear, and ideally with helpers keeping the head, neck and body in line.



# CPR: CARDIOPULMONARY RESUSCITATION

If someone is **not responding and not breathing normally**, their heart has probably stopped. CPR pumps blood to the brain until help arrives. **Any attempt is better than none.**

**30 : 2**

compressions : breaths

**Push hard and fast in the centre of the chest:** 100 to 120 compressions a minute (to the beat of a fast song), about 5 to 6 cm deep for adults. Let the chest come all the way back up between pushes.

## Adults

- 1** Call **920** and send for an AED if there is one.
- 2** Kneel beside the person. Put the heel of one hand in the centre of the chest, on the lower half of the breastbone. Put your other hand on top and interlock your fingers.
- 3** Keep your arms straight, shoulders over your hands, and press down 5 to 6 cm. Release. Repeat 30 times.
- 4** If you're trained and willing: tilt the head, lift the chin, pinch the nose and give 2 breaths, each lasting about 1 second, watching the chest rise.
- 5** Continue 30 compressions to 2 breaths. **Not trained, or unwilling to give breaths? Do continuous chest compressions only.**
- 6** Don't stop until the person starts breathing normally, an AED tells you to pause, a medic takes over, or you're too exhausted to continue. Swap with a helper every 2 minutes if you can.

### Children (1 year to puberty)

Give **5 rescue breaths** first if you are trained. Then 30 compressions to 2 breaths, using one or two hands, pressing about one third of the chest depth (about 5 cm).

### Babies (under 1 year)

Give **5 gentle breaths** covering the baby's mouth and nose with your mouth. Then 30 compressions with **two fingers** in the centre of the chest, about 4 cm deep, then 2 breaths.

### Using an AED

Switch it on and follow the spoken instructions. Stick the pads on the bare chest as shown on the pads. Make sure nobody touches the person when it analyses or shocks. Continue CPR as soon as it tells you to.



# CHOKING

## Mild choking

They can cough, speak or breathe.

**Encourage them to keep coughing.** Don't hit their back while they are coughing well. Stay with them.

## Severe choking

They can't cough, speak or breathe, may clutch their throat, or are turning blue. **Act immediately.** Get someone to call 920.

## Adults & children over 1 year

- 1 **5 back blows.** Lean them forward. Support the chest with one hand and give up to 5 firm blows between the shoulder blades with the heel of your other hand. Check after each one if the blockage has cleared.
- 2 **5 abdominal thrusts.** Stand behind them, put your arms around the upper belly. Make a fist and place it between the belly button and the bottom of the breastbone. Grasp it with your other hand and pull sharply **inwards and upwards**, up to 5 times.
- 3 Repeat 5 back blows and 5 thrusts until the object comes out or they become unresponsive.
- 4 If they become unresponsive, lower them to the ground, call 920 and **start CPR**.

## Babies under 1 year

- 1 **5 back blows.** Lay the baby face down along your forearm or thigh, head lower than the body, supporting the head and jaw. Give up to 5 firm blows between the shoulder blades.
- 2 **5 chest thrusts.** Turn the baby face up along your arm, head low. Using two fingers on the centre of the chest, give up to 5 sharp downward pushes.
- 3 Repeat until the object comes out. If the baby becomes unresponsive, call 920 and start baby CPR.

## Never

- ✗ Give abdominal thrusts to a baby under 1 year
- ✗ Sweep blindly in the mouth with your fingers; only remove an object you can clearly see

## After abdominal thrusts

Anyone who has had abdominal thrusts should be checked by a medical professional, as they can cause internal injury.



# SEVERE BLEEDING & SHOCK

Heavy bleeding can kill within minutes. Stopping it is one of the most important things a first aider can do.

- 1 **Call 920.** Put on gloves if you have them.
- 2 **Press hard on the wound** with a clean pad, cloth or your hand. Keep pressing firmly and don't keep lifting it to look.
- 3 If blood soaks through, **add another pad on top** and press harder. Don't remove the first one.
- 4 Bandage the pad firmly in place, but not so tight that fingers or toes go cold or blue.
- 5 Help them lie down, and keep them warm and still.

