



Department of
**Local Government, Sport
and Cultural Industries**



Emergency Response Procedures

Woodman Point Recreation Camp

This document has been developed as part of the Safety and Emergency Documentation Framework – Woodman Point Recreation Camp.

Purpose

This abridged version of the Woodman Point Recreation Camp’s Emergency Response Procedures will assist group leaders and participants to respond effectively and safely to emergency situations. They should not be regarded as rigid but rather as flexible guidelines to be adapted to cope with any unanticipated situations.

Type of emergency	Code	Sub-type	Page
Evacuation	ORANGE	Evacuation procedures	11
External emergency	BROWN	Earthquake/tsunami/surge	12
Medical emergency	BLUE	General	13
		Gastroenteritis	14
		COVID-19	14
Fire	RED	Fire/smoke	15
Personal threat	BLACK	Intrusion/hold-up	16
Internal emergency	YELLOW	Missing person	17
		Unforeseen emergency	18
Bomb/substance	PURPLE	Bomb threat/package	N/A

These procedures were formulated to meet the requirements of Australian Standard AS3745-2010 Emergency Control Organisation and Procedures for Buildings, and the National Competency Standard – Fire Emergency Response. Woodman Point Recreation Camp staff refer to additional Critical Incident and Emergency Response documents, covering detailed responses and management of emergency situations.

Emergency contact numbers

Camp address: Woodman Point Recreation Camp, O’Kane Court, Coogee WA 6166.

Nearest main road intersection: Cockburn Road. When giving directions, use suburb name ‘Munster’.

Front gate access: Gate code will be provided as necessary or on request.

Emergency	Emergency services (If 000 is not working from older mobiles pre-2002)	000 112
Woodman Point Camp	Camp office Emergency on-call staff member	9492 9797 0414 448 088
Police	Police assistance (non-emergencies)	131 444
	Cockburn Police	6174 9666
	Cockburn Police mobile for Coogee/Spearwood	0466 318 134
	Water Police 24 hours, including shark sightings	9442 8600
Fire	Success Fire Station (non-emergencies) DFES recorded information line	9417 2394 1300 657 209
Hospitals Maps on page 20	Fiona Stanley Public Hospital, Murdoch St. John of God Hospital, Murdoch (Private) Perth Children’s Hospital, Nedlands	6152 2222 9366 1111 6456 2222
Medical centres	St John Urgent Care [see map] (Cockburn Gateway Shopping City, 816 Beeliar Drive Success 8 am to 9 pm (Dental 8 am to 6 pm)	6174 6000
	Phoenix Medical Clinic, Spearwood (Rockingham Road – will take after-hours emergencies)	9434 3555
	Fremantle After Hours GP (Block A, Fremantle Hospital, South Tce – Mon to Fri: 12 – 8am, 6pm – 12am; Sat: 12 – 8am, 12pm – 12am; Sun: Open 24 hours	9430 8912
	Healthdirect 24hr/After-Hours GP	1800 022 222
WA Poisons Info	24hr Poisons and Bites/Stings Information Line	13 11 26
SES	General assistance – State Emergency Service Cockburn SES Unit	132 500 9418 5800
Rangers/security	City of Cockburn Ranger Services City of Cockburn Security	9411 3444 1300 653 643
Western Power	Report and enquire faults and emergencies	13 13 51
Water Corp	Faults, emergencies and security	13 13 75
Covid-19 Helpline	National COVID-19 Hotline (24/7)	1800 020 080

All numbers correct as of December 2024.

Key emergency locations

















- **Emergency muster point** is at the southern corner of the office.
- **Emergency evacuation** will be via either the front gate or the beach.
- **Fire extinguishers** are in or at the main kitchen/dining area, recreation hall, office, on-site residence, program shed and storage sheds. There are extinguishers located in each of the accommodation areas.
- **An Automatic Electronic Defibrillator (AED) and EpiPen** is available for after-hours emergencies, located on the front veranda of the camp office in a white cabinet. Phone 000 for the access code.
- **EpiPens** are also kept in the chef's office at the main camp kitchen.
- **First aid kits, medical oxygen and spinal board** are available by contacting camp staff only. Access of this equipment is limited to trained and qualified camp staff. Groups should make their own arrangements for the supply of first aid kits throughout their stay, including the provision of emergency equipment and medication relevant to their group (such as EpiPens for anaphylaxis, Ventolin for asthma, etc).

In an emergency, please contact emergency services and camp management immediately!

