

儿童急救ppt课件

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01

儿童常见意外伤害概述



意外伤害定义与分类



意外伤害定义

指突然发生的、非本意的、可能对身体造成伤害的事件。

意外伤害分类

按伤害性质可分为机械性伤害、物理性伤害、化学性伤害和生物性伤害；
按伤害严重程度可分为轻伤、重伤和死亡。





儿童高发意外伤害类型



烫伤/烧伤



儿童皮肤娇嫩，接触热水、热汤、火焰等易导致烫伤或烧伤。

异物卡喉



儿童吞咽功能不完善，食用果冻、坚果等食品时易导致异物卡喉。

跌倒/坠落

儿童好奇心强，喜欢攀爬高处，易从高处跌落；地面湿滑、不平整也易导致跌倒。

锐器伤

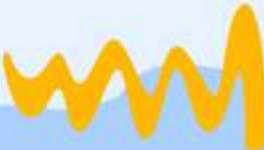


儿童使用刀具、剪刀等锐器时，如操作不当或家长看护不周，易导致划伤、刺伤等。

交通事故



儿童在道路上玩耍、奔跑时，如不注意交通安全，易发生交通事故。



以下附赠各项管理制度英文版（不需要可删）

急救药品、器材管理制度：

1. Rescue drugs and equipment should be "five fixed" (fixed quantity and variety, designated placement, designated person storage, regular disinfection and sterilization, regular inspection and maintenance) and "two timely" (timely inspection and maintenance, timely receipt and supplementation). The item is clearly marked and cannot be used arbitrarily.

2. The necessary rescue equipment is complete, in good performance, and in standby condition.

3. The rescue drugs are complete, with clear drug labels and no discoloration, deterioration, expiration, or damage. They should be placed and used in the order of drug expiration dates (from right to left).

4. Emergency drugs and items for each department's rescue vehicle shall be uniformly equipped according to requirements. Specialized emergency drugs and items must be reviewed and approved by the department director to determine the type, quantity, specifications, and dosage to be equipped. Rescue vehicles must be placed in designated locations and managed by designated personnel to ensure safety and ease of use.

5. After using rescue drugs and equipment, they should be fully replenished within 24 hours. If they cannot be replenished due to special reasons, they should be noted on the handover registration form and reported to the head nurse for coordination and resolution to ensure timely use during patient rescue.

6. There is a registration book for the provision of drugs and equipment. Ensure consistency between accounts and materials, and handover between shifts.

7. Management of sealed rescue vehicles: Before sealing, the head nurse (or nurse in charge) and another nurse shall count the drugs and equipment according to the registration book of drug and equipment equipment, verify their accuracy, and seal them with a seal. Two people shall sign and fill in the sealing time. Nurses check the condition of the seals once per shift and complete the handover. The responsible nurses check once a week, and the head nurse and responsible nurses open the seals and inspect the drugs and equipment in the ambulance once a month, with records kept.

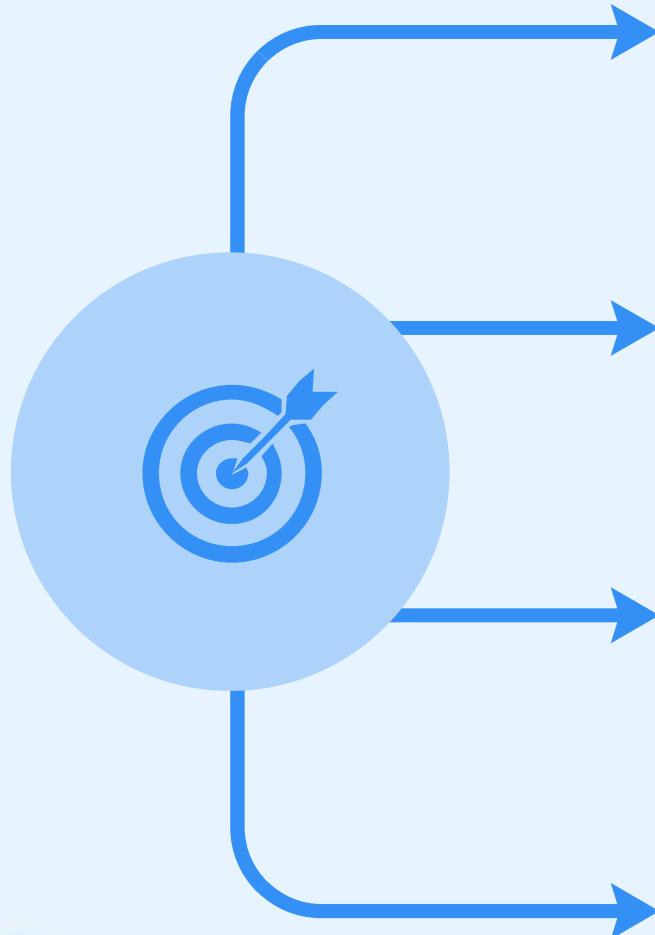
8. Non sealed rescue vehicle management: Each shift shall count the drugs and equipment according to the registration book and complete the handover. The responsible nurse shall inspect once a week, and the head nurse shall inspect once every two weeks and keep records, ensuring that the accounts match the materials.

