

PRO RIDER

# FIRST RESPONSE

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From minor injury to major catastrophe, this is the realm of accidents that may, unfortunately, occur to us, our friends and fellow bikers. But what would you or could you do after the accident?

**W**ell, much of this is so situationally dependent that we can't cover it all here. The first thing though is to be prepared. Just like preparing a motorcycle we can prepare for these possibilities by taking some simple steps; a basic first-aid course is important and not just for motorcycling, so go do a course. Have you got a charged cell-phone as you may need to contact an emergency service or two or even the partner at home to say that you will be delayed? Do you have a basic first-aid kit? It doesn't need to be fancy, but some gloves, plasters, gauze squares, a simple saline solution

and a few bandages would be good? How about some Paracetamol? It helps more than people give it credit for...

## FIRST RESPONSE

So, an accident has happened, and we need to make sure that things are safe (for us, them and the other road users). Call for help or get someone else to call for help. Move to an area with signal or go to a house/farm that may have a landline. Do you know the location to give to the emergency call handler? The name of the road and in what area are essential, maybe the distance from the start of that road or a close by

property number?

Be prepared to be bombarded with questions when calling; they need to send the right resources to the correct place.

Statistics show that most accidents happen on bends, so consider which side of the road you're on and place a bike in a clearly visible spot on that side of the road to warn oncoming vehicles that something has happened. A distance from 10 to 50 metres would likely work depending on the circumstances, or if you are in a group, get someone at each end to wave people down. Are we safe, can we be seen? Remember, we can't render help if we are a casualty too. Turn the





crashed bike off if it's still running and only consider moving it if it is causing immediate danger; it can be moved later.

### WHAT'S NEXT?

Now to the rider and or pillion and a basic assessment. If they are walking and talking (more likely to be swearing) then things are looking good. But if someone is quiet, then they are the one we are going to concentrate on.

We need to check that they have a good airway (noting that this is different from breathing) and to do that we need to look and listen. If the rider can take their helmet off themselves, then allow this. Modular (flip) helmets allow for this as do open face ones, but if it's a full face helmet we can't tell if they are breathing so we need to seriously consider removing the helmet.

This is where things get serious. It's a two-person job ideally, with one supporting the head and neck and the other to roll the helmet off. It is important, and if we can't see the airway or if we hear unusual breathing, it is paramount in caring for this person. People struggle with the "I could paralyse them" debate, but without a clear airway, they will die. Any damage caused was very likely caused by the accident and not our intervention. Some newer helmets have an 'Emergency Quick Release System' or E.Q.R.S, where you can pull the cheek pads out to make removing the helmet easier. They have little red

tabs under the chin on the bottom edge of the cheek pads, so check for them.

How is their breathing? If they are unconscious, then lay them in the recovery position (on their side). Our only tool to help a conscious person with difficulty breathing might be positioning them, and if they can, get into a sitting position. This is generally better than laying down.

Circulation would be our next assessment, and here let's make things simple; are they pale, grey or blue and is there obvious life-threatening bleeding? If there is a pool of blood, explore where it is coming from and use firm direct pressure to try to stop it. It is VERY rare to need more than this. If their colour is abnormal, explore for bleeding hidden by protective clothing and apply direct pressure if you find external bleeding.

### WORST CASE SCENARIO

Now all this is a circumstance that we hope that we don't encounter, so remember that most falls from bikes lead to grazes, bruises, maybe a broken bone or a head injury. Cover grazes with

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a gauze (ideally a damp one with saline), bruises are untreatable in this circumstance, broken bones need support and most people self-support their injury (or their clothing does), and they try not to move much. Head injuries may cause confusion, disorientation, nausea and vomiting, so be prepared for this.

Supportive care and reassurance are all that we can do here with the lack of available resources.

Keeping the person warm and dry is important. So with wet clothes consider removing them if you can replace them with something warm (space blankets are not warm on their own).

Are you riding alone? Have your cell phone on you and not on your bike; you may need to 'self-rescue'. Personal details in a wallet are useful like your full name, date of birth (on the licence) and your address (on some licences). Any medical problems that you might have like allergies etc. would give the emergency services a helping hand in your care.

Accidents happen so be prepared for the worst. And like any insurance, you hope never to need it.