(If life-threatening, call 000 before alerting camp staff).

Emergency resources

Fire extinguishers

Two colour schemes for fire extinguishers exist.		TYPE OF FIRE, CLASS AND SUITABILITY							Comments
Pre-1997	Current	Extinguishing Agent	A Wood Paper Plastic	B Flammable & Combustible Liquids	C Flammable Gases	E Electrically Energised Equipment	F Cooking Oils and Fats	D Metal Fires	
		Water	YES	NO	NO	NO	NO		Dangerous if used on flammable liquid, energised electrical equipment and cooking oil/fat fires.
		Wet Chemical	YES	NO	NO	NO	YES		Dangerous if used on energised electrical equipment.
		Foam*	YES	YES	NO	NO	LIMITED		Dangerous if used on energised electrical equipment.
		Powder	(ABE) YES	YES	YES	YES	NO		Look carefully at the extinguisher to determine if it is a BE or ABE unit as the capability is different.
			(BE) NO	YES	YES	YES	YES		
		Carbon Dioxide	LIMITED	LIMITED	NO	YES	NO		Not suitable for outdoor use or smouldering deep-seated A Class Fires. Suitable for small fires only.
		Vaporising Liquid	YES	LIMITED	LIMITED	YES	NO		Check the characteristics of the specific extinguishing agent.
		Fire Blanket	LIMITED*	LIMITED	NO	NO	YES		* Fire Blankets may be used as a thermal barrier against radiated heat and to control a fire in clothes being worn by a person.
		Fire Hose Reel	YES	NO	NO	NO	NO		Maximum length of hose is 36m.

■ The class in which the agent is most effective. **LIMITED** The Extinguishant is not the agent of choice for the class of fire, but it may have a limited extinguishing capability.
■ Not recommend for this class of fires. * Solvents such as alcohol or acetone mix with water and therefore require special foam.

Key:

Around site

Only in main kitchen

Medical oxygen

- Available by contacting camp staff (emergency on-call mobile 0414 448 088)
- Can only be provided by qualified staff.

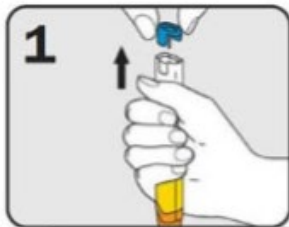
Automatic Electronic Defibrillator (AED)

- Located in white cabinet on the veranda of the camp office. Phone 000 for access code.
- Open red zippered case, push green power button and follow verbal instructions.

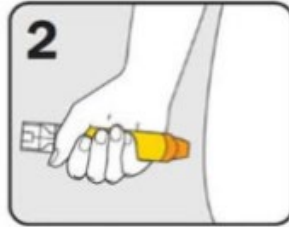
EpiPens and Anapens

How to give EpiPen®

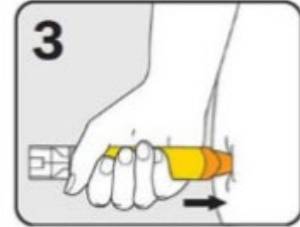
adrenaline (epinephrine) autoinjectors



1. Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE



2. Hold leg still and PLACE ORANGE END against outer mid-thigh (with or without clothing)



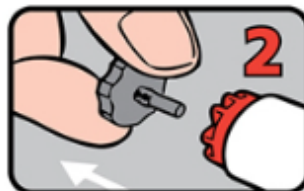
3. PUSH DOWN HARD until a click is heard or felt and hold for 3 seconds REMOVE EpiPen®

How to give Anapen®

adrenaline (epinephrine) autoinjectors



1. PULL OFF BLACK NEEDLE SHIELD



2. PULL OFF GREY SAFETY CAP from red button



3. PLACE NEEDLE END FIRMLY against outer mid-thigh at 90° angle (with or without clothing)



4. PRESS RED BUTTON so it clicks and hold for 10 seconds. REMOVE Anapen®

Communications

The office has land line telephones (phone 08 9492 9797) and access to the internet. The main kitchen has a land line telephone in the chef's office (phone 08 6365 1834).

DLGSC public WiFi is also available at some locations around the site. Contact camp staff for access/password.

If emergency assembly is required a blast horn will be sounded repeatedly. Wardens will travel on foot or via camp vehicles with the blast siren to alert all people onsite and give directions to the muster point as required.

