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Short Textbooks for Nursing Education - Focus on Elderly Care

Theo Ahrens

First Aid and Emergency Management

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Bibliographic Information

Theo Ahrens – Short Biography

Theo Ahrens, born in 1979 near Munich, is a teacher for nursing professions and a dedicated nursing educator. After a voluntary social year in a hospital, he completed training as a health and nursing professional and gained valuable work experience in the intensive care unit. Driven by his desire to share knowledge, he studied nursing education and began teaching at a vocational school in Munich in 2009. Theo is known for his practical and empathetic teaching, preparing future nurses for their demanding profession. Privately, he lives with his wife and two children in Berlin and volunteers to improve conditions in nursing education.

This short textbook was formulated from the lesson plans of his classes using A.I. The translation was done automatically.

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1 Introduction

1.1 Importance of First Aid in Elderly Care

In elder care, first aid is of particular importance as caregivers often face a heightened risk of elderly individuals encountering emergency situations. This special responsibility requires a constant readiness to act quickly and effectively. Older individuals have a higher risk of emergencies such as heart attacks, strokes, or accidents due to their age and often various health limitations.

The ability to provide first aid is crucial for the safety and well-being of those in need of care. Quick and competent intervention can significantly increase chances of survival and reduce the extent of potential subsequent damage in many cases. Caregivers act as the first point of contact in emergency situations and must possess well-founded first aid competence.

In addition to the technical execution of first aid, psychological support also plays an essential role. Caregivers must be aware that they are often the first to be confronted with the physical and emotional impacts of an emergency. Empathetic communication and reassurance can significantly defuse the situation for those affected.

Regularly trained first aid skills enhance the confidence of caregivers and their ability to act in emergencies. This not only leads to improved care for elderly individuals but also protects caregivers from possible legal consequences of failing to provide assistance. Overall, first aid is an essential competence in elder care, significantly influencing the safety and quality of life of the individuals being cared for.

1.2 Legal Foundations (Failure to Provide Assistance, Duty of Care)

In elderly care, legal principles play a central role in managing emergencies. Two core areas are failure to render assistance and the duty of care. These aspects influence not only the daily actions of caregivers but also the legal consequences of their actions or omissions.

Failure to Render Assistance

According to § 323c of the Criminal Code (StGB), there is an obligation to provide assistance when someone is in an emergency situation. Failure to render assistance occurs when a person in need does not receive the necessary help, even though it would be possible without significant personal risk or other important reasons. For caregivers, this means they are obligated to act quickly and appropriately in emergency situations. This includes both the immediate initiation of first aid measures and the placement of an emergency call.

Duty of Care

The duty of care is particularly relevant in elderly care. A duty of care arises from a special obligation of protection that a person has for the safeguarding of the legal interests of others. Caregivers have this duty of protection towards the residents or patients entrusted to them. This duty of care legally obligates them to prevent harm that threatens the individuals they are responsible for.

Violation of the duty of care can have criminal consequences, especially if it results in health damage. Caregivers are required to do everything in their power to prevent or mitigate emergencies and must always be able to respond appropriately.

Example

An example illustrates the consequences: A caregiver notices that a resident shows signs of a stroke but does not react or delays response. This omission could be considered failure to render assistance, particularly if the caregiver should have recognized the emergency due to their professional expertise. Similarly, their responsibility as a caretaker establishes a duty to intervene.

Caregivers should be aware of their rights and duties. Regular training and a clear understanding of legal foundations are essential to avoid legal consequences and ensure the safety of the individuals in care.

1.3 Responsibility and Role of Nursing Staff in Emergencies

Caregivers bear a central responsibility in emergencies. They are often the first to respond to a critical situation. Their task includes the immediate recognition of emergencies and the initiation of necessary actions. A quick and efficient response can be life-saving.

The role of the caregiver begins with situational analysis. It must be assessed whether there is an immediate danger to the affected person. This includes assessing vital signs such as breathing and consciousness. The caregiver must, if necessary, immediately initiate first aid measures and call emergency services.

During the emergency, the caregiver is also responsible for the protection of the care-dependent person. They coordinate assistance measures and ensure appropriate care for the affected person. Upon the arrival of external rescue teams, they provide necessary information, enable a seamless transition, and continue to advocate for the patient's well-being.

In addition to the practical implementation of first aid measures, the caregiver also has the task of conveying calmness and security. This is crucial for keeping a stressful situation under control and giving the affected person a sense of stability. Empathetic communication can be decisive in calming the patient's situation.

Caregivers must receive regular training to keep their knowledge up-to-date and to confidently and safely apply their skills in emergency situations. This includes not only the technical aspects of first aid but also behavior in critical situations and the proper communicative support of the affected individuals.

The role of the caregiver in emergency management requires a high level of responsibility and competence. Only through continuous education and practice can caregivers ensure they act optimally in emergencies and protect the care-dependent individuals entrusted to them.

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2 Basics of First Aid

2.1 What is First Aid?

First aid includes all measures taken in the event of accidents or sudden illnesses to save the lives of those affected, prevent their health from deteriorating, or alleviate their pain. It is the immediate start of a chain of rescue measures extending to professional medical care. In elderly care, this particularly involves the timely recognition of an emergency and the initiation of basic assistance measures until the arrival of emergency services.

First aid in elderly care is based on fundamental principles such as the protection of the helper and the affected individual, the rapid summoning of help, and the targeted application of life-saving measures. The focus is on observing and assessing the situation: Who is affected? How severe is the situation? What measures are necessary?

First aid does not mean performing a complete medical treatment but bridging the gap and keeping the affected person's health stable. This can include simple actions such as clearing the airways, stopping bleeding, or placing an unconscious person in the recovery position. In elderly care, it is essential to always be attentive to recognize unusual symptoms early.

