

## First Aid Treatment – General

Emergency first aid should only be given by **appropriately trained** persons. Clubs, schools etc. should maintain a list of all trained first aiders with expiration of qualifications recorded in order to make sure re-qualification is organised when required.

All first aiders should be appropriately equipped. It is recommended that each pitch-side first aider has their own first aid bag. A least one suitably stocked first aid box should also be situated in the club house. The **First Aid Facilities and Equipment Rugby Safe Essential Guide** (available on the [RugbySafe Essential Guides & Resources page](#)) provides more detail and recommendations on what first aid facilities and equipment (including first aid kit contents) should be in place when rugby activity is occurring.



Further information on the recommended minimum operating standards of pitch-side first aid and immediate care provision and the related qualifications and training, can be found in the [RugbySafe pages](#).

### First Aid Treatment

#### Administration of Drugs



Under **no circumstances** should any prescription or non-prescription (including paracetamol and aspirin) drugs be administered by first aiders or kept in a first aid kit.

Players (and/or parents) should take personal control of and responsibility for the administration of any required medication. Personal medications should be clearly labelled and stored separately from team first aid kits.

Schools may have their own policy that differs to this, such as permission to hold pupil medications on the premises.

#### Petroleum Jelly

Petroleum jelly (e.g. Vaseline) can be used as part of the wound management process. It is important that this is done correctly, ensuring that the wound is irrigated and then dressed appropriately. Contamination is the main concern; therefore it should **only** applied using methods preventing contamination, such as a single use spatula.

It can also be used by players to protect sore feet, prevent blisters etc. In this case players should have their own supply. If petroleum jelly is stocked in a first aid kit, it should only be used for first aid purposes.



April 2019

Teamwork Respect Enjoyment Discipline Sportsmanship

## Ice / Cold Treatment






Applying ice to a suspected injury is theoretically providing therapy which is not the role of a first aider. There is a growing body of research questioning the effectiveness of ice treatment, suggesting that applying ice to most injuries does not improve recovery. However, the NHS continues to recommend cold treatments for example PRICE (protection, rest, ice, compression and elevation) as an early intervention for some injuries such as a suspected sprain and bruising.










Therefore it may be appropriate to give players ice to self-treat an injury. Actual ice is more effective (and cheaper) than ice packs, as many ice packs don't get cold enough to have the desired effect. It is important to be aware of the potential for ice burn; a damp cloth/towel should always be placed between the ice and the skin to provide protection. Ice sprays are not advised for use in this situation.

In general, ice can be used as a safe treatment to reduce pain levels in the short term and it is unlikely to have a negative effect in the long term when used in a sensible and appropriate manner.

Ice can help:

-  Reduce bleeding into the tissues.
-  Reduce swelling (inflammation).
-  Reduce muscle pain and spasm.
-  Reduce pain by numbing the area and by limiting the effects of swelling.
-  Reduce stiffness.

Do not use ice:

-  Over areas of skin that are in poor condition.
-  Over areas of skin with poor sensation to heat or cold.
-  Over areas of the body with known poor circulation.
-  If the individual has diabetes.
-  In the presence of infection.
  
-  Do not use ice on the left shoulder if the individual has a heart condition.
-  Do not use ice around the front or side of the neck.

As ice can numb the pain and potentially mask an injury, it is recommended that if a player has received an injury requiring the application of ice, there should be consideration as to whether it is appropriate for the player, especially if a child, to return to play immediately.

The NHS provides information on how to treat generic sports injuries such as sprains and strains, visit the [NHS Sport Injuries Treatment page](#) for more information.

## Heat Treatment

Heat **should not be used on a new injury** as it can increase bleeding and the blood flow around the injured area and may make the problem worse. Heat treatment **should not** be used on an injury that is swollen or inflamed.




Heat is sometimes used by therapists as an effective and safe treatment for some aches and pains; however heat treatment should not be used as a first aid intervention.

## Further Information

The NHS provides comprehensive health information and guidance. Call 111 for non-emergency medical advice or visit the [NHS website](#).



There are a number of RugbySafe Essential Guides on first aid provision, medical conditions and various player welfare topics including:

-  Medical Conditions (General)
-  First Aid Facilities and Equipment
-  Protective Equipment

For more information go to the [RugbySafe Essential Guides & Resources page](#)

*Any advice provided by the RFU in relation to specific injuries, illnesses or disabilities is only general advice and it should not be used as a substitute for the individual advice patients receive when they consult their own doctor. Individuals are advised to consult their own General Practitioner or Hospital Consultant for specific advice on their condition and/or fitness to train for or play rugby.*