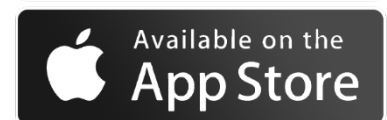
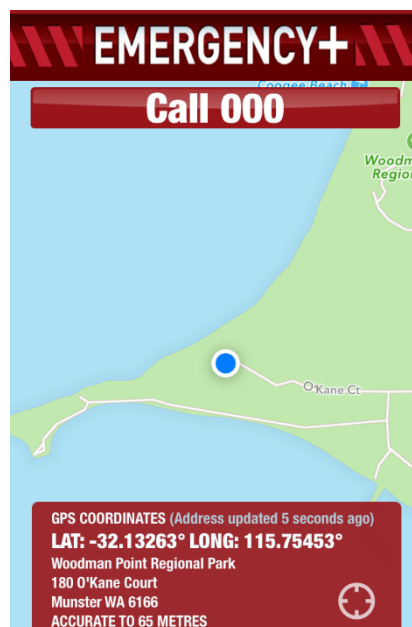
Residential or day group leaders are to be contacted by mobile phone where possible.

On a weekend where the site may not be attended by a staff member, mobile phone will be the primary means of contact until a staff member is onsite. Note that mobile reception may be poor in some areas of the camp.

Refer to emergency evacuation signage located in each building for more information.

Emergency+ App

Groups leader may also want to consider downloading the free mobile app on Apple and Android devices – 'Emergency +'. It is a useful app that helps to locate your position in an emergency and provides a range of non-critical phone numbers in Australia that may assist in an emergency or incident.



Initial response

In the event of an incident or accident it is expected staff on site will in accordance with the DLGSC Camps Critical Incident Management Planning and Learning (CIMPL) plan:

1. Ensure own safety.
2. Provide direction to ensure bystanders safety.
3. Care for casualties according to training
“DRSABCD” should be followed:
 - Danger
 - Response
 - Send for help
 - Airway
 - Breathing
 - Compressions
 - Defibrillation
4. Notify office or other parties as soon as practicable to enable secondary emergency actions to commence.
5. If emergency siren sounds and/or call given by radio communication, head to assembly point as a group, following instructions from Wardens.

Notes

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Evacuation

Personal evacuation

- Remain calm.
- Collect your immediate belongings, for example: wallet, keys, phone.
- Turn off any plant or machinery in your immediate area, if applicable.
- Remember, if you see danger, evacuate immediately and advise staff and/or emergency services.
- Do not re-enter buildings until DFES or the chief warden advise it is safe to do so.

Group evacuation

When you hear an evacuation siren, or you are directed to evacuate by DFES or a Warden:

- Proceed to your nearest exit.
- Calmly evacuate to the muster point at the camp office. If the muster point is not safe, move to a safer location as a group (like the middle of the oval, beach, etc.).
- Do not re-enter buildings until DFES or the chief warden advise it is safe to do so.

Fire alarm

- If you hear a fire alarm, prepare to evacuate and wait for instruction from DFES or a warden.
- Refer to **CODE RED** procedures.
- Remember, if you see danger, evacuate immediately and advise staff and/or emergency services.

A fire alarm does not necessarily mean there is a fire, due to a false alarm. However, there could be an actual fire in a roof space or another room/building that is not immediately obvious.

All fire alarms require DFES fire crews to attend the site and conduct an inspection at the source of the alarm.

Flood, tsunami, storm surge or earthquake

- Follow directions of wardens.
- Emergency **horn** to be sounded if appropriate.
Assemble at the muster point outside the office.
- Account for all group members and ensure their immediate safety.
Adults ____ Children ____ Total ____
- Follow instructions from DFES _____
- Is it best to **stay or evacuate?** _____
- Tsunami threat — move group to higher/safer ground if possible
 - If there is **sufficient warning**, transport group quickly and safely out of the camp to the end of O’Kane Court and turn left on Cockburn Road. Locate the two houses on the opposite side of Cockburn Road and walk up the path behind the cottages to the Lighthouse. Remain at the Lighthouse.
 - If there is **insufficient warning** to move away from the site, the safest building during a tsunami is the CUBE. Move group inside the cube, shut all doors, locate weak swimmers near climbing apparatus or internal ladder. Use internal ladder, platforms and elevated doorways to exit the building as required. **DO NOT USE THE ROOF AS AN EVACUATION PLATFORM.** Determine if the threat of secondary waves has passed before deciding to leave the building.
- Inform group** of situation and response
Is **everyone accounted** for?
- Complete reports**, ensure relevant persons are notified

General medical emergency

- Assess accessibility and condition of casualty, if no vehicle access will DFES also be required for transportation?
- If required **call 000**, provide information on numbers at site
Woodman Point Camp, O’Kane Court Coogee.
 Nearest road/intersection — Cockburn Road (time of call _____am/pm)
 Gate code provided to emergency services or send person to front gate.
- Have someone remain with the injured person until help arrives
- If an ambulance is not required, arrange to transport casualty to further medical assistance. Provide maps and contact details.
- Complete reports**, ensure relevant persons are notified.

