



# **Jurisprudence package**

Obtaining First Aid Certification  
in British Columbia

July 2025

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# Introduction

## Recognition of out-of-jurisdiction certificates

In order to comply with the New West Partnership Trade Agreement (NWPTA) and the Canadian Free Trade Agreement, WorkSafeBC has implemented a process for accepting the credentials of workers trained or certified in other Canadian jurisdictions to meet regulatory compliance in British Columbia.

### **New West Partnership Trade Agreement (NWPTA, formerly TILMA)**

Under the NWPTA, British Columbia, Alberta, Saskatchewan, and Manitoba are the first jurisdictions in Canada to commit to full mutual recognition or reconciliation of their rules affecting trade, investment, or labour mobility. The goal is to remove barriers to the free movement of goods, services, investment, and people within and between the provinces.

### **Canadian Free Trade Agreement (CFTA)**

One of the purposes of the CFTA is to eliminate or reduce measures that restrict labour mobility in Canada. To that end, the B.C. government agreed to recognize workers already certified in another province or territory (i.e., certified, licensed, or registered by a regulatory authority) as eligible for certification in B.C.

Labour mobility occurs when certified workers from other jurisdictions are able to practice their chosen occupation without any additional training, experience, examinations, or assessments.

Workers' compensation law in B.C. is described in the [Workers Compensation Act](#) and its related regulations. WorkSafeBC administers the [Act](#) for the Ministry of Labour. In accordance with the labour mobility requirements in the agreements outlined above, WorkSafeBC will recognize any worker who has current certification in an occupation from a Canadian regulatory authority as qualified to work in B.C., provided the following conditions are met:

- The certificate is a condition of employment under the Act and/or the Occupational Health and Safety Regulation.
- The competencies related to the out-of-jurisdiction certification apply to competencies required for the same work in B.C.
- The worker complies with the WorkSafeBC out-of-jurisdiction registration application process for the occupation.

In B.C., the certification process for first aid attendants relies on training providers recognized by WorkSafeBC who provide training, give examinations, and issue certificates under the authority of the Act.

This jurisprudence package references all the relevant sections of the Act, OHS Regulation, guidelines, and policies that govern the administration of first aid services to workers in industries that fall under the jurisdiction of WorkSafeBC. In addition, this package includes guidance regarding an effective first aid program in industry and describes the expected role of the first aid attendant.

To help you prepare for employment as a first aid attendant, this package consists of reading assignments and written exercises that identify the key points of the reading assignments. Appendix F provides answer keys.

## Pathways for out-of-jurisdiction documents

### Documents that may be required for submission to their employer

Student	Application	Out-of-jurisdiction package
RN or RPN		X
EMALB licence holder (EMA, EMR, PCP, ACP, PCP)		X

### Documents required for submission to an approved WorkSafeBC training provider

	Application	Out-of-jurisdiction package
Out-of-province first aid certificate holder	X	X

## B.C. emergency medical assistant (EMA) licence holders

EMA licences issued by the B.C. Emergency Medical Assistants Licensing Board (EMALB) are recognized as alternative qualifications for first aid attendants at the following levels:

- First responder (EMA FR) — Intermediate first aid certificate with transportation endorsement
- Emergency medical responder (EMR) — advanced first aid certificate
- Primary care paramedic (PCP) — advanced first aid certificate
- Advanced care paramedic (ACP) — advanced first aid certificate
- Critical care paramedic (CCP) — advanced first aid certificate

In accordance with the requirements of the Act and the OHS Regulation, employers who wish to use an EMA licence holder as a first aid attendant must ensure that the licence holder has a working understanding of their responsibilities as a first aid attendant. To meet these requirements, employers may elect to do one of the following:

- Have a first aid attendant with alternative qualifications complete this jurisprudence package before commencing work.
- Provide on-the-job training that covers the topics outlined in the jurisprudence package.
- Have documented evidence that the EMA licence holder previously completed the jurisprudence package.

### **Operational scope of EMALB licence holders**

EMALB licences used in industry are subject to operational limitations (refer to the *EMALB Position Statement on Operational vs. Legal Scope of Practice*). Workplaces that employ EMAs are expected to restrict the legal scope of practice of EMA licence holders so it aligns with the competencies listed in CSA standard Z1210-17 for advanced first aid attendants (see Appendix G), unless medical oversight by a physician registered with the College of Physicians and Surgeons of British Columbia is in place, along with supplemental written procedures. Operational scope should clarify the following:

- First aid attendants may not administer prescription drugs or medications. Attendants may help workers self-administer medication for which they have a prescription if the patient provides a letter from their physician.\* First aid attendants may provide injured workers with non-prescription (over-the-counter) medications purchased by the employer for use at the worksite, if appropriate to do so.\*
- First aid attendants must initiate immediate transfer to hospital for any injured worker who meets rapid transport criteria.\*

\* Review the over-the-counter provisions within the Advanced First Aid — Training and Resource Manual.

For EMA licence holders who provide their service as first aid attendant to multiple employers, it may be easier to verify these requirements by holding a recognized first aid certificate. On written request from a current EMA licence holder to a first aid training provider recognized by WorkSafeBC, an unrestricted first aid certificate may be issued if the requirements above are met.

First aid certificates issued under this section will have a three-year expiry date from the application date.

## Registered nurses (RNs) and registered psychiatric nurses (RPNs)

Registered nurses (RNs) and registered psychiatric nurses (RPNs) are trained in wound care and basic lifesaving interventions as part of the licensing competencies required by the British Columbia College of Nurses and Midwives (BCCNM).

RN and RPN licences issued by the BCCNM will be recognized as acceptable alternatives to an intermediate first aid certificate in health care facilities directly operated by B.C. health authorities or Providence Health Care. This provision is limited only to facilities in the following health care classification units (CUs):

- 766001 — Acute care
- 7660011 — Long-term care
- 766019 — Short-term care

This recognition is non-transferable to health care settings operated by other employers or other CUs.

RNs and RPNs working in health care facilities outside of those specifically listed above may obtain an intermediate first aid certificate without attending a first aid training course by providing an approved first aid training provider with the following:

- A written request from a health care employer requesting that an intermediate first aid certificate be issued to the individual
- Evidence that the individual holds a valid RN or RPN licence issued by the BCCNM
- Documented evidence that the individual has reviewed and completed the [jurisprudence package](#) or received equivalent training from the employer
- Documented evidence that the individual had successfully completed a Basic Life Support course within the past three years

Intermediate first aid certificates issued to nurses in this manner are not transferable to other industries and are restricted for use in health care facilities in the following CUs.

Classification unit (CU)	Description
766002	Alcohol or Drug Treatment Centre
766006	Community Health Support Services
766008	Dentistry or Ancillary Dental Services
766011	Long-Term Care
766012	Massage Therapy (licensed)
766013	Optometry
766014	Physiotherapy or Occupational Therapy
766017	Residential Social Service Facility
766018	Retirement Home or Seniors' Home
766019	Short-Term Care
766020	Supplementary Health Care

Nurses are obligated by the professional standard of their licence to function only within their level of competence. Employers who wish to use registered nurses as first aid attendants must first ensure that the nurse:

- Is willing to act in the capacity of a first aid attendant
- Confirms that they have been trained in the knowledge and skills associated with intermediate first aid attendants (see Appendix G)
- Has operational capacity to fulfill the duties required by section 3.21 of the OHS Regulation

# Part 1: General duties and first aid certification

## Objectives

After completing this part, you will be able to do the following:

- List the general duties of employers.
- List the general duties of workers.
- List the general duties of supervisors.
- Describe the required training for first aid certification and how such certification is granted.
- Describe the maintenance of first aid certification.
- Describe the conditions under which a first aid certificate may be suspended or cancelled.

## Reference and reading assignment

[Workers Compensation Act:](#)

- Part 2, [Division 4](#), sections 21 to 24
- Part 2, [Division 8](#), sections 55 and 56
- Part 2, [Division 12](#), section 96

For searchable versions of the Act, the Occupational Health and Safety Regulation, policies, and guidelines, go to [worksafebc.com/law-policy](https://www.worksafebc.com/law-policy), then click "[Search OHS Regulations, Policy, Standards & Guidelines](#)."

## Exercise 1

The following questions review the key points from Part 1 of this guide so you can assess your level of knowledge.

In order to ensure the health and safety of all workers, the employer must:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_
- h. \_\_\_\_\_

In order to take reasonable care to protect a worker's health and safety and that of others, every worker must:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_
- h. \_\_\_\_\_

The prime contractor or owner of a multiple-employer workplace must:

- a. \_\_\_\_\_
- b. \_\_\_\_\_

Regarding the certification and training of first aid attendants and instructors, WorkSafeBC may:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

If an employer fails, neglects, or refuses to install or maintain first aid equipment or service, WorkSafeBC may:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

WorkSafeBC has the authority to cancel or suspend a certificate or place a condition on its use if the person who holds the certificate has:

- a. \_\_\_\_\_
- b. \_\_\_\_\_

## Part 2: Regulatory requirements and worksites

### Objectives

After completing this part, you will be able to do the following:

- Describe a first aid attendant's regulatory authority and responsibilities.
- Determine the first aid service required for various worksites.
- Explain the WorkSafeBC standard governing first aid attendants.
- Describe emergency preparedness and response for worksites.
- Describe a biological agent exposure control plan for first aid attendants.
- Describe the OHS Regulation governing exposure to heat and cold.
- Describe evacuation and rescue regulations for worksites.

