



5-minute safety talk

Confined Space **Rescue**

Specially trained professionals often perform confined space rescue, however you may find yourself in a situation where you need to render help in a very small space until further resources arrive. There are unusual challenges that you should be aware of while operating or treating a patient in a confined space.

Know the Environment

When you initiate patient care in a restricted environment, it is important to know the factors that may affect you, your team, and the patient. You should be aware of the temperature and make plans for keeping the ambient temperature comfortable. This may mean portable heaters in winter or tarps to block the sun in the summer. You should know the immediate dangers of the situation including the risk of further collapse, explosion, or bad air quality where you are planning to provide patient care. While it is important to provide good, timely patient care, you should not risk the safety of the rescuers. If the scene is determined to be unsafe for operations, ALL team members must accept that.

Personal Accountability

It is very important that one person keep track of the movement and well-being of the

rescuers. All rescuers who enter a confined space should be accounted for and their time of operation monitored. Never enter a rescue operation in a tunnel or confined space without checking in with the safety officer or other designee. Check your partners' safety gear before you let them enter a rescue space. All gear should be on and secured including helmet; eye and ear protection; gloves; and mask or breathing apparatus. Your partner should check your safety gear as well.

Patient Care

While caring for a patient trapped in a small space, keep him/her calm and as comfortable as possible. The patient should be outfitted with a helmet, eye, and ear protection, as well as blankets to protect them from debris. It is important to assess for immediate life threats and treat the patient as quickly as possible. The environment may prevent you from typical patient care techniques so be ready to adapt to each situation. You may have to monitor blood pressures using palpation rather than auscultation because of noise. Rather than a hare traction splint, you may need to stabilize the femur with a rolled blanket until the patient is safely in the ambulance.

While in the confined space, watch your team for signs of hypoxia or stress. Early signs of inadequate oxygen include confusion, agitation, anxiety, and sleepiness. If you or your partner suddenly gets uncomfortable in tight spaces, be quick to facilitate his/her removal and replacement by another team member.

Communication

Good communication is a challenge on most emergency scenes, especially when the team is operating at a collapse scene where noise and commotion can disrupt typical lines of communication. Remember to relay patient condition reports to the incident commander at regular intervals. Let him/her know if you anticipate further equipment or medication needs. As the rescuer, it is very important that you are kept aware of any operational tasks such as structure shifts and stabilization, breach attempts, or HAZMAT identifications.

Confined space rescue and patient care offers unique challenges for which some providers are specially trained. Since we are often the first on the scene, we must have a general understanding of those challenges in order to initiate patient care if the scene allows, and maintain the patient care until further resources can arrive.

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