Team first aid procedure

Minor emergencies

A minor emergency is a NON-LIFE THREATENING first aid situation that requires immediate assistance by a TEAM of FIRST AIDERS — QUALIFIED. Without immediate attention, MINOR EMERGENCIES can quickly become LIFE THREATENING.

Major emergencies

This type of emergency is a LIFE-THREATENING situation that requires IMMEDIATE assistance by a TEAM of FIRST AIDERS — QUALIFIED. A major emergency may require EVACUATION of the facility.

First aider 1	First aider 2	First aider 3
<ul style="list-style-type: none"> • Recognise the emergency • Signal to first aider 2 (radio or whistle) • Respond/act 	<ul style="list-style-type: none"> • Recognise signal — communication (radio or whistle) • Signal to first aider 1 • Assist first aider 1 	<ul style="list-style-type: none"> • Recognise signal — communication (radio or whistle) • Evaluation of the casualty • Contact emergency services • Transport medical equipment to first aider 1 and 2 • Crowd control (looking after other participants) • Witnesses/information/use bystanders

Gastroenteritis

- Contact Camp on-call staff for advice and instruction.
- Locate the communicable disease response trolley in the store-room at the western end of the main kitchen servery. Camp staff will provide the code for the key lockbox for access.
- Refer to and follow the instructions contained within the document *Prevention and Management Procedures: Gastroenteritis outbreaks at Camp Facilities* located on the trolley.

COVID-19

swa.gov.au/coronavirus

Suspected or confirmed case of COVID-19 at work

If the suspected or confirmed case of COVID-19 is at work



1. ISOLATE

Isolate the person from others and provide a disposable surgical mask, if available, for the person to wear.



2. INFORM

Ring the national COVID-19 hotline (1800 020 080). Follow the advice of health officials.



3. TRANSPORT

Ensure the person has transport to their home or to a medical facility.



4. CLEAN

Clean the area where the person was working and all places they have been. This may mean evacuating those areas. Use PPE when cleaning.



5. IDENTIFY

Identify who at the workplace had close contact with the infected person in the 24 hours before that infected person started showing symptoms. Send those people home to isolate. Allow employees to raise concerns.



6. CLEAN

Clean the area where the close contact people were working and all common areas they have been. This may mean evacuating those areas. Use PPE when cleaning.



7. REVIEW

Review risk management controls relating to COVID-19 and review whether work may need to change. Keep employees up to date on what is happening.

If the suspected or confirmed case of COVID-19 is not at work when diagnosed



1. INFORM

Ring the national COVID-19 hotline (1800 020 080). Follow advice of health officials.



2. IDENTIFY

Identify who at the workplace had close contact with the infected person in the 24 hours before that infected person started showing symptoms. Send those people home to isolate. Allow employees to raise concerns.



3. CLEAN

Clean the area where the infected person and their close contacts were working and all common areas they have been. This may mean evacuating those areas. Use PPE when cleaning.



4. REVIEW

Review risk management controls relating to COVID-19 and review whether work may need to change. Keep employees up to date on what is happening.

Remember:

- > From a WHS perspective, there is not an automatic requirement to close down an entire workplace, particularly if the person infected, or suspected to be infected, has only visited parts of the workplace.
- > Workers assisting the person who has suspected or confirmed with COVID-19 should be provided with appropriate PPE, if available, such as gloves and a mask. They should also follow hand hygiene procedures.
- > Consider whether you have to notify your [WHS regulator](#) - see our [Incident Notification fact sheet](#).
- > Be aware of privacy obligations.
- > Follow the advice of health officials at all times.

