FIRST AID GUIDE FOR FOOTBALL REFEREES

First Aid is the application of initial care to injuries or illnesses. It is used to prevent and to contain injuries, whether they might be superficial or not. First Aid is proven to save lives. This guide follows Finnish guidelines and protocols for First Aid, which are renewed every few years.

Football is a sport where injuries are unavoidable. When they happen First Aid is provided by the injured player’s club’s health team, but in the most serious cases ambulance must be called. In general, there are not ambulances at the Finnish lower divisions matches. As it would take some time until ambulance arrives to the field, the person in charge of the game, and in this case the referee, should take control of every situation. When First Aid is needed immediately, as the referees are the ones closest to the players, they would be the right people to provide the care needed until ambulance arrives.

This guide contains First Aid steps for those considered serious injuries that happen in football matches.
CHEST PAIN

1. Call 112

2. Calm person down

3. Help injured to half-sitting position

4. Offer, if available, Aspirine following the given instructions from the emergency call. It can not be given if person is allergic to acetylsalicylic acid.

5. Check the person is breathing normally
UNCONSCIOUSNESS & CPR

1. Try to wake up the patient by shaking the body and talking to him/her. If person doesn’t wake up, CALL 112

2. Keep onlookers away, check if the person is breathing normally

If breathing, put injured player in RECOVERY POSITION

1. Place person’s arm in 90°, hand pointing upwards

2. Place the other hand on the other’s side’s cheek

3. Lift up in 90° the knee from the same side

4. Pull towards you until person lies on his/her side

5. Raise the chin by pulling up with your hand to open airways

6. Arms and legs correctly placed should support the position
If NOT breathing, CPR should be applied (Cardio-pulmonary resuscitation)

1. Injured player should be on a hard surface
2. Open airways by raising the chin up with one hand
3. Place the heel on your hand on the middle of the breastbone
4. Place your other heel on top of the other hand. Your arms should be straight and in a perpendicular position from the chest. Start CPR with 30 COMPRESSIONS.
5. After compressions are should be blown into person’s lungs through the mouth. Open airways again with one hand, close person’s nose by pinching the nostrils with your other hand and BLOW 2 TIMES. When blowing, chest should move up and down as a sign that air is going correctly to the lungs.

Compressions should be 5-6 cm deep and in a rate of 100-120 times/minute. Use your body’s weight and not your arm’s strength.

The way of applying CPR is 30 compressions + 2 air blows (30/2). Continue with this rule until ambulance arrives. If person starts to breath again, put in RECOVERY POSITION (See page 4)
SEIZURES

1. Call 112
2. Keep onlookers away
3. Don’t hold the person down or put anything inside the mouth. Remove nearby objects that could hurt physical integrity
4. Never leave person alone
5. Keep airways open
6. When seizure calms down, put in RECOVERY POSITION (See page 4)
HEAD INJURY

1. Call 112

2. Minimize movement of the head

3. Keep onlookers away

4. Check the person is breathing normally

5. If person is unconscious and not breathing, apply CPR (See page 5)
FRACTURES & DISLOCATIONS

1. Support injury with clothing items and/or hands if fracture or joint dislocation is in the upper body. Use your other leg to support if injury is in your lower extremity.

2. Prevent any movement of the fracture bone or dislocated joint.

3. Put cold in the injured area. It relieves swelling and pain.

4. Doctor check-up is needed. If person is not able to go to hospital, Call 112.
REFERENCES


