

# RUGBYSAFE ESSENTIAL GUIDE

## First Aid Equipment and Treatment

It is important to have appropriate first aid equipment readily accessible whenever any rugby activity is taking place; it is an RFU regulation that those organising rugby activity ensure that this is in place. Every club, school or rugby activity organiser should complete a risk assessment to determine what pitch-side first aid and immediate care support is required. This will be determined by the playing level, type of activity, facilities and number of participants.

Emergency first aid should only be given by **appropriately trained persons**. Clubs, schools etc. should maintain a list of all trained first aiders with expiration of qualifications recorded in order to make sure re-qualification is organised when required.

All first aiders should be appropriately equipped. It is recommended that each pitch-side first aider has their own first aid bag. A least one suitably stocked first aid box should also be situated in the club house.

Information on the recommended levels first aid and immediate care provision, together with other information on equipment, insurance and qualifications/training, can be found in the RFU's first aid and immediate care guidelines available at:

[www.englandrugby.com/rugbysafe/playing-environment/first-aid-immediate-care-guidelines](http://www.englandrugby.com/rugbysafe/playing-environment/first-aid-immediate-care-guidelines)

### First Aid Kits

First aid equipment should be appropriate to the level of training that the first aider or immediate care provider has received. No-one should attempt to use equipment they have not been trained to use.

A pitch-side first aid kit bag should be appropriate for its use, made of suitable material and designed to protect the contents appropriately.



A well-stocked pitch-side first aid kit should contain:

- 🌀 Accident Book (and pen)
- 🌀 Antibacterial hand gel
- 🌀 Assorted size sterile wound dressings
- 🌀 Assorted size adhesive plasters
- 🌀 Single use triangular bandages
- 🌀 Sterile eye pads
- 🌀 Resuscitation aid (Pocket Mask)
- 🌀 Micropore Tape
- 🌀 Tough cut scissors
- 🌀 Emergency foil blanket
- 🌀 Disposable gloves
- 🌀 Antiseptic wipes
- 🌀 Assorted size gauze swabs
- 🌀 Assorted size bandages (adhesive & non-adhesive)
- 🌀 Assorted size Sterile wound closure strips
- 🌀 Sterile Water pods
- 🌀 Disposable resuscitation aid (Field Shield)
- 🌀 Safety pins
- 🌀 Waste bag
- 🌀 Water bottle (for cleaning wounds)

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First aid equipment should be checked frequently to ensure sufficient quantities and that all items are usable. A process should be in place to ensure that the content is replenished as soon as possible after use, and it is recommended that clubs nominate a RugbySafe Lead to take the responsibility for this process across the club. Some items, particularly sterile ones, are marked with expiry dates. They should be replaced by the dates given and all expired items safely disposed of. In cases where sterile items have no dates, it would be advisable to check with the manufacturers to discover how long they can be kept. For non-sterile items without dates, it is a matter of judgement, based on whether they are fit for purpose.

## Action Cards



The Emergency First Aid in Rugby Union Action Cards are a useful resource to keep to hand in a First Aid Kit Bag, as they provide cues of what to do in different situations.

Every individual who attends the Emergency First Aid in Rugby Union (EFARU) course will receive a set of the action cards.

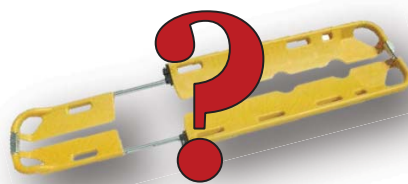
For more information on the EFARU course please go to: [www.englandrugby.com/rugbysafe/education/first-aid](http://www.englandrugby.com/rugbysafe/education/first-aid)

## Other First Aid Equipment

### Spinal Boards, Scoops and Stretchers

Spinal boards and scoops should **only** be used by those appropriately trained.

It is recommended that clubs have a folding stretcher available for use by the ambulance services and other appropriately trained individuals if required.



### Automated External Defibrillator (AED)



Clubs and schools may want to consider getting an Automated External Defibrillator (AED), especially if they are a hub for community activity. An AED on site may prove a lifesaver, as the potential for saving a life is dependent on time: the faster medical help is administered, the better the chance of survival.