Fire/smoke

- If required **call 000**, provide information on numbers at site
Woodman Point Camp, O’Kane Court, Coogee
 Nearest road/intersection — Cockburn Road (time of call _____am/pm)
 Gate code provided to emergency services, or staff assigned to front gate.
- Contact Woodman Point Camp Office (08 9492 9797) or on-call mobile (0414 448 088) to alert of situation.**
- Account for all group members and ensure their immediate safety.
 Adults ____ Children ____ Total ____
- If safe attempt to put out **small** fires without PPE using extinguishers or hose reels available. See map page 4.
- Move group members by foot to the muster point next to the camp office if safe to do so.
- Alert other client groups onsite if after office hours.
- Is it best to **stay or evacuate?** _____
 - Advice from DFES (Department of Fire and Emergency Services)
 - If evacuating, this needs to be done prior to the fire getting out of control, leave early!
- Follow instructions from Camp staff and DFES or other emergency service employees.

If Camp staff or DFES advises **evacuation** to safe location:

- Client Group Leader to ensure all persons accounted for when leaving site.

If unable to evacuate site move group to a position opposite the fire direction and smoke.

- If radiant heat or smoke fumes present, move inside building.
- Fill door gaps to prevent smoke entering.
- Continue to re assess and adjust as needed.

Intrusion/holdup

- Obey the intruder(s) instructions.
- Stay out of the way if you are not directly involved.
- Make no sudden or unpredictable movements that may alarm the intruder(s).
- Be calm and observe as much as possible (appearance, clothes, accent, distinguishing features, direction of departure and mode of transport).
- Do NOT attempt to apprehend or overpower the intruder(s).

When notified of an armed intrusion/hold up: the chief warden/senior staff/group leader should:

- Call 000, provide information on numbers at site, **Woodman Point Camp, O’Kane Court Coogee**
Nearest road/intersection — Cockburn Road (time of call _____ am / pm)
Gate code provided to emergency services, or staff assigned to front gate.
- Have wardens/staff close off the area to others until the police have assessed the area.
- Camp staff to follow CIMPL Plan (critical incident) flow chart.
- Have wardens/staff try to get the names and addresses of witnesses.
- Have wardens/staff get witnesses to complete the intruder description without consultation with each other.
- Repeat for the police the actual words spoken by the intruder(s).
- Complete reports, ensure relevant persons are notified.

Missing person

Definitions

A missing person is where a client notifies either the on-call staff member, duty officer or instructor advising them of a missing person.

Procedure

The responding staff members should make ‘information gathering’ the priority, before declaring the type of response required. The camp should follow a series of escalating procedures to handle lost and found persons.

#	Action	Details
1	Information gathering	0 - 2 minutes
2	Type of search declared	Water/land
3	Assistance requested	Radio or mobile phone
4	Initial search conducted	Onsite assets
5	Coordinated search	WA Police

Information gathering

In all search incidents, it is imperative that the following information is collected and recorded on paper.

• Name	• Location last seen
• Age	• Activity undertaken
• Sex	• Floatation device
• Clothing	• Likelihood of in water
• General description	• Swimming ability

It is imperative that a solo search is not conducted, assistance should always be sought through the on-call mobile or radio.

Response:

- Details collected
- Informant retained (for questioning if required).
- Observers at last seen location
- Locking camp gates if necessary
- Use of camp vehicles (including all-terrain vehicles)
- General locality search
- Use of CUBE stairs/roof platforms as vantage point
- If a water search is required then utilise appropriately qualified staff
- Other services including WA Police 000 requested.

Unforeseen emergency

- Follow directions of wardens.
- Emergency **horn** to be sounded if appropriate.
Assemble at the muster point outside the office.
- Account for all group members and ensure their immediate safety.
Adults ____ Children ____ Total ____
- Follow instructions from DFES _____
- Is it best to **stay or evacuate?** _____
- Inform group** of situation and response
Is **everyone accounted** for?
- Complete reports**, ensure relevant persons are notified.

Post incident

This phase is handled by camp staff post incident.