### Reference and reading assignment

[OHS Regulation:](#)

- [Sections 3.14 to 3.21](#)
- Sections [3.27 to 3.28](#) and [Schedule 3-A](#)
- [Sections 4.13 to 4.16](#)
- [Section 5.54](#)
- [Sections 5.97 to 5.102](#)
- [Sections 6.33 to 6.40](#)
- [Sections 7.32 to 7.38](#)
- [Part 32](#)

[OHS Guidelines:](#)

- [Guidelines G3.15 to G3.21](#)

Jurisprudence package:

- Appendix B: Exposure control plan for biological agents for first aid attendants

## Exercise 2

The following questions review the key points from Part 2 of this guide so you can assess your level of knowledge.

The \_\_\_\_\_ is responsible for ensuring each workplace has equipment, supplies, facilities, first aid attendants, and services.

The employer must prepare an annual written assessment of the circumstances of the workplace that sets out at least the following information:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_

A first aid assessment has been conducted indicating that a less-accessible, high-hazard workplace with eight workers is one hour from an ambulance station. Which of the following is required under the OHS Regulation for first aid supplies, equipment, and service?

- a. Basic first aid kit, emergency transport vehicle (ETV) and equipment, and a basic first aid attendant with a transportation endorsement
- b. Intermediate first aid kit, ETV and equipment, and an intermediate first aid attendant with a transportation endorsement
- c. Advanced first aid kit, ETV and equipment, and an advanced first aid attendant
- d. Advanced first aid kit and two advanced first attendants

List what must be included in the written procedures for providing first aid required for every workplace in B.C.:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_
- h. \_\_\_\_\_

The employer must provide an effective means of communication between the first aid attendant and:

- a. \_\_\_\_\_
- b. \_\_\_\_\_

Access to the first aid records may be required for which of the following reasons:

1. Medical referral and treatment
2. Workplace inspections
3. Incident investigations
4. Claims processing and appeals
5. Gathering of statistics for the workplace health and safety program

Circle one of the following:

- a. 1 and 3
- b. 2 and 4
- c. 3 and 5
- d. All of the above

The first aid attendant is responsible and has full authority for all first aid treatment of an injured worker until responsibility for treatment is accepted at or by:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

A first aid facility may be used for purposes other than first aid if:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

List the inappropriate conduct that may warrant suspension of first aid certification under Policy D12-96.

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_
- h. \_\_\_\_\_

In order to comply with the requirements of prompt care, first aid attendants must be able to:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

Mark each statement either "T" for true or "F" for false.

	The employer must not assign, and the first aid attendant must not undertake, employment activities that will interfere with the attendant's ability to receive and respond to a request for first aid.
	With regard to unplanned absences of the first aid attendant, an absence of up to approximately one shift is permissible until a replacement attendant is in place.
	Attendants must have their certificate at the workplace and must produce the certificate or licence for inspection at the request of a WorkSafeBC officer.
	An employer may accept a picture of a first aid certificate as acceptable proof of certification without any other form of validation.
	A worker's direct supervisor cannot overrule an attendant's decision regarding when or if an injured worker is transported to medical aid.
	The first aid attendant has the authority to overrule a worker's decision to seek medical treatment.
	If a worker has or may have occupational exposure to a biological agent, the employer must develop and implement an exposure control plan.
	Upon request, the employer must offer first aid attendants hepatitis B vaccinations at no cost to them.

Under section 4.13 of the OHS Regulation, what is required if a risk assessment for a workplace shows a need for evacuation or rescue?

- a. \_\_\_\_\_
- b. \_\_\_\_\_

Under section 5.100 of the OHS Regulation, written evacuation procedures appropriate to the risk must be developed and implemented to:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

## Part 3: First aid programs and record keeping

### Objectives

After completing this part, you will be able to do the following:

- Explain the components of a first aid program.
- Describe how a first aid attendant can maintain knowledge and skills.
- Describe the elements of the workplace emergency response procedures for an attendant.
- Describe professional conduct for a first aid attendant on a worksite.
- Explain the scope of occupational first aid training.
- Explain the advantages of the first aid record for the worker, employer, and first aid attendant.
- Describe when a first aid record is required.
- Describe the rules governing confidentiality for the first aid record.
- Describe the interaction between a first aid attendant and a supervisor as related to the first aid program.
- Describe the interaction between an attendant and the joint health and safety committee.

### Reference and reading assignment

[OHS Regulation:](#)

- [Part 5](#)
- [Part 32](#)

Jurisprudence package:

- Pages 14 to 22
- Appendix A: Preparing for a first aid job
- Appendix E: First aid report to health and safety committee
- Appendix G: First Aid Training Levels, competencies, requirements

## Introduction to occupational first aid

First aid attendants perform a unique service in industry. They alleviate suffering and can save lives through their skills at an incident scene. Furthermore, their effective injury management can often shorten the healing time of an injury, allowing the worker to resume normal activities sooner.

Attendants in industry must be well trained in all aspects of emergency care, from minor injury management to the most serious trauma care involving airway, breathing, and circulatory emergencies. Consequently, attendants in industry are required to take on more responsibility than students who take public first aid courses. Frequently, the attendant must decide when to refer the injured worker to medical attention. Many minor injuries can be properly treated by a well-trained attendant without referral to a physician. In isolated work locations, because of weather conditions or transportation restrictions, the attendant may be required to provide care to an injured worker for many hours or even overnight. This puts an added burden on attendants and emphasizes the need for them to be trained in a well-rounded first aid course.

### First aid program

A first aid program is more than the sum of its parts. A first aid program is based on respect for the injured worker. It aims to minimize pain and suffering and promote healing. A first aid program requires that all workplace parties — workers, attendants, supervisors, and the joint health and safety committee — fulfill their responsibilities.

[Section G3.16](#) of the OHS guidelines explains the process for determining first aid coverage. This guideline provides a step-by-step method that employers can use to determine which table in [Schedule 3-A Minimum Levels of First Aid](#) applies to them. It also describes the additional factors that must be considered when determining first aid services.

For the purposes of this guideline, the term first aid services includes first aid equipment, supplies, facilities, and first aid attendants.

### Basic requirements

Section 3.16 of the OHS Regulation describes first aid requirements for employers. Employers must determine the minimum levels of first aid based on the employer's hazard rating, location and nature of workplace, and number of workers. When considering basic first aid requirements, employers must consult with the joint committee or worker health and safety representative. Employers must prepare a written first aid assessment that meets the requirements of section 3.16(2) of the OHS Regulation.

Even if an employer complies with section 3.16, it does not mean that an effective first aid program is assured. A first aid program does more than comply with the wording of the OHS Regulation. An effective program will do the following:

- Keep injured workers at work when appropriate.
- Promptly refer those who must be seen by a doctor.
- Yield documentation that directly contributes to prevention activity at the workplace and patient follow-up care.

## Support for the first aid program

The effectiveness of a first aid program in the workplace is dependent on the co-operation of the attendant, the employer, and the workers.

All workplace parties have a role to play in contributing to the effectiveness of the first aid program.

### Role of the employer

Employers play a critical role in ensuring the success of the first aid program. For the program to succeed, employers must provide support by ensuring that the following conditions are fulfilled:

- The attendants must be given the facilities, equipment, and supplies necessary to perform their duties.
- Workers must be directed to report to first aid in case of injury.
- The employer must allow first aid attendants adequate time and support to perform their duties.
- The employer must not overrule an attendant's decisions regarding a worker's injuries.

### Role of the worker

In order to benefit from the protection offered by the first aid program, workers must know how and when to use the program. All workers at the workplace must ensure they know:

- Who the first aid attendants are
- Where the attendants and first aid supplies and services are located
- How to summon an attendant to each work location

Furthermore, workers must understand their responsibility to take the following actions once an injury has occurred:

- Report all injuries to their supervisor and the first aid attendant as soon as possible.
- Provide the attendant with all the information required, and allow the attendant to conduct assessments and render treatments.
- Follow the attendant's instructions regarding injury care. For example:

- Keeping dressings clean and dry.
- Applying cold (a cold agent cooler than the skin, such as an ice pack or cold pack) as directed.
- Avoiding certain activities, as directed.
- Engage in alternative duties that are suggested by the attendant or supervisor and provided by the employer.
- Report back to the attendant for reassessment and re-dressing as instructed.
- Report to medical aid as directed.

### **Role of the joint health and safety committee**

The joint health and safety committee plays an important role in the oversight and maintenance of the first aid program. The joint committee should establish a systematic review process that includes the following:

- Providing input into the preparation and review of workplace first aid assessments
- Analyzing the monthly injury report taken from the first aid record
- Making informed recommendations for change if necessary
- Ensuring workers are provided with follow-up care
- Ensuring the reporting system contributes to or initiates incident investigations
- Ensuring that incident investigations evaluate the first aid response
- Identifying and promoting alternative duties
- Supporting workers' right to be cared for at work, if injured at work

### **Role of the first aid attendant**

First aid attendants are critical to the first aid program. In order for the program to succeed, attendants must do the following:

- Maintain knowledge and skills.
- Be prepared.
- Conduct themselves professionally.
- Stay within their scope of training.
- Document incidents thoroughly.
- Report to the supervisor and joint health and safety committee as necessary.

