

# Electrical Shock Survival

Remember...

Electric shock may stun and stop the victim's breathing. Delay in rescue and resuscitation may be fatal.

## Isolate the electricity

**Low voltage (240/415):** Immediately switch off the electricity. If this is not practicable, pull or push the casualty clear of the electrical contact using dry non-conducting material (wood, rope, clothing, plastic or rubber). Do not use metal or anything moist.

**High Voltage:** Wait until the electricity is turned off.

## Rescue

After rescue, if the patient is not breathing, commence artificial respiration immediately and continue without interruption for hours if necessary. When assistance is available, send for a doctor and an ambulance.

## Artificial respiration

The air we breathe out contains ample oxygen to sustain life. Lay the patient on their back. If this is not possible, commence artificial respiration where the patient is.

## Revival of children

Care must be exercised to avoid over inflation. This can damage the child's lungs and will lead to inflation of the stomach.

## Action plan

The information provided in this section is based on the action plan "DRABC".

In an emergency, it is necessary to have an action plan, one that will work every time, regardless of the type of incident. The action plan is called DRABC. Each letter of the DRABC plan stands for something the rescuer must do and the order in which it must be done.

Figure 1 sets out the DRABC action plan. It includes:

- D Danger
- R Response
- A Airway
- B Breathing
- C Circulation

Figure 1 shows the order of priority and the appropriate time for the control of bleeding and the care of the unconscious casualty (the coma position).

### **D Danger** - Check for danger to:

- Yourself
- Bystanders
- The casualty
- Do not become the next casualty
- Warn bystanders of any danger and ask them to keep a safe distance
- Action only if safe to do so
- Remove danger from the casualty or, if necessary, the casualty from danger

If unsafe, wait for the expert assistance to arrive.

### **R Response** - Check for response:

- Gently shake and loudly shout
- If the casualty responds, check and control serious bleeding
- If no response, proceed with ABC

### **A Airway** – Firstly:

- Support head and neck and roll casualty onto side
- Clear and open airway
- Tilt and support head

## **B Breathing** - Look, listen and feel:

- Is the lower chest or abdomen rising and falling?
- Can you hear breathing sounds?
- Can you feel breathing?

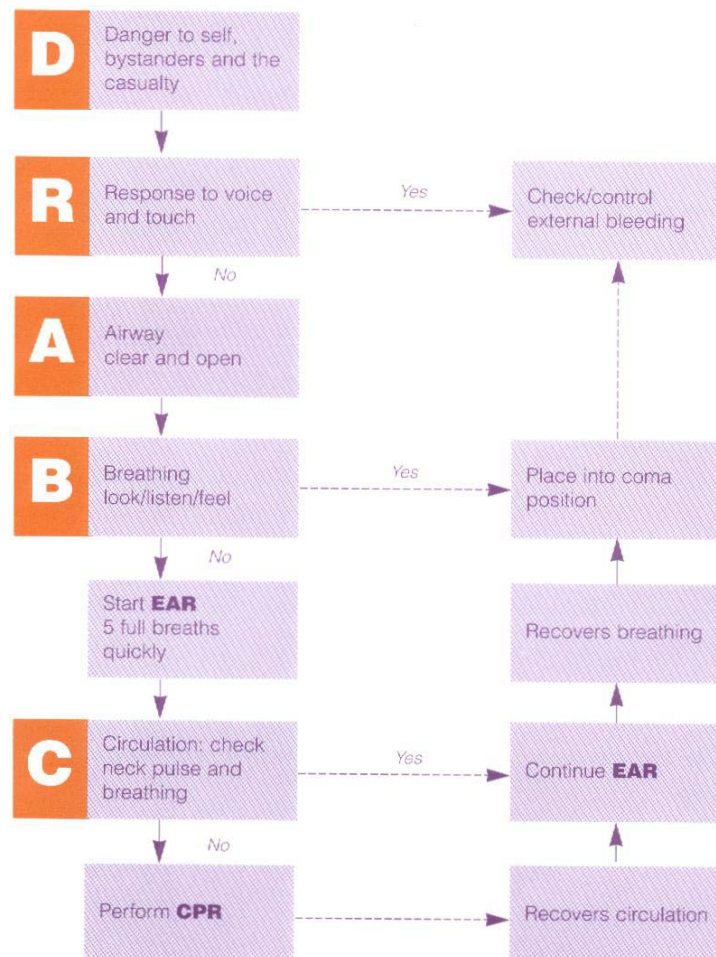
Then:

- If the casualty is breathing but not responding, place into coma position
- If the casualty is not breathing, start expired air resuscitation (EAR); turn the casualty onto back, do five full breaths quickly within 10 seconds and proceed with DRABC action plan.

