

# Managing a Motorcycle Crash 101: Part II

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You're out for a ride one day, come upon a downed rider and decide to stop to help: You've found the helmet-less rider lying face up in an empty field about 20 feet from his bike and called 911. The next step is to take a deep, cleansing, relaxing breath and say your ABCs! Airway, Breathing, Circulation. Airway: is the airway open? If the person is breathing or talking to you that's a yes to A and B. If they are not breathing well or at all what do you do? You reach way back in your memory to your last CPR class and discover to your amazement that you remember how to correctly open an airway using jaw thrust maneuver. If you've recently taken CPR you learned the head-tilt, chin-lift. You employ either of these simple techniques effectively opening the rider's airway. If they're going to breathe on their own they should begin now. If they don't start breathing you need to consider if you want to begin mouth-to-mouth ventilations.

Mouth-to-mouth ventilation has become a very controversial subject in recent years due to the public's fear of blood-borne diseases such as HIV and Hepatitis B. And rightly so! You may have noticed a CPR pocket mask listed in the contents of the first aid kit in my last article. This will help protect you from blood, vomit and other nasty things you may encounter when performing this very intimate, but life saving procedure. And it is life saving! Nevertheless, performing mouth-to-mouth ventilations is a choice you have to make for yourself and, without using a mask, is a choice even I'd have to think twice about doing as a professional rescuer. Refer to rule number one: rescuer safety.

I digress. Let's say your injured rider is breathing on his own. How well is he breathing? This is B for breathing. Does it sound like he's breathing well? You don't have to be a medical professional to know the answer to this. Is he snoring or gurgling when he breathes? Is he turning blue or purple? If the answer is yes to any of these questions then the answer is "no" he's not breathing well and his ability to breathe effectively is compromised. If there's fluid in his mouth then you may have to roll him on his side to clear his airway.

Yeah, yeah, I know that I said not to move the injured person. Well, at this point if he's drowning on blood, vomit or his own saliva then you've just entered another kind of emergent situation. Now you recall the accident scene management class you took last summer in which you learned how to assist EMS in "log rolling" a person on their side. This should only be done by persons trained in this technique to reduce the chance of exacerbating an existing injury! But if the injured person is unable to breathe effectively then you need to roll them to their side while supporting their head. You will need to keep them on their side until help arrives. You enlist the aid of two buddies you were riding with as this is much easier to accomplish with help. If the person is only snoring, the jaw thrust maneuver should correct that problem and there is no need to roll them on their side.

Be sure to read Part III, the final chapter, in the next issue of Shootin' the Breeze! Ride Safe!

\* The purpose of this article is not to teach the layperson the skills mentioned above. This should be done in a professional class setting as it involves skills that may cause harm if performed incorrectly.

Seek an organization in your area like Accident Scene Management, Inc. (<http://www.accidentscene.net/>), the American Red Cross, the American Heart Association or your hospital to learn more.