## Duties of the first aid attendant

These duties are outlined in further detail in the following sections.

### Maintain knowledge and skills

All attendants must maintain current certification, keeping in mind the following:

- All B.C. first aid certificates are valid for a maximum of three years.
- No extensions are granted.
- Authorizations to apply protocols overseen by a medical director (e.g., practising to the scope of an EMA licence) may differ in duration.
- Out-of-jurisdiction first aid certificates may be valid for up to three years.

Attendants must be trained as follows in the use of employer-supplied equipment beyond the level of their previous training:

- When a first aid attendant is expected to use a piece of first aid equipment that the employer is obligated to supply and that is not covered in the first aid training the attendant received, the employer is responsible for ensuring that training related to the piece of equipment is provided. The length of the course or training session should be adequate to cover all the elements required to integrate its use into first aid protocols and ensure safe use in the workplace. Assessment must include evaluation of practical competencies and may also include a written test that assesses knowledge of the subject matter.
- The training provider must supply documentation of the worker's attendance at training and the worker's level of achievement, indicating the competencies on which the worker was assessed.
- To ensure the effectiveness of the worksite's first aid procedures, the employer must hold a first aid drill at least once a year.

Attendants should review and practise first aid procedures so they can react quickly and efficiently in an emergency. In the process, attendants should also do the following:

- Encourage the employer to permit monthly practice sessions.
- Attend workshops offered by training agencies.
- Review the first aid course reference manual regularly.

Attendants should follow up on injured workers, including taking these steps:

- Discuss treatments with another attendant if needed.
- Follow up on medically referred injured workers to the extent permitted.

## Be prepared

The attendant's role starts well before an incident or injury occurs. Refer to the first aid job checklist in Appendix A. This checklist should be reviewed and completed before starting work as a designated first aid attendant.

This is also required under sections 3.22 to 3.25 of the OHS Regulation (training and orientation for young or new workers).

It is the attendant's responsibility to be familiar with all aspects of the workplace, including the following:

- Specific location names (including jargon) for all areas of the worksite
- The locations of first aid supplies, equipment, facilities, and emergency transport vehicles
- Entry to and exit from all areas of the worksite
- Emergency procedures required under the OHS Regulation
- The approximate number of workers usually expected to be in each general area of the worksite
- Who the supervisors are in each area and how they can be reached
- How the first attendant is to respond to a call for first aid
- The location of and how to call for other first aid personnel (and drivers for ETVs, if required)
- The location of and how to call for workers with specialized training (e.g., welders, heavy equipment operators, millwrights, company fire crew)
- The location and use of personal protective equipment (PPE), such as pocket masks and gloves

A list of emergency numbers must be maintained for use in an emergency.

The attendant must also know where to access information on specific hazards. Review available employer information, risk assessments and the OHS Regulation to identify hazards and regulatory requirements specific to the worksite. General information on workplace hazards is available on [worksafebc.com](https://www.worksafebc.com) (e.g., [Hazards & exposures](#) webpage).

The attendant must be aware of any exposure control plans required under the OHS Regulation (e.g., sections 5.54 and 6.34). Review the sample exposure control plan for biological agents in Appendix B.

The attendant should confirm that the employer has provided all first aid supplies and services as required by the OHS Regulation, ensuring the effectiveness of the employer's first aid program by including the following information:

- Required minimum supplies, equipment, and facilities
- Who orders supplies and how they do so
- A schedule for maintaining, restocking, and cleaning equipment, supplies, ETVs, and first aid facilities
- Safety data sheets (SDSs) for all hazardous products, including information on first aid procedures and PPE
- Written procedures for specific workplace toxic substances or hazardous products

The attendant should determine the following with regards to training first aid helpers:

- The policy regarding releasing workers from regular duties for training
- The level of training that the company endorses on a site-wide basis and on a situation-specific basis (e.g., ETV drivers, Level 1 training, rescue teams, backup assistants for attendant)
- Who is expected to conduct the training

### **Act professionally**

Keep the first aid room, supplies, and equipment clean and well organized.

Treat injured workers respectfully and efficiently, as follows:

- Remain calm under pressure.
- Maintain a pleasant personality.
- Listen to the injured worker.
- Ask questions to determine all signs and symptoms.

Treat the patient, not just the injury. Attending to dramatic but not deadly injuries (e.g., open lower-extremity fractures, finger amputations) before evaluating life-threatening injuries can be a fatal mistake.

Ask for help from the following if you are unsure of how to proceed:

- The senior attendant, if available
- The company physician or medical advisor
- The registered nurses line (HealthLink BC, 811) or a local doctor
- WorkSafeBC Certification Services for follow-up questions

Notify a supervisor promptly if any of the following occur:

- A first aid workstation is left unattended for any reason.

- Hazards exist at the site of the incident.
- A worker must be sent to medical aid.
- A worker requires alternative duties.

Maintain confidentiality as follows:

- Do not discuss injured workers with other workers, except with a supervisor or fellow attendants for follow-up care.
- Keep first aid records in a secure location to protect worker privacy.

### **Stay within the scope of training**

Attendants must be able to determine the types of injuries that fall within the stay-at-work category, and provide ongoing at-work care for these injured workers.

Attendants have the option of transporting injured workers to medical aid by company vehicle, taxi, or ambulance, depending on the severity of the injury.

Injured workers who display any of the following signs or symptoms must be transported to medical aid by ambulance or ETV/MTC/helicopter/industrial ambulance, as available or required:

- Injured worker in the rapid transport category (as defined in the WorkSafeBC publication [\*Advanced First Aid: A Reference and Training Manual\*](#))
- Airway or breathing problems
- Abnormal skin colour
- Anxiety, light-headedness, confusion, or dizziness
- Inability to walk unassisted
- Great pain
- Weakness, numbness, or tingling in the extremities, except where caused by injury such as carpal tunnel syndrome
- Sudden onset of severe pain in spinal area

If none of the above are present, the injured worker may be transported in a company vehicle or taxi.

The attendant must accompany the injured worker to medical aid in the following situations:

- The injured worker is being transported by company ambulance.
- The injured worker requires ongoing treatment or monitoring.

After a worker has received medical care, consider making arrangements to return the worker to

the worksite or to transport them home. If the worker is unable to return to work, make arrangements to retrieve any personal belongings from the worksite, including the worker's vehicle, if necessary.

## Document thoroughly

### First aid record

For the first aid attendant, the first aid record:

- Provides a history of the injury when follow-up treatment is necessary
- Provides information about the injury and patient follow-up for an injury that occurred on a previous shift or when other attendants were on duty
- Provides a picture of the improvement or deterioration of the injury while under the attendant's care, which is essential to help decide whether medical aid is needed after the initial treatment
- Documents an attendant's actions and conduct related to patient contact

For the employer, the first aid record:

- Provides information essential to the company's health and safety program
- Identifies trends in the types and severity of injuries so action can be taken to prevent similar injuries
- Identifies work areas and practices that may be causing injuries so action can be taken
- Provides information for comparison to claims statistics when assessing the effectiveness of the company's first aid and health and safety programs
- Provides a record of occurrences and evidence of injuries in case a compensation claim is filed in the future

For the injured worker, the first aid record does the following:

- Ensures proper follow-up care and treatments, because any attendant will be fully aware of previous assessments, conditions, and treatment
- Provides a written record of occurrences and evidence of injuries in case a compensation claim is filed in the future

The first aid record must be complete, thorough, and factual.

Under OHS guideline G3.19, acceptable record keeping must contain the following:

- The full name and occupation of the worker.
- The date and time of injury or report of exposure, disease, or illness.

- The date and time the injury, exposure, disease, or illness was reported to the employer or employer’s representative.
- The names of witnesses.
- A description of how the injury, exposure, disease, or illness occurred.
- A description of the nature of the injury, exposure, disease, or illness.
- A description of the treatment given and any arrangements made relating to the worker.
- A description of any subsequent treatment given for the same injury, exposure, disease, or illness.
- The signature of the attendant or person giving first aid, and if possible, the signature of the worker receiving treatment.
- If records are kept and stored electronically, they must be stored within Canada.

All subsequent or follow-up treatments must be recorded in the first aid record.

An inadequate first aid record may have a negative impact on:

- A worker’s continuum of care, as misinformation or incomplete information could affect an injured worker’s follow-up treatment and delay the timely referral to medical aid
- A worker’s compensation claim
- Injury prevention efforts at the workplace

The first aid record is an important document for the first aid attendant, the employer, and the injured worker. It must be filled out every time an attendant sees a worker and must be clear, concise, and correct.

### Revising first aid records

First aid records must be completed as thoroughly as possible by a first aid attendant as soon as practicable after completing treatment. In small workplaces that do not require a first aid attendant or when workers are injured away from the workplace, a first aid record may be completed by another person who administers care or a supervisor if the worker does not receive treatment from a first aid attendant. First aid records should not be revised or updated by anyone other than the person who created the record, except to add administrative information that was unavailable at the time of the incident. Any revisions made to first aid records should be made in a clear and traceable way (e.g., a single cross-out with the change initialled).