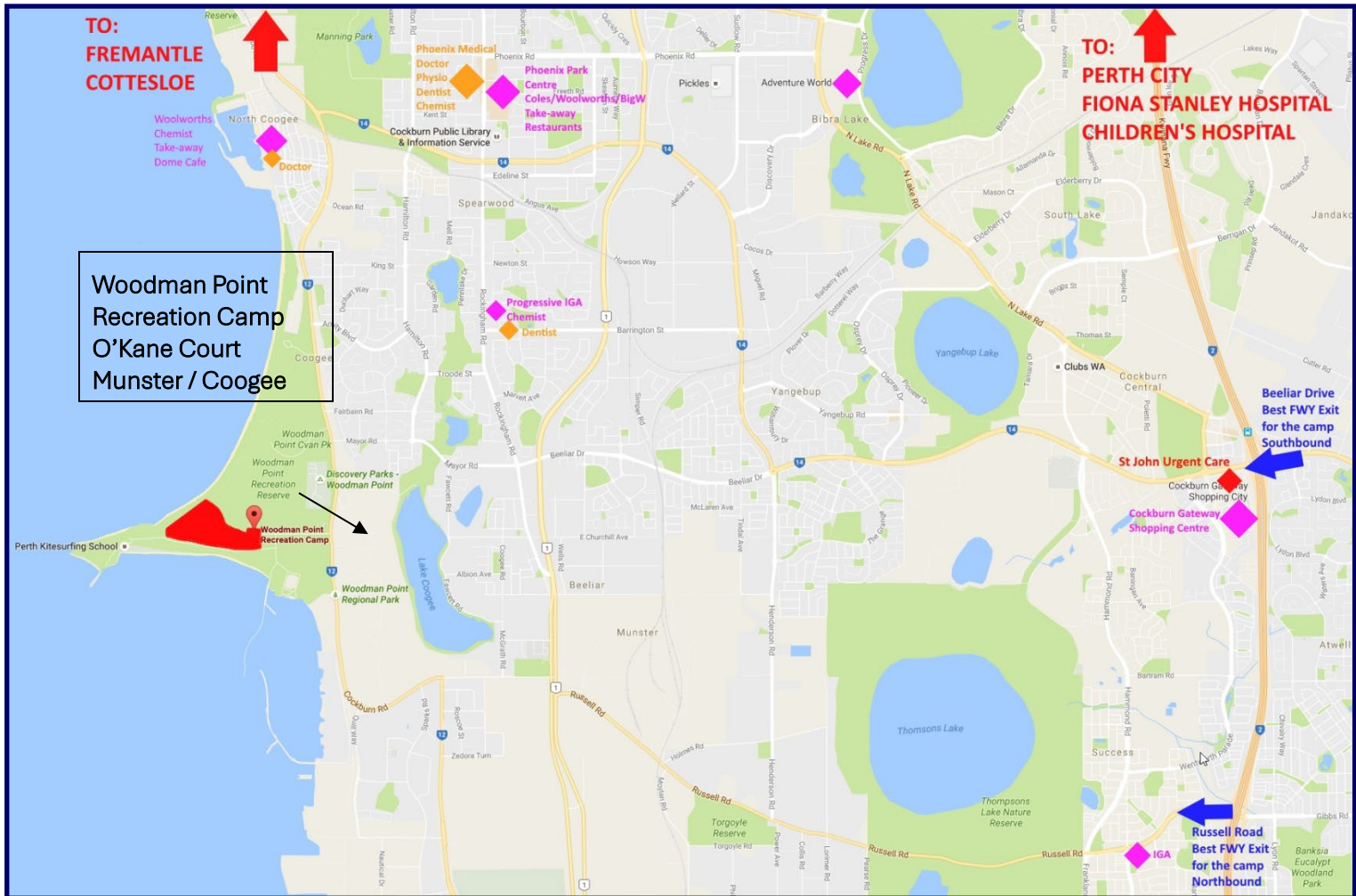
Group leaders may be contacted to assist in the completion of any paperwork.

Group leaders and participants may be contacted to take part in a post incident debrief facilitated by either DLGSC staff or external agencies.

Considerations

- Counseling services are arranged as needed for the participant, participant's family, staff involved and other group members.
- Ensure first aid kits are re-stocked.
- Site is cleaned and disinfected as needed.
- Review response process and document any learning's, adjusting plans as necessary.
- Consider if staff members involved should be removed from the camp/program.
- Ensure all staff involved are in a state of mind to be able to operate a motor vehicle to drive home. If not, arrange an alternate mode of transport for these staff.
- If major structural damage has occurred, building inspections should be carried out on affected buildings before entering.
- Liaise with Western Power and Water Corporation if services are disrupted or should be turned off.

Locality maps



St John Urgent Care Cockburn

Cockburn Gateway Shopping City, 816 Beeliar Drive, Success WA 6164
6174 6000 www.stjohnhealth.com.au
10.5km about 13-17 mins

St John Urgent Care Centres allow for patients with non-life-threatening injuries or illnesses to be seen by a doctor in a primary setting and receive the most appropriate care without the need to attend an emergency department. The centres offer a high quality, safe and timely alternate care pathway for unscheduled care, and if necessary, x-rays, pathology and follow-up treatments such as plaster, urgent dental and stitches onsite.