## **C Circulation** - Check for pulse:

- If present, continue EAR at about one breathe every 4 seconds (15 per minute)
- If absent, start cardio-pulmonary resuscitation (CPR)

**Figure 1: The DRABC Action Plan**



# Rescue Procedure

The victim suffers severe electric shock

## Danger

Check for your safety - Check for your own safety and the safety of the casualty and bystanders.

## Isolate the electricity

**Low voltage (240/415):** Immediately switch off the electricity. If this is not practicable, pull or push the casualty clear of the electrical contact using dry non-conducting material (wood, rope, clothing, plastic or rubber). Do not use metal or anything moist.

**High Voltage:** Wait until the electricity is turned off.

## Response

Check for response, gently shake and loudly shout, if no response, then:

### Airway

#### Step 1

Turn the casualty on their side as for coma position. Open the mouth and check for any obstructions. If present, clear, and then open airway.



### Breathing-Ear

#### Step 2



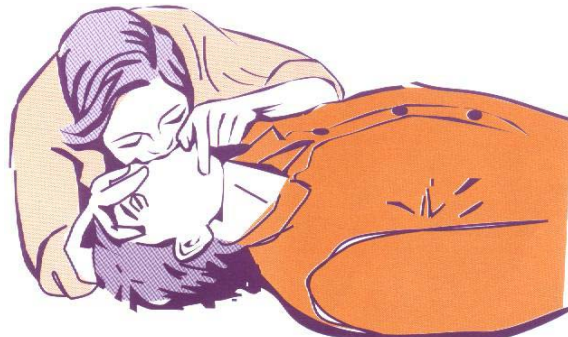
Check breathing for 10 seconds. Listen for breathing, look for chest movement, feel for breathing on your hand.

#### Step 3

If no breathing-place the casualty on his/her back and give:

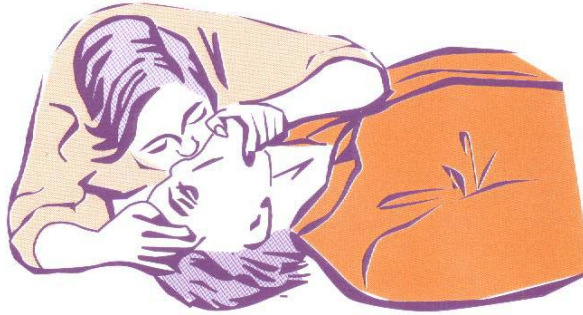
### A Mouth to mouth resuscitation

- Tilt head back and raise chin forward
- Pinch the casualty's nose
- Place your mouth over the casualty's mouth
- Blow into the casualty's mouth



## B Mouth to nose resuscitation

- Close casualty's mouth
- Lift and tilt chin
- Blow into the casualty's nose



Give 5 quick breaths. Check for breathing and circulation for 5 seconds.

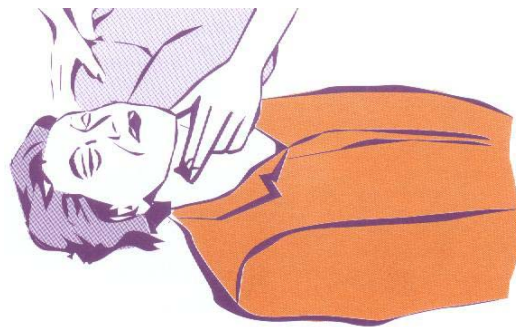
If pulse is present, but not breathing, give 1 breath every 4 seconds until the casualty starts to breathe or medical help arrives.

**Note:** For children under 2 years of age, place your mouth over the casualty's nose and mouth.

## Circulation - CPR

### Step 4

Check carotid pulse for 5 seconds.



If pulse absent:



Position hands on lower half of breastbone.

### Step 5

#### Single operator



Give 15 heart compressions in 10-12 seconds followed by 2 full breaths in 2 to 3 seconds. Depress the breastbone 50mm at the rate of 60 compressions per minute.



### Two operators

Give 5 heart compressions then a quick breath without interrupting the rhythm, at the rate of 60 compressions per minute.

**Note:** Check the pulse after the first MINUTE and then every two minutes. When the pulse returns, continue mouth-to-mouth resuscitation until breathing returns.



### Step 6

#### Coma position

When the casualty's pulse and natural breathing returns, cease resuscitation and move the casualty into the COMA position. Keep a constant watch on the casualty, to ensure they do not cease breathing again, until trained assistance takes over.