### Access to records

Only people who have a need to review first aid records may have access. For example, this may include the following:

- A worker’s direct supervisor
- The injured worker or a designated representative (access to their own records only)
- A person designated by the employer to manage or audit health and safety, compensation claims, and return-to-work programs at the workplace
- First aid attendants at the workplace
- Prime contractors, if required for the purpose of coordinating health and safety of the workplace
- A WorkSafeBC prevention officer

Where a person is entitled access to first aid records, access may not extend to all records. First aid records should be treated as personal medical information, and anyone accessing these records must keep the information confidential in accordance with applicable privacy legislation. Access is limited to the minimum information necessary to satisfy the purpose for which access is required. If, for example, access is required to investigate a claim for compensation, it would be limited to the records of the individual making the claim.

Joint health and safety committee members and worker health and safety representatives generally do not need full access to first aid records. A report containing a summary of the records is generally sufficient for joint committee purposes. Prime contractors should also be provided with summary information, where sufficient for the required purpose.

First aid records are owned by the employer of the injured worker. In a multiple-employer worksite, records may be maintained by the employer providing the first aid services; however, records must be provided to the injured worker’s employer once the employer’s work on the project is complete. First aid records must be retained by the injured worker’s employer for at least three years.

Appendix D provides a copy of a blank first aid record, as well as an example of a completed first aid record for an injury where the worker received a cut to the inside of their forearm. The worker was treated by the first aid attendant and then returned to work.

## **Report to supervisor and/or joint health and safety committee**

### **Report to supervisor**

If a worker receives an injury that can be safely treated at work, it must be determined if returning to regular duties will have a negative impact on recovery. Keep in mind the following:

- It is up to the supervisor to assign alternative work.
- The first aid attendant should make recommendations regarding alternative duties to the worker’s supervisor.

- The attendant should base any recommendations on an accurate and thorough description of the injured worker’s limitations.

### **Report to joint health and safety committee**

First aid attendants may be assigned by the employer to compile statistics and provide a monthly summary to the joint health and safety committee outlining the following:

- The number of injuries
- The number of referrals to medical aid
- The number of time-loss injuries
- The severity of injuries
- Statistics by type of injury or illness, department, occupation, body part affected, and work procedures
- Any apparent trends in injuries from the statistics
- Information regarding possible causes of these trends
- The number of follow-up first aid visits

Appendix E is a form that may be used to compile reports of first aid incidents for reporting to the joint committee

### Exercise 3

The following questions review the key points from Part 3 of this guide so you can assess your level of knowledge.

Beyond providing emergency care, an effective first aid program will do the following:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

List the four main contributors to an effective workplace first aid program.

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

Which of the following are part of the role of the first aid attendant?

1. Be prepared.
2. Assign alternative work.
3. Stay within the scope of training.
4. Accompany all workers to medical aid.
5. Act professionally.
6. Document thoroughly.

Circle one of the following:

- a. 1, 2, 4, and 5
- b. 1, 3, 5, and 6
- c. 2, 3, 4, and 6
- d. 2, 3, 4, and 5

List 6 of the 10 general aspects of the workplace a first aid attendant must be familiar with before starting a first aid job.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

What should the first aid attendant do regarding the training of helpers for when an injury has occurred on a worksite?

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_

Describe “professionalism” for a first aid attendant on a worksite.

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A first aid attendant has determined that returning a worker to normal job duties would aggravate the injury. Which of the following should the attendant do?

- a. Arrange for transportation to send the worker to medical aid.
- b. Assign the worker alternative duties from the alternative-duty job list.
- c. Make recommendations to the worker’s supervisor regarding alternative duties.
- d. Make recommendations to the joint health and safety committee regarding alternative duties.

When must the first aid record be completed?

- a. Only if the patient is transported to medical aid
- b. Every time the attendant sees a worker
- c. Only if the worker misses work after an injury
- d. For every near miss incident at the workplace

For the attendant, the first aid record:

1. Provides a history of the injury and indicates when it must be re-dressed or re-evaluated
2. Provides information essential to the company's health and safety program
3. Identifies trends in the types and severity of injuries in the workplace so action can be taken
4. Provides a clear indication of the improvement or deterioration of a worker on a return-to-work program
5. Provides evidence of an injury in case a compensation claim arises

Circle one of the following:

- a. 1 and 4
- b. 2 and 3
- c. 3 and 5
- d. 4 and 5

An inadequate first aid record may have a negative impact on:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_

Mark each statement either "T" for true or "F" for false.

F	First aid records should be accessible to workers because they provide good safety messages.
T	For the employer, the first aid record identifies trends in the types and severity of injuries in the workplace so action can be taken.
T	It is the responsibility of the first aid attendant to objectively record the findings of all assessments in the first aid record.
F	The attendant does not need to make a new entry in the first aid record for a patient who returns for follow-up care and assessment but requires no further treatment.

The first aid attendant may be assigned by the employer to compile a monthly report for the joint health and safety committee meetings. This report should contain:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_

## Appendix A: Preparing for a first aid job

As the designated first aid attendant, you should be familiar with the Occupational Health and Safety Regulation. Parts 1 to 4 of the OHS Regulation apply to all worksites, and Parts 5 to 8 apply to most worksites. Some sections in particular are relevant to first aid attendants. You should also be aware of what other parts apply to your worksite.

### First aid attendant performance requirements

#### For employers and first aid attendants

Employers are responsible for providing appropriate training and ensuring that first aid attendants can respond effectively to emergencies based on their qualifications and within their scope of practise as outlined in regulations, the First Aid Program Standard, and this guide.

First aid attendants must ensure they are fit for duty and can respond to incidents within their workplace according to their level of training. Specific provincial and skill requirements per level are described in Appendix G.

The collaboration of actualized responsibilities of employers and first aid attendants is crucial for maintaining a safe workplace and ensuring that all emergency situations are managed efficiently and effectively, in accordance with the *Workers Compensation Act* and the OHS Regulation.

#### Physical requirements

- **Strength and mobility:** Able to climb, crawl, sit, stand, or kneel for extended periods. Able to lift (50 lb. or more), move, and position injured workers safely.
- **Manual dexterity:** Capable of performing precise hand movements for tasks such as bandaging wounds, applying splints, or administering cardiopulmonary resuscitation (CPR).
- **Visual acuity:** Able to assess injuries, read labels on medications and supplies, and detect subtle changes in a patient's condition.
- **Hearing:** Capable of hearing and understanding verbal communications, even in noisy environments. May be required to use radios, cellphones, or other means of communication.
- **Stamina:** Able to respond quickly and work for extended periods during emergencies, potentially in challenging conditions.

#### Mental requirements

- **Stress management:** Able to remain calm and focused in high-pressure situations and emergencies.
- **Decision making:** Capable of quickly assessing situations and making sound decisions about

appropriate treatment.

- **Attention to detail:** Able to carefully follow first aid and other workplace emergency procedures, accurately record information, and notice subtle changes in a patient’s condition.
- **Communication skills:** Capable of clearly conveying information to patients, co-workers, and emergency services personnel.
- **Memory and recall:** Able to quickly recall and apply first aid procedures and protocols when needed.
- **Empathy and interpersonal skills:** Capable of providing compassionate care and reassurance to injured or distressed individuals.
- **Mental alertness:** Be fit for duty, able to maintain focus and awareness throughout shifts, and ready to respond at any time.

## Workplace orientation

	Where to access information	Date information completed
<p><b>Worksite layout</b></p> <ul style="list-style-type: none"> <li>• Specific location names (including jargon) for all areas of the worksite</li> <li>• Locations of first aid room, rescue vehicles, and first aid equipment</li> <li>• Entry to and exit from all areas of the worksite</li> <li>• Provision for emergency procedures (sections 3.17, 4.13, 4.14, 5.97, and 5.102 of the OHS Regulation)</li> <li>• The approximate number of workers usually expected to be in each general area of the worksite</li> </ul>		

	Where to access information	Date information completed
<p><b>Specific hazards</b></p> <p>Review Parts 5 and 32 of the OHS Regulation to identify hazards and requirements specific to your worksite (e.g., lockout, confined spaces).</p> <p>Most hazards will require a risk assessment and written procedures.</p> <p>Hazard: <u>Biological agents</u></p> <p>Regulations: <u>6.33 to 6.40, 6.39 (hepatitis B) — vaccination for first aid attendant</u></p> <p>Hazard: _____</p> <p>Regulations: _____</p> <p>Hazard: _____</p> <p>Regulations: _____</p> <p>Hazard: _____</p> <p>Regulations: _____</p> <p>Hazard: _____</p> <p>Regulations: _____</p> <p>Hazard: _____</p> <p>Regulations: _____</p> <p>Hazard: _____</p> <p>Regulations: _____</p> <p>Hazard: _____</p> <p>Regulations: _____</p> <p>Hazard: _____</p> <p>Regulations: _____</p> <p>Hazard: _____</p> <p>Regulations: _____</p>		

	Where to access information	Date information completed
<p><b>Personnel</b></p> <ul style="list-style-type: none"> <li>Supervisors in each area and how they can be reached</li> <li>How to call for the first aid attendant</li> <li>Locations of and how to call for other first aid personnel (and drivers for rescue vehicles, if required)</li> <li>Locations of and how to call for workers with specialized training (welders, heavy equipment operators, millwrights, company fire crew)</li> </ul>		

