

# WHAT TO DO IN THE EVENT OF AN ACCIDENT / RIDER FALL

It is recommended that anyone coaching riding lessons is First Aid trained and keeps their certificate up to date. If coaching at a riding school they should have a nominated First Aider available on the yard, it may be yard policy that in the event of an accident that person is called. However if you are teaching private clients it is vital that you are able to respond in the event of an accident. In the event of an accident; stay calm, it is important to assess the situation and make sure you do not put yourself in danger. Below is an example of the procedure to follow if a rider falls off during a lesson.



## RECOGNISING A HEAD INJURY

### Concussion

Concussion is where the brain has been shaken within the skull.

#### Possible Signs and Symptoms:

- Briefly unconscious
- Dizzy and confused
- Feeling or being sick
- Mild 'all over' headache
- Paler than usual, clammy skin
- Loss of memory (amnesia)

#### Treatment:

- Sit the casualty in a quiet place
- Stay with the casualty to monitor them
- They should start to improve; but if their condition becomes worse call an ambulance
- Treat any wounds
- For advice call the NHS on 111
- If the casualty seems drowsy, their levels of consciousness are declining, or they develop a severe headache call an ambulance
- Monitor for signs of compression

### Compression

Compression is where pressure is placed on the brain. This might be caused by bleeding or swelling inside the head, or an infection.

#### Possible Signs and Symptoms:

- Possible recent head injury
- Declining levels of consciousness or drowsiness
- Intense headache
- Flushed (red) dry skin and high temperature
- Unequal pupils
- Fitting
- Slow, noisy breathing

#### Treatment:

- If the casualty is conscious, lay them elevating their head and shoulders
- Reassure the casualty
- **Call an ambulance**
- Nothing to eat or drink
- Monitor airway & breathing



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# SUSPECTED SPINAL INJURIES

Spinal injuries are a concern for all first aiders. We must try to prevent the injury from becoming worse whenever possible. If a spinal injury has affected the spinal column, this may lead to loss of movement below the injury and as such can be very scary for both the casualty and the first aider.

## Possible signs and symptoms:

- General signs and symptoms of a fracture
  - The casualty may be in an unnatural position
  - Loss of control of the bladder or bowel
  - Breathing difficulty
- If the casualty is conscious:*
- Pain in the neck or back
  - Loss of control of limbs (paralysis)
  - Pins and needles or burning sensations in the limbs



## WHAT TO DO

### If the casualty is breathing

- Keep the casualty in the same position, unless they are in danger
- Call an ambulance
- Support their head with your hands
- Leave any helmets on
- Monitor, responsiveness, airway and breathing
- Be prepared to use your emergency plan
- If the casualty's airway becomes compromised, for example through vomiting you roll them onto their side. This can be achieved by using the recovery position or a log roll (see unconsciousness).

### If your casualty's airway is blocked or they are not breathing normally:

- Ensure an ambulance has been called
- Use a gentle but sufficient controlled head tilt chin lift to open the airway and check for breathing.
- If the casualty is now breathing normally maintain the position and await the arrival of the emergency services.
- If the casualty is not breathing normally, start basic life support.
- If you are unsure or unwilling to open the airway or commence basic life support, recall ambulance control for advice - but do not just wait until their arrival.

## RIDING HATS

If the casualty is wearing a helmet and this is hindering your breathing check, you should consider careful removal. Ensure that any chin straps have been undone and try to use others to keep the head and neck still and supported during gentle removal. If you are unsure or unwilling, call ambulance control for further guidance.

It is important to remember that we can live with injuries but we cannot live without air. It is therefore essential that the first aider recognises that airway and breathing problems, always need to be prioritised over injuries.



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# IF THE CASUALTY IS NOT BREATHING



- If the casualty is not breathing dial 999.
- Give 30 chest compressions, followed by 2 rescue breaths.
- If you are unwilling or unable to give rescue breaths, continue with chest compressions only.
- Continue with chest compressions and rescue breaths using the ratio of 30 compressions & 2 breaths.
- Only stop to recheck the casualty if they start to breath normally – otherwise don't unnecessarily interrupt resuscitation.
- If there is more than one rescuer, change over every 2 minutes to prevent fatigue.

Continue to give cycles of 30 chest compressions followed by 2 rescue breaths.



Compress the chest by at least one-third of its depth using two hands. Use two fingers for an infant under one year; use one or two hands for a child over one year as needed to achieve an adequate depth of compression (at least one third).



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