## Object stuck in the wound

Leave it in. It may be plugging the bleeding.  
Press around it, and pad either side of it before bandaging.

## Life-threatening bleeding from an arm or leg

If firm pressure doesn't control it and you have a tourniquet and have been trained, apply it 5 to 7 cm above the wound and note the time.

## Shock

Shock is when not enough blood reaches the organs. It can follow heavy bleeding, burns, severe allergy or serious injury, and it is life-threatening.

### Look for

- Pale, cold, clammy skin
- Fast, weak pulse and fast, shallow breathing
- Dizziness, thirst, confusion, anxiety
- Grey-blue lips

### What to do

- ✓ Call 920 and treat the cause, such as bleeding
- ✓ Lay them down; raise the legs if there's no leg injury
- ✓ Loosen tight clothing and keep them warm
- ✓ Reassure them and keep checking breathing

### Don't

- ✗ Give anything to eat or drink
- ✗ Leave them alone



# BURNS & SCALDS

## 20 min

cool running water

**Cool the burn under cool or lukewarm running water for 20 minutes** as soon as possible. It is the single most helpful thing you can do, and it still helps up to 3 hours after the burn.

- 1 Stop the burning: get away from the heat source. If clothes are on fire: **Stop, Drop and Roll**, or smother the flames with a blanket.
- 2 Cool the burn with running water for 20 minutes. Keep the rest of the person warm.
- 3 Remove rings, watches and loose clothing near the burn before it swells, unless they're stuck to the skin.
- 4 Cover loosely with cling film (laid on, not wrapped tightly) or a clean, non-fluffy cloth or plastic bag.
- 5 Get medical help for any burn larger than the person's palm, any burn to the face, hands, feet, genitals or joints, any deep burn, and any burn on a child or older person.

### Never put on a burn

- ✗ Ice or iced water
- ✗ Butter, oil, toothpaste, egg or creams
- ✗ Fluffy cotton wool or sticky plasters

And don't pop blisters.

### Chemical burns

Brush off dry powder first, then rinse with lots of running water for at least 20 minutes. Remove contaminated clothing carefully. Call 920.

### Electrical burns

Switch off the power first. Electrical burns can look small but damage deep inside. Always call 920.

### Fire at home

Get everyone out, stay out, and call for help. Crawl low under smoke. Feel doors with the back of your hand before opening; if hot, use another way out.



# BROKEN BONES, SPRAINS & HEAD INJURIES

## Broken bones (fractures)

**Look for:** pain, swelling, bruising, a limb at an odd angle, not being able to move it.

- 1 Keep the injured part still. Support it in the position you found it, with your hands, padding or a sling.
- 2 Don't try to straighten it.
- 3 For an open fracture (bone through the skin), cover the wound with a clean dressing and press around, not on, the bone.
- 4 Call 920 for leg, hip, pelvis or open fractures, or if the person is in shock.

## Sprains & strains

Follow **RICE** for the first 48 hours:

**R**est the injury

**I**ce: a cold pack wrapped in cloth, up to 20 minutes at a time

**C**omfortable support, such as a bandage that isn't too tight

**E**levate the injured part

If you aren't sure whether it's broken, treat it as a fracture and get it checked.

## Head injuries

Most bumps to the head are minor. Sit the person down and hold a cold pack to the bump for up to 20 minutes. Keep watching them for the next 24 hours.

### Call 920 if they

- Were knocked out, even briefly
- Are drowsy, confused or hard to wake
- Vomit more than once
- Have a severe or worsening headache
- Have a fit (seizure)
- Have blood or clear fluid from the ears or nose
- Have weakness, numbness or trouble speaking
- Were hurt in a fall from height or a road crash

### Neck or back injury

If a neck or back injury is possible, tell them not to move. Kneel behind their head and hold it steady in line with the body until the crew arrives.



# HEART ATTACK & STROKE

## Heart attack

A blocked artery stops blood reaching part of the heart muscle. Fast treatment saves heart muscle and lives.