## Review or develop written procedures

	Where to access information	Date information completed
<p><b>Providing first aid</b> (section 3.17 of the OHS Regulation)</p> <p>(1) The employer must keep up-to-date written procedures for providing first aid at the workplace including</p> <ul style="list-style-type: none"> <li>(a) the equipment, supplies, facilities, first aid attendants and services available,</li> <li>(b) the location of, and how to call for, first aid,</li> <li>(c) how the first aid attendant is to respond to a call for first aid,</li> <li>(c.1) if there are any barriers to first aid being provided to injured workers, how injured workers will be accessed and moved,</li> <li>(d) the authority of the first aid attendant over the treatment of injured workers and the responsibility of the employer to report injuries to the Board,</li> <li>(e) who is to call for transportation for the injured worker, and the methods of transportation and calling,</li> <li>(e.1) if emergency transportation is required by section 3 of Schedule 3-A, the location of the method of emergency transportation, and</li> <li>(f) prearranged routes in and out of the workplace and to medical treatment.</li> </ul> <p>(2) The employer must post the procedures conspicuously in suitable locations throughout the workplace or, if posting is not practicable, the employer must adopt other measures to ensure that the information is effectively communicated to workers.</p> <p>(3) The first aid attendant and all other persons authorized to call for transportation for injured workers must be trained in the procedures.</p> <p>(4) At least once each year and whenever the procedures change, the employer must ensure that drills are conducted to ensure that</p> <ul style="list-style-type: none"> <li>(a) the procedures are effective, and</li> <li>(b) workers, first aid attendants and other persons referred to in subsection (3) are capable of fulfilling their roles and responsibilities.</li> </ul>		

	Where to access information	Date information completed
<p><b>Air transportation</b> (section 3.17.1 of the OHS Regulation)</p> <p>If air transportation is the primary or only method for transporting an injured worker, specific requirements must be met.</p>		
<p><b>Exposure control plans for biological substances or other hazardous substances</b> (sections 5.54 and 6.34 of the OHS Regulation)</p> <ul style="list-style-type: none"> <li>• Risk identification, assessment, and control</li> <li>• Education and training</li> <li>• Hygiene facilities and decontamination procedures</li> <li>• Health monitoring</li> <li>• Records and documentation</li> </ul>		
<p><b>Emergency numbers</b></p> <p>Maintain an up-to-date list of numbers for the following services:</p> <ul style="list-style-type: none"> <li>• BC Emergency Health Services (BCEHS)</li> <li>• Rescue craft (air or sea)</li> <li>• Fire department</li> <li>• Poison control centre</li> <li>• Police</li> </ul> <p>WorkSafeBC Prevention: 604.276.3100 or toll-free 1.888.621.7233  <a href="http://worksafebc.com">worksafebc.com</a></p>		

## First aid facilities, equipment, and supplies

	Where to access information	Date information completed
<p><b>Serviceability</b></p> <ul style="list-style-type: none"> <li>• Determine worksite requirements (based on hazard classification, maximum number of workers per shift, and class of workplace, as per the OHS guidelines for Part 3).</li> <li>• If the employer is providing emergency transportation and oxygen is provided, determine the travel time to medical aid and calculate the appropriate amount of oxygen for the worksite (travel time to medical aid plus 15 minutes at 15 litres per minute).</li> <li>• Determine who orders first aid supplies and how they do so.</li> <li>• Determine the method of rotating first aid supplies.</li> <li>• Determine (or establish) a schedule for maintaining, restocking, and cleaning first aid equipment, supplies, emergency transport vehicles, and the first aid facilities.</li> </ul>		
<p><b>Notices and forms</b></p> <ul style="list-style-type: none"> <li>• Ensure signs indicating the locations of first aid facilities, supplies, and equipment are visible throughout the worksite.</li> <li>• Ensure all workers know how to summon the first aid attendant.</li> <li>• Ensure accurate documentation in the first aid record.</li> <li>• Ensure security of the first aid record.</li> </ul>		

## Disclosure of information

	Where to access information	Date information completed
<b>Worker's medical history</b> <ul style="list-style-type: none"><li>Determine company policy and worker willingness regarding disclosure of relevant medical information.</li></ul>		

## Workplace Hazardous Materials Information System (WHMIS)

Part 5 of the OHS Regulation requires that employers provide WHMIS training to all employees and obtain safety data sheets (SDSs) for all hazardous products at the workplace.

	Where to access information	Date information completed
<b>Safety data sheets</b> <ul style="list-style-type: none"><li>Ensure SDSs are available for all hazardous products. Review information on first aid procedures and PPE.</li></ul>		

## Training workers in first aid procedures

	Where to access information	Date information completed
<p><b>Company training policy</b></p> <ul style="list-style-type: none"> <li>• Determine policy regarding releasing workers from regular duties for training.</li> <li>• Determine the level of training that the company endorses on a site-wide basis and on a situation-specific basis (e.g., emergency transportation drivers, first aid attendants, rescue teams, backup assistants for attendant).</li> <li>• Determine who is expected to conduct the training.</li> </ul>		
<p><b>Attendant qualifications</b></p> <ul style="list-style-type: none"> <li>• Ensure that there is a record of all first aid attendants' certifications.</li> </ul> <p>Attendants: Ensure that your first aid certification or alternative credential remains valid. Know your expiry date.</p>	<p>Certification #:</p> <p>_____</p> <p>_____</p> <p>Expires:</p> <p>_____</p> <p>Certification #:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Expires:</p> <p>_____</p> <p>_____</p>	

## Appendix B: Exposure control plan for biological agents for first aid attendants

Section 6.34 of the Occupational Health and Safety Regulation requires an employer to develop and implement an exposure control plan if a worker has or may have occupational exposure to a biological agent. Since first aid attendants may be exposed to biological agents — carried by blood and other bodily fluids — in the course of their first aid work, employers who employ first aid attendants need to develop and implement an exposure control plan.

The [Exposure control plan for biological agents for first aid attendants](#) is a template meant to assist employers in developing a plan that meets the requirements of the OHS Regulation.

This plan may be used as is, but employers must consider the plan, ensure that it suits their workplace, and ensure that the plan is actually implemented at the worksite.

The sample plan may be modified to suit the specific circumstances at the employer's particular worksite.

If you have any questions or need further assistance, contact a WorkSafeBC occupational hygiene officer at your nearest WorkSafeBC office.

# Appendix C: Home care handouts

Small wounds and cuts..... 52

Sprains ..... 52

Tendinitis ..... 53

Flash burns and snow blindness..... 53

Minor burns ..... 54

Minor back strains ..... 54

## Small wounds and cuts

You have an open wound.

With proper care, it should start to feel better in about three to four days.

The healing process will be more effective if you follow this advice:

- Keep dressings clean and dry.
- If skin closures have been applied, keep them in place for 7 to 10 days.
- When bathing or showering, cover dressings to prevent moisture from entering.
- Report to first aid within 24 to 48 hours after the injury. The first aid attendant will reassess and re-bandage your wound.

You may need to discuss altering work activity with your supervisor.

You should notice some redness around the wound as it heals. You may also notice slight pain the day following the injury. This is also part of the natural healing process.

If at any time you notice that pain, redness, and swelling increase significantly, or if there is pus or red streaks coming from the wound, report to the first aid attendant. The attendant may refer you to medical aid. If the condition becomes significantly worse while you are not at work and you decide to seek medical aid, notify the attendant as soon as possible.

## Sprains

A sprain is stretching or a partial or complete tear of a ligament at a joint.

You have suffered a mild sprain involving a stretching of the ligaments.

With proper care, it should start to feel better in about three to four days.

The healing process will be more effective if you follow this advice:

- Whenever possible, elevate the limb.
- As a post-treatment measure, continue to apply cold (a cold agent cooler than the skin, such as an ice pack or cold pack) for the next 24 to 48 hours. Apply for 20 minutes on, then 5 minutes off.
- If a crepe bandage was applied, remove it for sleeping.
- Report to first aid at the start of your next shift. The first aid attendant will reassess and re-bandage if necessary.

You may need to discuss altering work activity with your supervisor.

You may notice some pain the following day when bearing weight. With the crepe removed you

may notice some increased swelling when the limb is not elevated. If at any time you become unable to bear weight or the pain and swelling increase significantly, report to the first aid attendant. The attendant may refer you to medical aid. If the condition becomes significantly worse while you are not at work and you decide to seek medical aid, notify the attendant as soon as possible.

## **Tendinitis**

Tendinitis is the inflammation of a tendon.

You have tendinitis (also called repetitive strain injury or RSI) from excessive, unaccustomed activity.

With proper care, it should start to feel better in about three to four days.

The healing process will be more effective if you follow this advice:

- Avoid motion that aggravates the tendon.
- If a small working splint or brace was applied, keep it in place as much as possible, but remove it for sleeping.
- As a post-treatment measure, continue to apply cold (a cold agent cooler than the skin, such as an ice pack or cold pack) for the next 24 to 48 hours. Apply for 20 minutes on, then 5 minutes off
- Alternating cold and heat may also help with healing.
- Report to first aid at the start of your next shift. The first aid attendant will reassess and reapply the splint if necessary.

