NAME:  YUSUF SALIMAT OLANSHILE

MATRIC NUMBER: 16/MHS02/052

COURSE CODE: NSC408

                                 ASSIGNMENT

1. Management of cardiac arrest.

2. Management of carbon monoxide.

3. Management of epistaxis.

4. Management of foreign body in the nose.

                                     ANSWER

1. Management of cardiac arrest.

\* Position patient in a recumbent state, on a flat surface, tilt the head backwards.

\* Remove tight clothing.

\* Strike a pre-cordial bow with the fist on the patients’ sternum.

\* Start resuscitation mouth to mouth and chest compression, ratio one person 15 compressions per 2 lung ventilations two persons: 4-5 comprehension/1 ventilation.

\* Observation of carotid pulse rate, skin color and return to the normal respiration. If in hospital airway should be inserted.

\* Arrange for medical aid.

2.  Management of carbon monoxide poisoning

a) Get the person to fresh air

\* Move the person away from carbon monoxide area.

\* If the person is unconscious, check for injuries before moving.

\* Turn off carbon monoxide source if you can do so safely.

b)  Call 911

c) Begin CPR, if necessary

if the person is unresponsive, not breathing, or not breathing normally;

\* Perform CPR for one minute before calling 911 if you are alone. Otherwise, have someone else call and begin CPR.

\* For a child, start CPR for children.

\* Continue CPR until the person begins breathing or emergency help arrives.

d) Follow up

Once at the hospital, the person is treated with 100% oxygen. Depending on the severity of the carbon monoxide exposure, oxygen is delivered in different ways.

\* Mild poisoning is treated with oxygen delivered by a mask.

\* Severe carbon monoxide poisoning may require placing the person in a full body, high p-pressure chamber to help force oxygen into the body.

3. Management of epistaxis.

\* Assess the site of bleeding from the nose.

\* Reassure patient and relative appropriately.

\* Sit victim down with the head forward to prevent swallowing and aspiration of food.

\* Loosen tight clothing round the neck and chest.

\* Place the patient in well lit and ventilated area.

\* Instruct patient to breathe through the mouth and pinch the nose for 10-15 minutes.

\* Partially insert a small gauze pad into the nostril and apply digital pressure if bleeding continues.

\* Apply ice compress to the bridge of the nose.

\* Instruct patients not to speak, swallow, cough, spit, sniff or blow nose as any of these may disturb blood clot formation.

\* Gently clean the nostril to mop up dribble.

\* Where available adrenaline nasal pack is prepared and inserted to help constrict nasal blood vessels.

\* Arrange for medical aid.

4) Management of foreign body in the nose

\* Reassure patient appropriately to instill hope.

\* Place patient in upright position.

\* Assess the victims’ nostrils to know the extent of the foreign body.

\* Instruct the victim not to poke inside or attempt removal of foreign object to avoid pushing the object further inside.

\* Close the unaffected nostril and tell the patient to blow out through the affected one.

\* Do not attempt to remove the foreign body, even if you can see.

\*Encourage the victim to breathe through the mouth.

Arrange to take or send victim to the hospital where the object can be safely removed