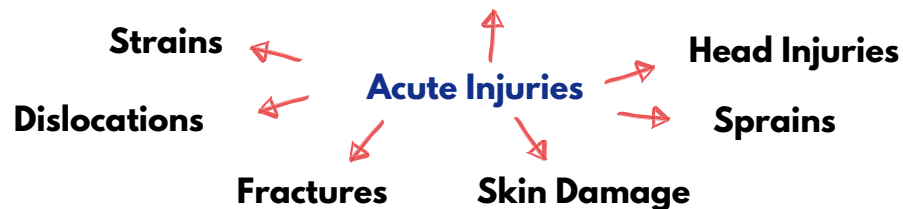
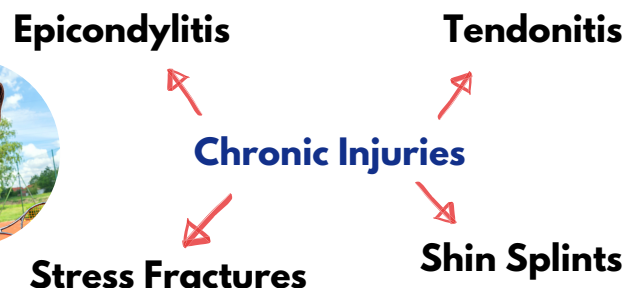


Soft Tissue and Hard Tissue Injuries



TOPIC AREA 3



SPORT SCIENCE R180

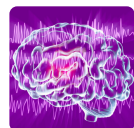
Medical Conditions



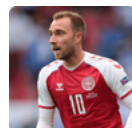
Asthma



Diabetes



Epilepsy



Sudden Cardiac Arrest

TOPIC AREA 5

Other Medical Conditions

Hypothermia

Body temp drops below 35 degrees.



Heat Exhaustion

Body temperature above 38 degrees



Dehydration

Loss of bodily fluids



Injury Treatment

Massage

Relieves pain and knots in the muscle tissue.

Immobilisation

Stabilising an injury by preventing the muscle, joint or limb from moving or bearing weight.

Electrotherapy

Electrical impulses sent through the skin to reduce pain

Taping/Bandaging

Can be used for muscle injuries or for wounds that are in danger of infection

Cast/sling/splint

Used for fractured bones and helps keep the area still while it recovers

Support

Prevents further damage taking place e.g. knee brace

Hydrotherapy

The use of water in the treatment of various conditions

Ibuprofen

Medication that reduces swelling

Ultrasound

Sound waves are used to increase temperature and blood flow to the injured area

Contrast Therapy

The injured area is subjected to both heat and cold therapy

Cryotherapy

The use of extreme cold to remove abnormal tissue

Painkillers

Medication that reduces pain

TOPIC AREA 4

EAPs

1. Emergency Personnel

→ A first-aider, physio or coach responds to the injury

2. Emergency Communication

→ If necessary, a phone call is made to emergency services or medical personnel

3. Emergency Equipment

→ This may include first aid kits, stretcher, defibrillator etc

Treating Minor Injuries

Protection - The injured area should be protected from further damage. E.g. with a bandage or brace

Rest - This is the only way that the body will have time to fix the injury.

Ice - This will reduce blood flow to the area, meaning that less swelling occurs and a quicker recovery is possible.

Compression - Compressing the injury can decrease swelling

Elevation - This can mean that gravity assists in sending blood flow away from the injured area



DRABC

Danger - Assessing any immediate danger to themselves or the casualty

Response - Assessing whether the casualty responds in any way to communication

Airway - Put two fingers on the chin to open up the airway

Breathing - 10 seconds should be spent checking for signs of breathing e.g. is the chest rising

Circulation - If there are no signs of breathing, emergency services should be called and CPR should take place to try to restart circulation



SALTAPS

See
Ask
Look
Touch
Active
Passive
Strength