You may need to discuss altering work activity with your supervisor.

You may notice minor pain the following day. If at any time pain and swelling increase significantly, report to the first aid attendant. The attendant may refer you to medical aid. If the condition becomes significantly worse while you are not at work and you decide to seek medical aid, notify the attendant as soon as possible.

## **Flash burns and snow blindness**

Flash burns and snow blindness are burns to the surface of the cornea.

Direct or reflected ultraviolet light from an electric arc or welding torch may cause a flash burn. Corneal burns become more painful after some hours, depending on the severity and length of exposure.

Although flash burns are very uncomfortable, they are not serious and usually heal in 12 to 24 hours. The healing process will be more effective if you follow this advice:

- Apply cold compresses to help reduce pain.
- Avoid bright lights, as they may aggravate the flash burns.
- Try wearing dark glasses to relieve some of the pain.
- Use mild pain medication (ASA or acetaminophen) if you have trouble sleeping.
- Report to first aid at the start of your next shift. A first aid attendant will reassess and document any symptoms you are experiencing.

You may need to discuss altering work activity with your supervisor.

You may notice minor pain the following day. This is normal. If at any time the pain increases significantly, report to the first aid attendant. The attendant may refer you to medical aid. If the condition becomes significantly worse while you are not at work and you decide to seek medical aid, notify the attendant as soon as possible.

## Minor burns

You have a minor burn.

Reddening of your skin indicates a first-degree burn. Small blisters indicate a second-degree burn.

The healing process will be more effective if you follow this advice:

- Keep the burned area covered.
- Ensure the dressings stay dry and clean.
- Report to first aid at the start of your next shift. A first aid attendant will reassess and document any symptoms you are experiencing.

You may need to discuss altering work activity with your supervisor.

You may notice minor pain the following day. This is normal. If at any time the pain increases significantly, report to the first aid attendant. The attendant may refer you to medical aid. If the condition becomes significantly worse while you are not at work and you decide to seek medical aid, notify the attendant as soon as possible.

## Minor back strains

You have strained the muscles or tendons in your back.

With proper care, it should start to feel better in a few days to a week.

The healing process will be more effective if you follow this advice:

- Avoid motion that aggravates the muscles and tendons.

- Continue to apply cold (a cold agent cooler than the skin, such as an ice pack or cold pack) for the first 24 hours. Apply for 20 minutes on, then 5 minutes off.
- After 24 hours, applying heat may also help with healing.
- Report to first aid at the start of your next shift. The first aid attendant will reassess your back, including checking your range of motion, and will document any symptoms you are experiencing.
- Although moving around may be uncomfortable, it is important to keep active without aggravating the injury. This will help relieve muscle spasms and help strengthen the back muscles.

You may need to discuss altering work activity with your supervisor.

You may notice minor pain the following day. This is normal. If at any time the pain increases significantly, report to the first aid attendant. The attendant may refer you to medical aid. If the condition becomes significantly worse while you are not at work and you decide to seek medical aid, notify the attendant as soon as possible.

# Appendix D: First aid records

First Aid Record..... 57

First Aid Record (completed — initial treatment) ..... 58

First Aid Record (completed — reassessment) ..... 59

# First Aid Record

[Your company name or logo here]

## First Aid Record Modifiable Template for Employers

Do **not** submit first aid records to WorkSafeBC unless asked to do so.

Sequence number

First and last name	Occupation
Date of injury, exposure, or illness (yyyy-mm-dd)	Time of injury, exposure, or illness (hh:mm) <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Initial reporting date and time (yyyy-mm-dd) (hh:mm) <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	Follow-up report date and time (yyyy-mm-dd) (hh:mm) <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Initial report sequence number	Subsequent report sequence number(s)

**Description of how the injury, exposure, or illness occurred** (What happened?)

**Description of the nature of the injury, exposure, or illness** (What did you see? [i.e., signs and symptoms])

**Description of the treatment given** (What did you do?)

**Names of witnesses**

1.	2.
----	----

**Arrangements made relating to the worker** (return to work/medical aid/ambulance/follow-up)

Provided worker handout Discussed recommendations for return to work	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	Sent a form with the worker to medical aid to assist in return to work and follow-up	<input type="checkbox"/> Yes <input type="checkbox"/> No
First aid attendant's name (please print or type)	First aid attendant's signature		
Patient's signature			

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# First Aid Record (completed – initial treatment)

[Your company name or logo here]

## First Aid Record Modifiable Template for Employers

Do **not** submit first aid records to WorkSafeBC unless asked to do so.

Sequence number  
20180016 – MG

First and last name Mary George	Occupation Millwright
Date of injury, exposure, or illness (yyyy-mm-dd) 2018-02-01	Time of injury, exposure, or illness (hh:mm) 2:35 <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.
Initial reporting date and time (yyyy-mm-dd) (hh:mm) 2018-02-01 2:40 <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.	Follow-up report date and time (yyyy-mm-dd) (hh:mm) <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Initial report sequence number 20180016 - MG	Subsequent report sequence number(s)

### Description of how the injury, exposure, or illness occurred (What happened?)

Worker was reaching down into the motor on power unit 16, tightening the exhaust manifold.  
Worker cut their left arm on a sharp piece of heat-shielding metal when they pulled their arms out of the power unit.

### Description of the nature of the injury, exposure, or illness (What did you see? [i.e., signs and symptoms])

ABCs all normal; no allergies; 2 cm long laceration to the upper inside area of the left forearm.  
Laceration is just through the thickness of the skin. Minimal bleeding and pain, no swelling, wound appears clean, normal circulation and nerve function beyond the injury.

### Description of the treatment given (What did you do?)

Assessed ABCs. Supported arm and covered wound with sterile gauze. Examined arm from shoulder to fingertips. Cleaned the wound by prolonged flushing of the wound with tap water. Applied skin closures. Dressed with four layers of sterile gauze and absorbent dressing. Bandaged with crepe roller.

### Names of witnesses

1. Anna Prentice was working with Mary George

2.

### Arrangements made relating to the worker (return to work/medical aid/ambulance/follow-up)

Return to work. Discussed worker handout sheet. Advised to keep dressing clean and dry and to return to first aid immediately if it gets wet or dirty or pain increases. Must return at start of next shift (February 2, 2018) for re-dressing.

Provided worker handout <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sent a form with the worker to medical aid to assist in return to work and follow-up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Discussed recommendations for return to work <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
First aid attendant's name (please print or type) Lee Lewis	First aid attendant's signature Lee Lewis
Patient's signature Mary George	

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# First Aid Record (completed – reassessment)

[Your company name or logo here]

## First Aid Record Modifiable Template for Employers

Do **not** submit first aid records to WorkSafeBC unless asked to do so.

Sequence number  
20180016 – MG

First and last name Mary George	Occupation Millwright
Date of injury, exposure, or illness (yyyy-mm-dd) 2018-02-01	Time of injury, exposure, or illness (hh:mm) 2:35 <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.
Initial reporting date and time (yyyy-mm-dd) (hh:mm) 2018-02-01 2:40 <input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m.	Follow-up report date and time (yyyy-mm-dd) (hh:mm) 2018-02-02 9:30 <input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Initial report sequence number 20180016 - MG	Subsequent report sequence number(s) 20180016A – MG

### Description of how the injury, exposure, or illness occurred (What happened?)

See report on sequence #20180201

### Description of the nature of the injury, exposure, or illness (What did you see? [i.e., signs and symptoms])

ABCs all normal. 2 cm long laceration to the upper inside area of the left forearm. Laceration is beginning to heal. Skin closures still in place. Minimal redness and pain, no swelling or pus, normal circulation and nerve function beyond the injury.

### Description of the treatment given (What did you do?)

Assessed ABCs. Supported arm and removed old bandage and dressing. Examined arm from elbow to fingertips. Cleaned around wound with water or sterile saline. Cleaned over wound with sterile saline. Left skin closures in place. Dressed with four layers of sterile gauze and absorbent dressing. Bandaged with crepe roller.

### Names of witnesses

1. Anna Prentice was working with Mary George

2.

### Arrangements made relating to the worker (return to work/medical aid/ambulance/follow-up)

Return to work. Discussed patient handout sheet. Advised to keep dressing clean and dry and to return to first aid immediately if it gets wet or dirty or pain increases. Must return at start of shift in two days (February 4, 2018) for re-dressing.

Provided worker handout <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Sent a form with the worker to medical aid to assist in return to work and follow-up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Discussed recommendations for return to work <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
First aid attendant's name (please print or type) Lee Lewis	First aid attendant's signature Lee Lewis
Patient's signature Mary George	

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# Appendix E: First Aid Report to Health and Safety Committee

Where did the incident occur (specify location at the worksite)

Nature of injury

(Describe injury or exposure.)

- Struck by
- Caught in
- Overexertion
- Exposure to/contact with harmful substance
- Exposure to blood/body fluids
- Other (provide brief description) \_\_\_\_\_
- Fall from height
- Caught under or between
- Repetitive motion or activity
- Fall from grade

Incident description

Describe what the patient told you happened, including the sequence of events before the incident.