### Look for

- Chest pain, pressure or tightness that may spread to the arms, neck, jaw, back or stomach
- Shortness of breath
- Sweating, nausea, dizziness, pale skin
- Women, older people and people with diabetes may have milder or unusual symptoms

### What to do

- 1 Call **920** immediately.
- 2 Sit them down, ideally half-sitting with knees bent, and keep them calm.
- 3 If they're an adult and not allergic, the call-taker may advise them to **chew one 300 mg aspirin** slowly.
- 4 Help them take their own angina medication if they have it.
- 5 If they stop responding and breathing normally, **start CPR**.

## Stroke: think F.A.S.T.

A stroke happens when blood supply to part of the brain is cut off. Every minute counts.

# F

Face: has their face fallen on one side? Can they smile?

# A

Arms: can they raise both arms and keep them there?

# S

Speech: is their speech slurred or confused?

# T

Time: call 920 straight away. Note the time symptoms started.

### While you wait

- Keep them comfortable and supported. If they become drowsy but are breathing, place them in the recovery position.
- Don't give them anything to eat or drink. Swallowing may be affected.
- Tell the crew exactly when the symptoms began. It affects which treatments are possible.



# ASTHMA, ALLERGIES, SEIZURES & DIABETES

## Asthma attack

Wheezing, coughing, tight chest, difficulty breathing or speaking.

- 1 Sit them upright and keep them calm.
- 2 Help them use their reliever inhaler (usually blue), ideally through a spacer: 1 puff every 30 to 60 seconds, up to 10 puffs.
- 3 Call 920 if there's no improvement, if they get worse, or if they're exhausted or turning blue.

## Severe allergic reaction (anaphylaxis)

Swelling of the face, lips or tongue, difficulty breathing, wheeze, hives, feeling faint, collapse. It can follow insect stings, foods or medicines.

- 1 Call **920**.
- 2 If they have an adrenaline auto-injector (such as an EpiPen), help them use it into the outer thigh.
- 3 Let them sit up if breathing is hard, or lie flat with legs raised if they feel faint.
- 4 A second dose can be given after 5 minutes if there's no improvement.

## Seizures (fits)

- 1 Move hard or sharp objects away and cushion their head.
- 2 Don't hold them down, and **never put anything in their mouth**.
- 3 Time the seizure.
- 4 When it stops, put them in the recovery position and stay with them.
- 5 Call 920 if it lasts more than 5 minutes, it's their first seizure, they're injured, they don't wake up, or another seizure follows.

## Low blood sugar (diabetes)

Shaking, sweating, hunger, confusion or odd behaviour, pale skin.

- 1 If they're awake and can swallow, give them something sugary: fruit juice, a regular fizzy drink, glucose tablets or sweets.
- 2 When they feel better, give a snack such as a sandwich.
- 3 Call 920 if they don't improve within 15 minutes, or if they become drowsy or unresponsive. **Don't give food or drink to someone who can't swallow safely.**

## Fainting

Lay them down and raise their legs. Loosen tight clothing and give fresh air. They should recover within a minute or two. If not, call 920 and check their breathing.



# SNAKES, SCORPIONS & POISONING

## Snakebite

Botswana has dangerous snakes, including the black mamba, puff adder, Mozambique spitting cobra and boomslang. **Treat every snakebite as an emergency.**

### Do

- ✓ Move away from the snake and call 920
- ✓ Keep the person calm, lying down and as still as possible; movement spreads venom
- ✓ Keep the bitten limb still, at about heart level, with a splint or sling
- ✓ Remove rings, watches and tight clothing before swelling starts
- ✓ Remember the snake's colour and shape, or photograph it from a safe distance
- ✓ Get them to hospital as fast as possible; carry them if you can

### Don't

- ✗ Cut the wound or try to suck out venom
- ✗ Use a tight tourniquet
- ✗ Apply ice, chemicals or traditional remedies
- ✗ Try to catch or kill the snake
- ✗ Give alcohol or let them walk if you can avoid it

## Spitting cobra venom in the eyes

Rinse the eyes immediately with lots of clean water (or milk if there's no water) for at least 15 minutes. Don't rub them. Get medical help.

## Scorpion stings

Wash the sting, apply a cold pack and keep the person still. Thick-tailed scorpions with small pincers tend to be the most dangerous. Call 920 for children, older people, or anyone with muscle twitching, drooling, difficulty breathing or swallowing.