St John Urgent Care Centres are open 7 days a week, 8am – 10pm. No appointment is necessary.

Come to St John Urgent Care Centres for:

- When it's urgent, but not an emergency
- Possible sprains or broken bones
- Cuts that need stitches or glue
- Sports injuries
- Minor eye and ear problems
- Minor burns and scalds
- Cold and flu symptoms (including sore throats)
- Minor illnesses including fever, infections and rashes
- Insect and animal bites.

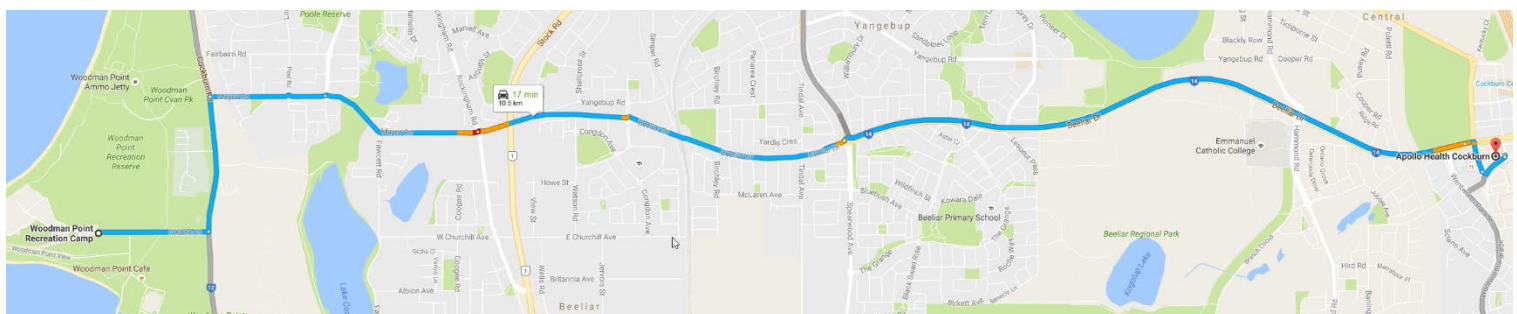
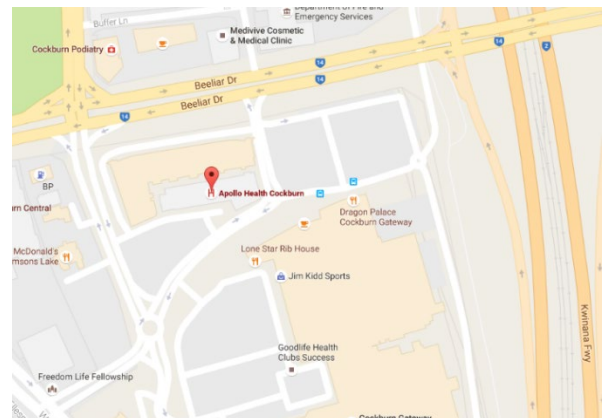
Attend emergency department or call 000 for:

- Heart attack/chest pains
- Inability to breathe
- Collapse/seizure/stroke
- Heavy bleeding
- Serious head or neck injury
- Motor vehicle accidents
- Severe stomach pain
- Severe burns
- Bleeding in pregnancy
- Serious mental health problems
- Poisoning or serious allergic reaction.

What will happen when I call an ambulance?

St John Ambulance will continue to respond as usual to 000 calls in the community. However, when attending to the call paramedics will assess a patient's unscheduled care requirements and determine the most appropriate care pathway in the best interests of the patient. This pathway may be an urgent care centre or public hospital emergency department. Patients will be made fully aware of the recommended approach to treatment and can discuss these options with paramedics at the time of the incident.

- Turn left onto **Cockburn Road**
- Turn right onto **Mayor Road**
- Drive approx. 10km along **Mayor Road/Beeliar Drive**
- Turn right at traffic lights at **Midgegooroo Avenue** (Cockburn Gateway, with BP on the right)
- Turn left at the first roundabout
- Follow signs to **St John Urgent Care** located in the buildings on your left.