  
  
  
  

Young worker       Length of time on job: \_\_\_\_\_

Referral of case:

- Return to work
- Sent home by supervisor
- Sent to medical aid
- Taken to medical aid

- Alternative work assigned by supervisor

## Appendix F: Exercise answer keys

### Exercise 1

In order to ensure the health and safety of all workers, the employer must:

- Remedy any workplace conditions that are hazardous.
- Ensure that the employer's workers are aware of all hazards, rights, and duties, and comply with the Act and the OHS Regulation.
- Establish occupational health and safety policies and programs.
- Provide and maintain in good condition protective equipment, devices, and clothing.
- Provide the necessary information, instruction, training, and supervision.
- Make copies of the Act and the OHS Regulation readily available and post a notice advising where the copies are available.
- Co-operate with the joint committee or worker health and safety representative.
- Co-operate with the Board (WorkSafeBC), WorkSafeBC officers, and any other person carrying out a duty under this part or the OHS Regulation.

In order to take reasonable care to protect the worker's health and safety and the health and safety of other persons, every worker must:

- Carry out work in accordance with established safe work procedures.
- Use or wear protective equipment, devices, and clothing as required.
- Not engage in horseplay or similar conduct that may endanger the worker or any other person.
- Ensure that the worker's ability to work without risk is not impaired by alcohol, drugs, or other causes.
- Report to the supervisor or employer contraventions of regulations, absence or defect in protective equipment, or any other hazard.
- Co-operate with the joint committee or worker health and safety representative.
- Co-operate with the Board, WorkSafeBC officers, and any other person carrying out a duty under this part or the OHS Regulation.

The prime contractor or owner of a multiple-employer workplace must:

- a. Ensure that the activities of employers, workers, and other persons at the workplace relating to occupational health and safety are coordinated.
- b. Do everything that is reasonably practicable to establish and maintain a system or process that will ensure compliance with the Act and the OHS Regulation.

Regarding the certification and training of first aid attendants and instructors, WorkSafeBC may:

- a. Supervise the training of and train occupational first aid attendants and instructors.
- b. Appoint first aid examiners and conduct examinations.
- c. Issue, renew, and amend certificates to occupational first aid attendants and instructors.
- d. Enter into arrangements by which other persons provide training, give exams, and issue certificates.

If an employer fails, neglects, or refuses to install or maintain first aid equipment or service, WorkSafeBC may:

- a. Issue orders requiring the employers to purchase and install first aid equipment or train first aid attendants
- b. Issue penalties or other administrative sanctions
- c. Order the employer to immediately close down all or part of workplace or the work being done there

WorkSafeBC has the authority to cancel or suspend a certificate or place a condition on its use if the person who holds the certificate has:

- a. Breached a term or condition of the certificate
- b. Contravened a provision of the Act or the OHS Regulation

## Exercise 2

The employer is responsible for ensuring each workplace has equipment, supplies, facilities, first aid attendants, and services.

The employer must prepare an annual written assessment of the circumstances of the workplace, including:

- a. The number of workers present
- b. The locations of workers
- c. The nature and extent of the risks and hazards in the workplace
- d. The types of injuries likely to occur
- e. Any barriers to first aid being provided to an injured worker
- f. The time that may be required to obtain transportation and to transport an injured worker to medical treatment and the methods of transportation available

A first aid assessment has been conducted indicating that a less-accessible, high hazard workplace with eight workers is one hour from an ambulance station. Which of the following is required under the OHS Regulation for first aid supplies, equipment and service?

- b. Intermediate first aid kit, emergency transport vehicle and equipment, and an intermediate first aid attendant with a transportation endorsement

List what must be included in the written procedures for providing first aid required for every workplace in B.C.:

- a. The equipment, supplies, facilities, first aid attendants, and services available
- b. The location of, and how to call for, first aid
- c. How the first aid attendant is to respond to a call for first aid
- d. If there are any barriers to first aid being provided to injured workers, how injured workers will be accessed and moved
- e. The authority of the first aid attendant over the treatment of injured workers, and the responsibility of the employer to report injuries to the Board
- f. Who is to call for transportation for the injured worker, and the methods of transportation and calling
- g. The location of emergency transportation, if required
- h. Prearranged routes in and out of the workplace and to medical treatment

The employer must provide an effective means of communication between the first aid attendant and:

- a. The workers served
- b. Workers who assist the first aid attendant

Access to the first aid records may be required for which of the following reasons:

- d. All of the above

The first aid attendant is responsible and has full authority for all first aid treatment of an injured worker until responsibility for treatment is accepted at or by:

- a. A place of medical treatment
- b. An ambulance service acceptable to the Board
- c. A person with equivalent or higher first aid certification

A first aid facility may be used for purposes other than first aid if:

- a. It is immediately available for first aid treatment.
- b. The facility is not at a remote workplace (more than two hours' surface travel from a hospital).
- c. The minimum floor area needed for first aid is maintained.
- d. Use will neither impede the treatment of an injured worker nor pose a hazard to workers.

List the inappropriate conduct engaged in by first aid attendants that may warrant suspension of certification under Policy D12-96.

- a. Smoking while assessing or treating an injured worker or while handling oxygen therapy equipment, or permitting others to do so
- b. Failure to use the assessment and injury treatment techniques outlined in first aid training courses unless conditions precluded them
- c. Conduct that poses an unreasonable threat to the safety and well-being of other workers or the public
- d. Removing themselves from being able to see or hear any summons for first aid at a workplace
- e. Abandonment of an injured worker after beginning assessment or treatment
- f. Refusal to treat an injured worker when acting as a designated first aid attendant

- g. Treating or transporting an injured worker while impaired or under the influence of drugs or alcohol

In order to comply with the requirements of “prompt care,” first aid attendants must be able to:

- a. Quickly wash hands with soap and water.
- b. Either take off a pair of coveralls or don a pair of clean coveralls.
- c. Be ready to depart to where they are required with the appropriate level of first aid kit within three to five minutes.

Mark each statement either “T” for true or “F” for false.

T	The employer must not assign, and the first aid attendant must not undertake, employment activities that will interfere with the attendant’s ability to receive and respond to a request for first aid.
F	With regard to unplanned absences of the first aid attendant, an absence of up to approximately one shift is permissible until a replacement attendant is in place.
T	Attendants must have their certificate at the workplace and must produce the certificate or licence for inspection at the request of a WorkSafeBC officer.
F	An employer may accept a picture of a first aid certificate as acceptable proof of certification without any other form of validation
T	A worker’s direct supervisor cannot overrule an attendant’s decision regarding when or if an injured worker is transported to medical aid.
F	The first aid attendant has the authority to overrule a worker’s decision to seek medical treatment.
T	If a worker has or may have occupational exposure to a biological agent, the employer must develop and implement an exposure control plan.
T	Upon request, the employer must offer first aid attendants hepatitis B vaccinations at no cost to them.

Under section 4.13 of the OHS Regulation, if a risk assessment for a workplace shows a need for evacuation or rescue, what is required?

- a. Appropriate written procedures are developed and implemented.
- b. A worker is assigned to coordinate their implementation.

Under section 5.100 of the OHS Regulation, written evacuation procedures appropriate to the risk must be developed and implemented to:

- a. Notify workers, including the first aid attendant, of the nature and location of the emergency.
- b. Evacuate workers safely.
- c. Check and confirm the safe evacuation of all workers.
- d. Notify the fire department or other emergency responders.
- e. Notify adjacent workplaces or residences that may be affected if the risk of exposure to a substance extends beyond the workplace.

### Exercise 3

Beyond providing emergency care, an effective first aid program will do the following:

- a. Keep injured workers at work when appropriate.
- b. Promptly refer those who must be seen by a doctor.
- c. Yield documentation that contributes to prevention activities and patient follow-up care.

List the four main contributors to an effective workplace first aid program.

- a. Employer
- b. Worker
- c. Joint health and safety committee
- d. First aid attendant

Which of the following are part of the role of the first aid attendant?

- b. 1, 3, 5, and 6

List 6 of the 10 general aspects of the workplace a first aid attendant must be familiar with before starting an attendant job.

- Specific location names (including jargon) for all areas of the worksite
- The location of the first aid room, rescue vehicles, and first aid equipment

- Entry to and exit from all areas of the worksite
- Emergency procedures required under the OHS Regulation
- The approximate number of workers usually expected to be in each general area of the worksite
- Who the supervisors are in each area and how they can be reached
- How to call for the first aid attendant
- The location of and how to call for other first aid personnel
- The location of and how to call for workers with specialized training (e.g., welders, heavy equipment operators, millwrights, company fire crew)
- The location and use of personal protective equipment (PPE), such as a pocket mask and gloves

What should the first aid attendant do regarding the training of helpers for when an injury has occurred on a worksite?

- Determine company policy regarding releasing workers for training.
- Determine the level of training the company endorses on a site-wide basis and a situation-specific basis.
- Determine who is to conduct the training.

Describe “professionalism” for a first aid attendant on a worksite.

- Cleanliness and organization of the first aid room and equipment are maintained.
- Patients are treated respectfully and efficiently.
- The patient is treated, not just the injury.
- Help is asked for when necessary.
- Supervisors are notified promptly as required.
- Confidentiality is maintained.

A first aid attendant has determined that returning a worker to normal job duties would aggravate the injury. Which of the following should the attendant do?

- c. Make recommendations to the worker’s supervisor regarding alternative duties.

When must the first aid record be completed?