Practical knowledge and regular practice of first aid measures are crucial to act quickly and thoughtfully in an emergency. Every application of first aid also requires a calm and composed approach to consider both the physical and mental situation of the affected person.

2.2 Principles of First Aid (Stay Calm, Self-Protection, Emergency Call)

Staying calm is the first and most important principle in First Aid. In an emergency, clear thinking is crucial. When panic breaks out, mistakes can happen. Take a deep breath and get an overview of the situation. Avoid hectic movements and maintain control over your actions.

Self-protection is paramount. Before taking action, check if there is any danger to yourself. Sources of danger could be electricity, fire, or chemicals. Leave the danger zone if necessary. Only when you are safe can you effectively help. Remember that maintaining your own health is necessary to assist the affected person.

The emergency call is an essential component of any emergency response. Dial 112 immediately. Provide the following information precisely: Who is calling? Where is the emergency location? What has happened? How many people are affected? What type of injuries or symptoms are present? Stay on the phone to answer any follow-up questions from the dispatcher until you are instructed to hang up.

In summary, keeping a cool head, self-protection, and making an effective emergency call are central to successful First Aid. Only then can the right measures be initiated to save the lives of those affected and improve their health situation.

2.3 Emergency Management Procedure (Situation Analysis, Personal Safety, Measures)

Situational Analysis

Upon arriving at an emergency site within a care facility, a rapid and thorough situational analysis should be conducted. This involves assessing the circumstances: What has happened? Who is affected? What dangers exist for the affected persons and the helper? Are there visible symptoms or injuries? This information is critical in planning the next steps and determining the appropriate level of assistance needed.

Self-Protection

Self-protection is of the highest priority. Enter the emergency site only if there is no immediate threat from, for example, fire, smoke, or sharp objects lying around. Use protective equipment such as gloves or masks if necessary to protect yourself from infections or contamination. Continuous risk assessment is required to recognize and mitigate unforeseen risks.

Measures

The measures to be initiated depend on the identified situation. Life-saving immediate actions such as resuscitation, ensuring clear airways, or stopping severe bleeding take top priority. For less urgent conditions, standard first aid techniques should be employed, such as the recovery position or maintaining warmth in cases of hypothermia. The condition of the affected person should be continuously monitored and responses adjusted as necessary.

Documentation is an essential component of emergency management. Record the actions taken and the condition of the affected person to provide subsequent rescue personnel with a comprehensive overview. Accurately note times, observations, and changes in health status.

The successful execution of emergency management relies on careful assessment of the situation, consistent self-protection, and the orderly implementation of necessary first aid measures. Regular training and drills ensure that healthcare workers remain capable and safe in emergencies.

2.4 The Emergency Call (112) – What to Consider?

To make an effective emergency call, a structured approach is crucial. Start by dialing the emergency number 112. An uninterrupted flow of information is essential to provide rescue teams with complete and accurate data.

First, you need to identify yourself: "Who is calling?". State your name and the name of the facility. This helps the dispatchers understand the context and better categorize any follow-up questions.

Next, specify the exact location of the emergency: "Where is the emergency location?". This includes the full address, including floor or room number. In nursing facilities, there can be several floors and wings, making precise location information even more important.

Briefly describe what happened: "What happened?". For example: "A resident has fallen and is unconscious." This information gives rescue teams an initial indication of the type of emergency.

Indicate how many people are affected: "How many people are affected?". If multiple residents or staff are involved, report this immediately.

Explain the condition of those affected: "What type of injuries or symptoms are present?". Limit yourself to essential and obviously noticeable conditions, such as difficulty breathing, severe bleeding, or unconsciousness.

Remain on the line at the end of the call until the dispatcher has all the necessary information and instructs you to hang up. This ensures that any follow-up questions can be clarified directly and additional instructions can be communicated.

Effective emergency calls require precise and clear communication. This structure prevents misunderstandings and ensures that rescue teams arrive optimally prepared at the scene.

3 Emergency Situations in Everyday Care

3.1 Typical Emergencies in Elderly Care

In geriatric nursing, certain emergency situations occur regularly. Caregivers should be prepared and able to respond quickly. The most common emergencies include:

Falls: Older people are particularly at risk of falling due to dizziness, balance disorders, or limited mobility. Such falls can result in bruises, fractures, or head injuries. After a fall, it is essential to provide physical care and observe for confusion or dizziness.

Breathing difficulties: Breathing difficulties can be triggered by chronic conditions such as COPD, heart failure, or asthma. In acute cases, oxygen administration and breathing techniques should be applied to calm and support the person.

Cardiovascular problems: Acute ailments such as chest pain or arrhythmias require rapid action. Immediate measures include positioning the affected person in a comfortable position and monitoring vital signs until the arrival of emergency services.

Diabetic emergencies: Hypoglycemia (low blood sugar) and hyperglycemia (high blood sugar) require swift recognition and response. Typical symptoms include confusion, sweating, or impaired consciousness in hypoglycemia and fatigue or thirst in hyperglycemia. In hypoglycemia, glucose should be administered quickly.

Unconsciousness: If a person loses consciousness, the recovery position should be applied to keep the airways open before further examination of breathing and pulse is carried out.

Seizures: During a seizure, the individual must be protected from injury without active manipulation of the limbs. After the seizure, the person should be placed in the recovery position.

Aspiration risk: This occurs when food or liquid is inhaled into the airways and can lead to respiratory distress. The Heimlich maneuver can be applied in life-threatening situations to clear the airways.

Caregivers should always be vigilant, recognize changes in the health status of their clients early, and be trained in first aid procedures. A prompt response can prevent severe consequences and ensure the well-being of those in need of care.

7 This is just a preview

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