

Medical Emergencies

THE 3 C's OF FIRST AID



If you find yourself in an emergency that requires quick action, follow the **three Cs: Check, Call** and **Care**.

Check

First, survey the scene for any possible hazards. If the area appears safe, check the victim for life-threatening conditions such as:

- Unconsciousness
- Labored or obstructed breathing
- Severe bleeding
- Loss of circulation

Call

After checking for the victim, call 911. Remain calm and be prepared to give a description of the situation as well as the exact location where responders are needed.

Also, contact local site security and emergency response.

Care

Based on the level of training you have and the equipment and supplies available, provide what care you can until medical personnel arrive. Remember, do not attempt CPR or other techniques without the proper training.

PROCEDURES

The overall components of AEG Vision's medical emergency plan are as follows:

A medical emergency is defined as an incident that requires interventions beyond simple first aid available at the facility to stabilize a condition that may result in a serious medical outcome. Conditions include, but are not limited to, excessive bleeding that is unable to be controlled, accidents involving serious injury, failure or obstruction of the respiratory system, failure of the circulatory system, chest pain or severe abdominal pain, loss of consciousness unrelated to predictable seizure activity, or any type of distress that is determined to seriously limit an individual's normal level of daily functioning.

When an event occurs that is determined to be an emergency health care incident, 911 will be immediately called to access emergency personnel to assist and transport the individual to appropriate medical services.

In the event the patient refuses emergency treatment/ambulance, ...

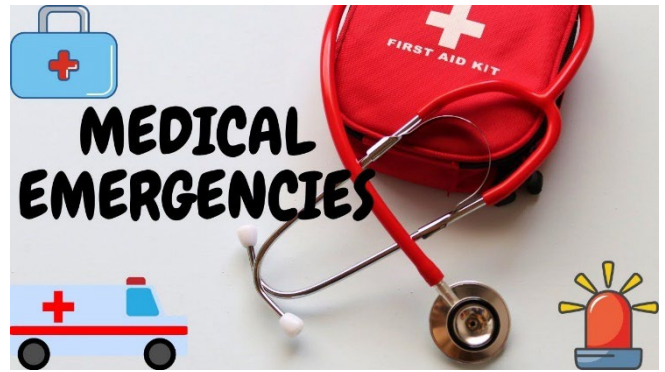
AEG Vision's Critical Incident Checklist will be followed for all medical emergency events.

If determined to save a life and/or support the stabilization of a serious and acute medical condition, staff members who hold current certification in CPR and First Aid, and/or opioid overdose prevention (including the use of Narcan in specific states) will implement CPR and/or First Aid and overdose prevention procedures, when appropriate, to stabilize a condition prior to the arrival of external emergency personnel.

If the individual is a patient, the following information may be shared with the transporting emergency technicians:

Name, address, and telephone number of the physician to be called, if available.

- Name, address, and telephone number of a relative or other person to be notified in the event of an emergency, if available.
 - Medical insurance company name and policy number, or Medicaid/



Medicare number, if available.

- Information concerning the use of medication, known medication allergies, and significant medical problems, if available.

Associates and Doctors will not transport individuals in their personal vehicles and/or AEG Vision's vehicles in emergency health care situations.

Following containment of the emergency, a progress note will be completed in the record of the person served and a Critical Incident Report form will be completed.

If the emergency involves an Associates and Doctors, contact will be made with the emergency contact person named on the Associates and Doctors' employment application, if requested to do so by the Associates and Doctors. Contact will always be made if the Associates and Doctors is incapacitated and unable to request or deny the contact.

In the event of a poisoning or drug ingestion that has caused an acute medical emergency, staff members will call 911. The telephone number of the local poison control center will be prominently posted at each Practice location. The American Association of Poison Control Centers National Hotline is 1-800-222-1222. All Associates and Doctors will be orientated to the location of this information.

Medical clearance must be obtained in writing from the treating physician prior to Associates and Doctors returning to employment duties if a medical emergency requires a response from emergency responders.

CHECKLIST

FIRST-AID KIT

SPECIAL NOTE:

This document presents the minimum requirements for workplace first-aid kits and supplies as outlined in the current OSHA regulations. Although these regulations reference the 1998 ANSI standard, employers should know that ANSI updated these standard multiple times, most recently in 2015.

FIRST-AID SUPPLIES	COMPLETED
Absorbent compress, 32 square inches (81.3 square centimeters) with no side smaller than 4 inches (10 centimeters)	<input type="checkbox"/>
Adhesive bandages, 1 inch x 3 inch (2.5 centimeters x 7.5 centimeters)	<input type="checkbox"/>
Adhesive tape, 5 yards (457.2 centimeters) total	<input type="checkbox"/>
Antiseptic, 0.5 grams (0.14 fluid ounces) applications	<input type="checkbox"/>
Burn treatment, 0.5 grams (0.14 fluid ounces) applications	<input type="checkbox"/>
Pairs of medical exam gloves	<input type="checkbox"/>
Sterile pads, 3 inches x 3 inches (7.5 centimeters x 7.5 centimeters)	<input type="checkbox"/>
Triangular bandage, 40 inches x 40 inches x 56 inches (101 centimeters x 101 centimeters x 142 centimeters)	<input type="checkbox"/>