- b. Every time the attendant sees a worker

For the attendant, the first aid record:

a. 1 and 4

An inadequate first aid record may have a negative impact on:

- A worker's continuum of care
- A worker's compensation claim
- Injury prevention efforts at the workplace

Mark each statement either "T" for true or "F" for false.

F	First aid records should be accessible to workers because they provide good safety messages.
F	For the employer, the first aid record identifies trends in the types and severity of injuries in the workplace so action can be taken.
T	It is the responsibility of the first aid attendant to objectively record the findings of all assessments in the first aid record.
F	The attendant does not need to make a new entry in the first aid record for a patient who returns for follow-up care and assessment but requires no further treatment.

The first aid attendant may be assigned by the employer to compile a monthly report for the joint health and safety committee meetings. This report should contain:

- The number of injuries
- The number of referrals to medical aid
- The number of time-loss injuries
- The severity of injuries
- Statistics by type of injury or illness, department, occupation, body part affected, and work procedures
- Any apparent trends in injuries from the statistics
- Information regarding possible causes of these trends
- The number of follow-up first aid visits

## Appendix G: First aid training levels, skills per level, and unique provincial requirements for first aid attendants

In addition to the first aid attendant duties described in Appendix A, first aid attendants in B.C. must meet the awareness, knowledge, and skills requirements for competencies described by the Canadian Standards Association in CSA Z1210-17 First Aid Training for the Workplace – Curriculum and Quality Management for Training Agencies.

### Training levels

Here is a training levels description from CSA Z1210-17.

The following workplace first aid training levels shall apply in this standard:

- (a) Basic — At this level, the role and responsibility of the workplace first aid attendant shall be to recognize an injury or illness, to inform emergency medical services (EMS), and to provide workplace first aid care for the injured or ill worker.
- (b) Intermediate — At this level, the role and responsibility of the workplace first aid attendant shall be to have competence in the basic training level and to provide a broader scope of emergency workplace first aid care for the injured or ill worker.
- (c) Advanced — At this level, the role and responsibility of the workplace first aid attendant shall be to have competence in the Basic and Intermediate training level and to provide care for the injured or ill worker with specialized equipment specific to the workplace.

### Skills per level

The following table lists skills taught at each first aid attendant level. Competencies and competency descriptions are cited from CSA Z1210-17.

Upon completion of the workplace first aid training course, the first aid attendant will be able to apply a procedure or protocol at the required competency level.

	Advanced	Intermediate	Basic
Reporting and documentation requirements	√	√	√
Proper use of PPE for workplace first aid	√	√	√
Obtaining incident information	√	√	√
Level of consciousness assessment	√	√	√

	Advanced	Intermediate	Basic
Airway assessment	✓	✓	✓
Breathing assessment	✓	✓	✓
Circulation assessment	✓	✓	✓
Checking for life-threatening injuries or conditions	✓	✓	✓
Medical history	✓	✓	
Vital signs	✓	✓	
Head-to-toe assessment	✓	✓	
Ongoing assessment based on the appearance and signs or symptoms	✓	✓	✓
Procedures for opening, clearing, and maintaining an airway	✓	✓	✓
Positioning to maintain an open airway	✓	✓	✓
Use of airway adjuncts to open and maintain airway	✓		
Management of flail chest	✓		
Management of a sucking chest wound	✓		
Management of a penetrating chest injury	✓		
Management of an airway obstruction	✓	✓	✓
Approach, assess, and provide injured or ill worker management	✓	✓	✓
Management of angina	✓		
Management of myocardial infarction (heart attack)	✓		

	Advanced	Intermediate	Basic
Approach, assess, and provide workplace first aid for cardiovascular emergencies	✓	✓	✓
Management for shock	✓	✓	
One-person adult CPR	✓	✓	✓
Two-person adult CPR	✓	✓	
Application and use of an AED	✓	✓	✓
Types of oxygen-delivery systems	✓		
Indications for oxygen administration	✓		
Safe handling of oxygen-delivery systems	✓		
Oxygen administration using appropriate equipment	✓		
Controls for minor and major external hemorrhages	✓	✓	✓
Management of amputations	✓	✓	
Management of ear, eye, and nose injuries	✓	✓	
Management of burn injuries	✓	✓	
Management of dislocations	✓	✓	
Management of sprains	✓	✓	
Management of strains	✓	✓	
Management of open and closed fractures	✓	✓	
Management of pelvic fractures, lower limb fractures, upper limb fractures	✓	✓	

	Advanced	Intermediate	Basic
Management of anaphylaxis emergencies	✓		
Management of diabetic emergencies	✓	✓	
Management of seizure emergencies	✓	✓	
Management of stroke	✓	✓	
Management of hypothermia or hyperthermia	✓		
Approach, assess, and provide injured or ill worker management	✓	✓	✓
Management for suspected fractures involving the spinal column	✓	✓	

## Unique provincial requirements for B.C.

First aid attendants in B.C. must meet the awareness, knowledge, and skills requirements for competencies described in BC Plus. BC Plus is additional training required beyond federal standards to address the first aid needs for all B.C. workplaces. This appendix describes BC Plus requirements.

### BC Plus additional requirements at all levels (basic, intermediate, advanced)

#### Awareness

- Workplace emergency response procedures must be activated when required.
- First aid attendant role as described under section 3.21 of the OHS Regulation.

#### Knowledge

- First aid kits need to include protective eyewear and procedural or surgical masks.
- The following injuries need to be identified as referral to medical aid:
  - Soft-tissue wound longer than 3 cm through the full skin thickness
  - Wounds to hands in areas of joints or tendons
  - Wounds that require sutures (jagged edges, flap of full thickness, skin gaping, or difficulty closing areas where the skin is under pressure)
  - Facial wounds

- Burns, significant partial thickness (second degree), any full thickness (third degree), chemical burns, or electrical burns

### Skills

- Complete a first aid record.

## BC Plus additional requirements for intermediate and advanced

### Knowledge

- BC Plus rapid transport criteria (described below)

## BC Plus additional requirements for advanced

### Skills

- Application of oxygen with the following devices: simple face mask, partial non-rebreather mask, non-rebreathing mask, nasal cannulas, pocket mask, bag valve mask.
- Application and interpretation of the SpO<sub>2</sub> readings and titrate oxygen as required.

## BC Plus rapid transport criteria for intermediate and advanced

Rapid transport criteria have been developed to ensure that seriously injured patients are transported to hospital as soon as possible. Trauma specialists have developed these criteria, which help the first aid attendant determine which patients must be transported with great haste. The following criteria must be memorized and carried with the first aid attendant at all times for handy reference.

Whether a patient meets the criteria can be established by considering the:

- Mechanism of injury
- Anatomical criteria
- Physiological criteria

### Mechanism of injury

- Free fall from a height greater than 20 ft. (6.5 m) (one story is equal to approximately 10 ft. or 3 m)
- Severe deceleration in a motor vehicle accident characterized by:
  - High-speed accident or major vehicular damage
  - Broken windshield, bent steering wheel, or significant damage to the passenger compartment
  - Occupant thrown from vehicle (i.e., ejection), partial or complete
  - One or more vehicle occupants killed

- Rollover type of incident (e.g., with a forklift)
- Pedestrian, motorcyclist, or bicyclist struck at greater than 30 km/h (20 mph)
- Severe crush injuries
- Smoke or toxic-gas inhalation, carbon monoxide poisoning
- Decompression illness
- Drowning
- Electrical injuries

### **Anatomical criteria**

- Severe brain injury, defined as one or more of the following:
  - Glasgow Coma Score of 13 or less
  - Pupillary inequality greater than 1 mm and sluggish response to light with altered level of consciousness
  - Depressed skull fracture
- New paralysis or neurological deficit
- Facial injury with potential for airway compromise
- Penetrating injury to the head, neck, chest, abdomen, groin, or extremities proximal to (above) elbow or knee
- Pelvic fracture
- Two or more proximal long-bone fractures (e.g., femur, humerus)
- De-gloved or pulseless extremity
- Chest wall instability or deformity (e.g., flail chest)
- Pregnant person with significant trauma (e.g., a limb fracture or chest or abdominal trauma)
- Major burns:
  - Facial burns with or without inhalation injury
  - Extensive facial burns
  - Electrical burns
  - Second-degree (partial thickness) burns to more than 10% of the body surface
  - Third-degree (full thickness) burns to more than 2% of the body surface
  - Burns encircling a limb
  - Major burns to the eyes, neck, hands, feet, or groin
  - Chemical burns

- Amputation of an extremity other than a toe or finger
- Spinal-cord injury, paraplegia, or quadriplegia
- Penetrating eye injuries

### **Physiological criteria**

- Partial or complete airway obstruction
- Respiratory distress or ineffective breathing (respiratory rate <10 or >30)
- Any condition requiring assisted ventilation
- Cardiac arrest
- Suspected heart attack
- Obvious shock
- Bleeding requiring the application of a tourniquet
- Acute poisoning, if directed by Poison Control Centre
- Seizures (involving shaking of the body) or status epilepticus
- Stroke
- Anaphylactic reaction
- Moderate or severe hypothermia
- Heatstroke

If the patient meets any of the preceding criteria, rapid transport is required. Any treatment prior to packaging should be limited to critical interventions.