The RFU is working with the Community Heartbeat Trust (CHT) to support clubs and schools in the purchasing and maintenance of AEDs, for more information please go to [www.englandrugby.com/rugbysafe/playing-environment](http://www.englandrugby.com/rugbysafe/playing-environment)

For clubs and schools who already have an AED, it is highly recommended that it is registered on the national database and with the local ambulance service. The CHT provide a free service for clubs and schools to do this.

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## First Aid Treatment

### Administration of Drugs



- Under **no circumstances** should any prescription or non-prescription (including paracetamol and aspirin) drugs be administered by first aiders or kept in a first aid kit.

Players (and/or parents) should take personal control of and responsibility for the administration of any required medication. Personal medications should be clearly labelled and stored separately from team first aid kits.

Schools may have their own policy that differs to this, such as permission to hold pupil medications on the premises.

### Petroleum Jelly (Vaseline)

Petroleum jelly can be used as part of the wound management process. It is important that this is done correctly, ensuring that the wound is irrigated and then dressed appropriately. Contamination is the main concern; therefore it should **only** applied using methods preventing contamination, such as a single use spatula.

It can also be used by players to protect sore feet, prevent blisters etc. In this case players should have their own supply. If petroleum jelly is stocked in a first aid kit, it should only be used for first aid purposes.



### Ice / Cold Treatment



Applying ice to a suspected injury is theoretically providing therapy which is not the role of a first aider. There is a growing body of research questioning the effectiveness of ice treatment, suggesting that applying ice to most injuries does not improve recovery. However, the NHS continues to recommend cold treatments for example PRICE (protection, rest, ice, compression and elevation) as an early intervention for some injuries such as a suspected sprain and bruising.

Therefore it may be appropriate to give players ice to self-treat an injury. Actual ice is more effective (and cheaper) than ice packs, as many ice packs don't get cold enough to have the desired effect. It is important to be aware of the potential for ice burn; a damp cloth/towel should always be placed between the ice and the skin to provide protection. Ice sprays are not advised for use in this situation.

In general, ice can be used as a safe treatment to reduce pain levels in the short term and it is unlikely to have a negative effect in the long term when used in a sensible and appropriate manner.

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Ice can help:

- Reduce bleeding into the tissues.
- Reduce swelling (inflammation).
- Reduce muscle pain and spasm.
- Reduce pain by numbing the area and by limiting the effects of swelling.
- Reduce stiffness.

## Do not use ice:

- Over areas of skin that are in poor condition.
- Over areas of skin with poor sensation to heat or cold.
- Over areas of the body with known poor circulation.
- If the individual has diabetes.
- In the presence of infection.
  
- Do not use ice on the left shoulder if the individual has a heart condition.
- Do not use ice around the front or side of the neck.

As ice can numb the pain and potentially mask an injury, it is recommended that if a player has received an injury requiring the application of ice, there should be consideration as to whether it is appropriate for the player, especially if a child, to return to play immediately.

## Heat Treatment

Heat **should not be used on a new injury** as it can increase bleeding and the blood flow around the injured area and may make the problem worse. Heat treatment **should not** be used on an injury that is swollen or inflamed.

Heat is sometimes used by therapists as an effective and safe treatment for some aches and pains; **however heat treatment should not be used as a first aid intervention.**

## Further Information



NHS choices provides comprehensive health information and guidance. Call **111** for non-emergency medical advice or visit the NHS choices website at [www.nhs.uk](http://www.nhs.uk)

Any questions about first aid and player welfare queries can be sent to [rugbysafe@rfu.com](mailto:rugbysafe@rfu.com) or call 0208 831 7693.

There are a number of Essential Guides and FAQs on various player welfare topics including:

- Emergency First Aid in Rugby Union Course
- Insurance and Record Keeping
- General Medical Condition



For more information go to: [www.englandrugby.com/rugbysafe/guides-and-faqs/](http://www.englandrugby.com/rugbysafe/guides-and-faqs/)

*Any advice provided by the RFU in relation to specific injuries, illnesses or disabilities is only general advice and it should not be used as a substitute for the individual advice patients receive when they consult their own doctor. Individuals are advised to consult their own General Practitioner or Hospital Consultant for specific advice on their condition and/or fitness to train for or play rugby.*

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