## Bee & wasp stings

Scrape the sting out sideways with a fingernail or card, then use a cold pack. Watch for signs of anaphylaxis (page 11).

## Poisoning

Swallowed medicines, chemicals, paraffin, pesticides or poisonous plants.

- Call 920 and say what was taken, how much and when. Keep the container.
- If chemicals are on the skin or in the eyes, rinse with running water.
- **Don't make them vomit** and don't give milk or salt water unless told to.
- If they become unresponsive, check breathing and be ready to start CPR.



# HEAT, WATER & NOSEBLEEDS

## Heat exhaustion

Heavy sweating, headache, dizziness, nausea, cramps, tiredness.

- ✓ Move them to a cool, shady place
- ✓ Lay them down and raise their legs
- ✓ Give water or an oral rehydration drink
- ✓ Cool their skin with wet cloths and fanning

## Heatstroke: an emergency

Hot skin, confusion, strange behaviour, collapse or seizures. Sweating may have stopped.

- ✓ Call 920
- ✓ Cool them fast: wet the skin with cool water and fan them, and place cold packs in the armpits, neck and groin
- ✓ If they become unresponsive, check breathing and be ready to give CPR

## Prevent heat illness

Drink water regularly, even before you feel thirsty. Avoid hard work or sport in the hottest part of the day, wear a hat and light clothing, and check on babies, older people and outdoor workers. **Never leave a child or animal in a parked car.**

## Drowning

- 1 Don't go in unless trained.** Reach with a stick or towel, or throw something that floats. Call 920.
- 2** Once they're out of the water, check breathing. If they're not breathing normally, give **5 rescue breaths** first if you're trained, then start CPR.
- 3** Anyone rescued from drowning must go to hospital, even if they seem fine.

## Nosebleeds

Sit them down and **lean them forward**, not back. Pinch the soft part of the nose just below the bony bridge for 10 to 15 minutes without letting go, while they breathe through the mouth. Get medical help if the bleeding lasts more than 30 minutes, follows a blow to the head, or the person takes blood-thinning medication.



# ROAD SAFETY & SEATBELTS

Many of the emergencies our crews attend start on the road. The best first aid is preventing the injury in the first place.

## Buckle up, every trip

Seatbelts greatly reduce the risk of death and serious injury in a crash, for front and back seat passengers alike. Unbelted passengers can be thrown into others or out of the vehicle.

- Lap belt **low across the hips**, not the stomach
- Shoulder belt **across the chest and collarbone**, never under the arm or behind the back
- One person per belt, every trip, however short
- Pregnant women: lap belt below the bump, shoulder belt between the breasts

## Children in cars

- Babies ride in a **rear-facing** car seat, for as long as the seat allows
- Toddlers move to a forward-facing seat with a harness
- Older children use a **booster seat** until the adult belt fits properly, usually around 135 to 150 cm tall
- Children under 12 are safest in the **back seat**
- **Never** put a rear-facing baby seat in front of an active airbag
- Never hold a child on your lap while driving

## Never ride in the back of a bakkie

People in an open load area have no protection in a crash or rollover.

## Animals on the road

Watch for livestock and wildlife, especially at dusk and at night. Slow down on rural roads.

## Helmets save lives

Motorcyclists and cyclists should always wear a properly fitted, fastened helmet.

## At a crash scene

- 1 Park safely, switch on hazard lights and put out a warning triangle.
- 2 Switch off the engines of the crashed vehicles. No smoking.
- 3 Call 920. Don't move injured people unless there's immediate danger such as fire.
- 4 Support the head of anyone with a possible neck injury, and treat severe bleeding.