护理文书书写制度：

1. Nursing staff strictly follow the latest requirements when writing nursing medical records.
2. The content of nursing records should be objective, truthful, accurate, timely, complete, and standardized.
3. All nursing documents should be written with a blue black or carbon ink pen.
4. All nursing documents should be written in Arabic numerals for date and time, with dates in years, months, and days, using a 24-hour system, specific to minutes. 5. Writing should use Chinese, medical terminology, and commonly used foreign language abbreviations; Complete record items; The text is neat, the handwriting is clear, and the layout is clean; Accurate expression, fluent sentences, simple and concise: correct format and punctuation, no typos.
6. When errors occur during the writing process, double line them on the wrong words, keep the original record clear and distinguishable, sign the modifier, indicate the modification time, continue to write the correct content, and do not use scraping, sticking, painting or other methods to cover up or remove the original handwriting. Each page should be modified no more than two times, otherwise the original recorder will promptly copy again (except for modifications made by superiors).
7. Nursing records written by intern nurses, probationary nurses, or unregistered nurses should be reviewed and signed by nurses with legal professional qualifications in this medical institution.
8. Further training nurses can only write nursing documents after being recognized by the medical institution receiving the training for their work ability.
9. Superior nursing staff have the responsibility to review and modify the written records of subordinate nursing staff. When making modifications, red double lines should be used to mark errors, write the modified content, sign and indicate the modification time.
10. Temperature records, medical orders, patient care records, and surgical inventory records should be archived on time.



预防措施及重要性



加强安全教育

家长和学校应加强对儿童的安全教育，提高儿童的安全意识和自我保护能力。

改善环境安全

家中应设置安全门槛、安装防护栏、铺设防滑地砖等，以改善家庭环境安全；学校应加强校园安全管理，确保学生在校园内的安全。

加强看护

家长应加强对儿童的看护，避免儿童独自接触危险物品或进行危险行为。

学习急救知识

家长和学校应学习基本的急救知识，以便在儿童发生意外伤害时能够及时采取正确的急救措施，降低伤害程度。

02

家庭环境安全与隐患排查



家庭环境安全标准



01

确保家具稳固，避免倾倒伤害

家具应放置平稳，重物靠近背部和腰部，避免孩子攀爬或悬挂导致倾倒。

02

电器设备及线路安全

定期检查电线是否老化、破损，插座是否松动、漏电，确保孩子无法接触或拉扯电线。

03

尖锐物品及危险物品管理

刀具、剪刀、针等尖锐物品应放置在孩子无法触及的地方，药品、清洁剂等危险物品应锁在柜子里。



隐患排查方法及技巧



01



定期全面检查



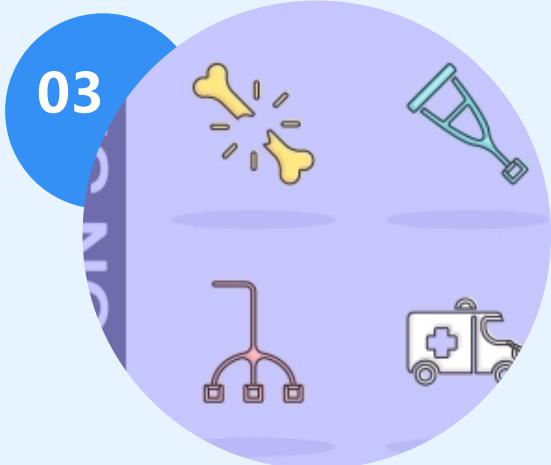
02



关注孩子行为



03



利用安全防护工具



每隔一段时间对家中进行全面检查，包括家具、电器、线路、尖锐物品等，确保没有遗漏。

观察孩子的日常行为，了解他们可能接触到的危险物品和区域，及时采取措施进行防范。

使用安全门、安全护栏、防撞条等工具，对孩子可能接触到的危险区域进行隔离和保护。





紧急处理预案制定



了解常见意外伤害处理方法

学习并掌握烫伤、摔伤、异物卡喉等常见意外伤害的紧急处理方法。



建立家庭急救箱

配备常用的急救药品和器材，如创可贴、纱布、消毒液、止痛药等，以便在发生意外时能够及时进行处理。



保持冷静并寻求帮助

在发生意外时保持冷静，根据孩子的伤势判断是否需要立即就医，同时拨打急救电话或向邻居求助。





03

儿童窒息急救方法与技巧



窒息原因及危险因素分析



异物堵塞

儿童在玩耍或进食时，可能因误吞异物导致呼吸道堵塞，引发窒息。



呕吐物反流

儿童在呕吐时，若呕吐物未能及时排出，可能反流至呼吸道，导致窒息。



喉部感染

喉部感染引发的肿胀也可能导致儿童窒息。



危险因素

家中细小杂物、不合适的玩具、儿童独自进食等。

以上内容仅为本文档的试下载部分，为可阅读页数的一半内容。如要下载或阅读全文，请访问：

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