# YOUR FIRST AID KIT

Keep one kit at home and one in every vehicle. Check it every 6 months and replace anything used or out of date. Tick off what you have:

- |                                                               |                                                                   |
|---------------------------------------------------------------|-------------------------------------------------------------------|
| <input type="checkbox"/> Disposable gloves (several pairs)    | <input type="checkbox"/> Blunt-ended scissors and tweezers        |
| <input type="checkbox"/> Sterile dressings in assorted sizes  | <input type="checkbox"/> Instant cold packs                       |
| <input type="checkbox"/> Adhesive plasters in assorted sizes  | <input type="checkbox"/> Foil emergency blanket                   |
| <input type="checkbox"/> Crepe or roller bandages (2 or more) | <input type="checkbox"/> CPR face shield or pocket mask           |
| <input type="checkbox"/> Triangular bandages (for slings)     | <input type="checkbox"/> Digital thermometer                      |
| <input type="checkbox"/> Sterile gauze swabs                  | <input type="checkbox"/> Antiseptic wipes                         |
| <input type="checkbox"/> Adhesive tape                        | <input type="checkbox"/> Oral rehydration sachets                 |
| <input type="checkbox"/> Cling film (for burns)               | <input type="checkbox"/> Pain relief (for adults; read the label) |
| <input type="checkbox"/> Saline or sterile eye wash           | <input type="checkbox"/> Torch with spare batteries               |
| <input type="checkbox"/> Safety pins                          | <input type="checkbox"/> Pen, notepad and this guide              |

## Extra for the car

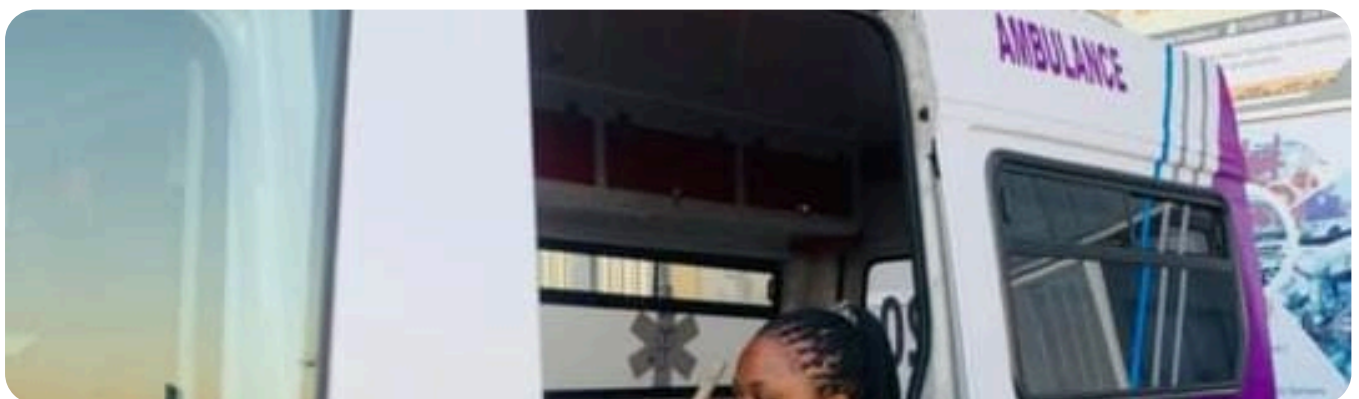
- Warning triangle and reflective vest
- Fire extinguisher
- Bottled water
- Phone charger

## Personal medicines

Keep a list of everyone's medicines and allergies with the kit. Keep inhalers and auto-injectors where they can be reached fast.

## Keep medicines locked away

Store all medicines and chemicals up high, out of sight and reach of children, in their original containers.



# EMERGENCY CONTACT CARD

Fill this in and keep it by the phone or on the fridge. In an emergency, it gives you and the crew the information you need, fast.

## In an emergency

**DIAL 920**

 Our address / plot number
 

---

 Nearest landmark
 

---

 Contact person 1 & phone
 

---

 Contact person 2 & phone
 

---

 Family doctor & phone
 

---

 Nearest clinic / hospital
 

---

 Medical aid name & number
 

---

 Blood groups
 

---

## Household medical information

 Name · medical conditions · medicines · allergies
 

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## Other numbers

 Police
 

---

 Fire service
 

---

 Electricity / water
 

---

 Workplace / school
 

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# LEARN IT. PRACTISE IT. SAVE A LIFE.

Critical Emergency Care offers hands-on First Aid, Fire Prevention & Management and SHE Representative training for workplaces, schools and community groups.

EMERGENCIES 24/7

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This guide gives general first aid information and does not replace professional medical advice or a certified first aid course.  
Always follow instructions from the 920 call-taker and emergency crews.