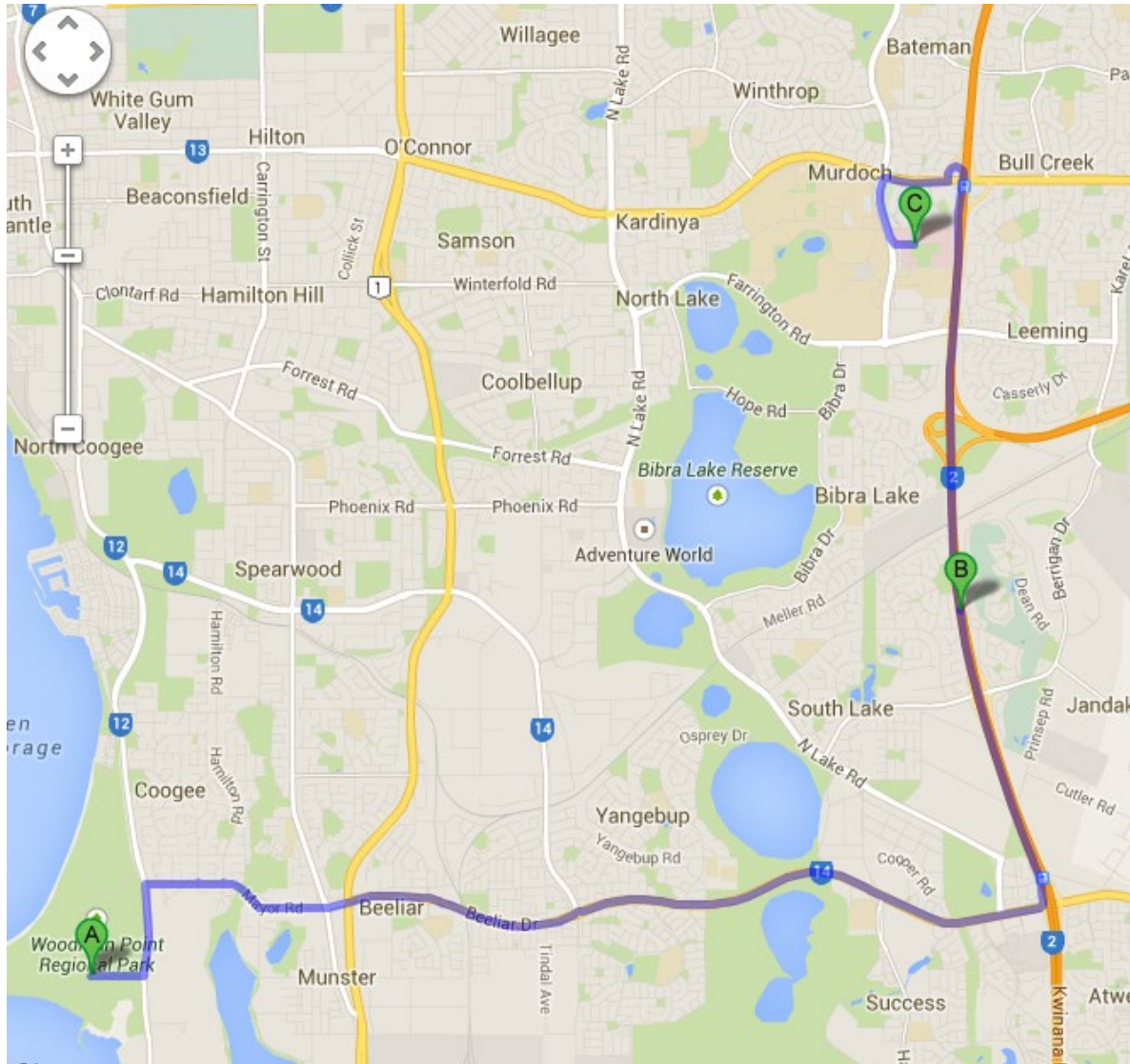
Fiona Stanley Public Hospital St John of God Private Hospital

Murdoch Drive, Murdoch, Western Australia

Fiona Stanley: 6152 2222

SJOG: 9366 1111

19.5km about 20-25 mins



- Turn left onto **Cockburn Road**
- Turn right onto **Mayor Road**
- Turn left onto the **Kwinana Freeway** ramp to **Perth**
- Take **South Street** exit, turn right onto **South Street** at lights, using left lane.
- Turn left onto **Murdoch Drive**
- Follow signs to **Fiona Stanley Hospital**, turning left onto **Robin Warren Drive**.

An alternate route in peak traffic may include **Stock Road** north to **South Street** and turn right. Follow to **Murdoch Drive** and turn right.

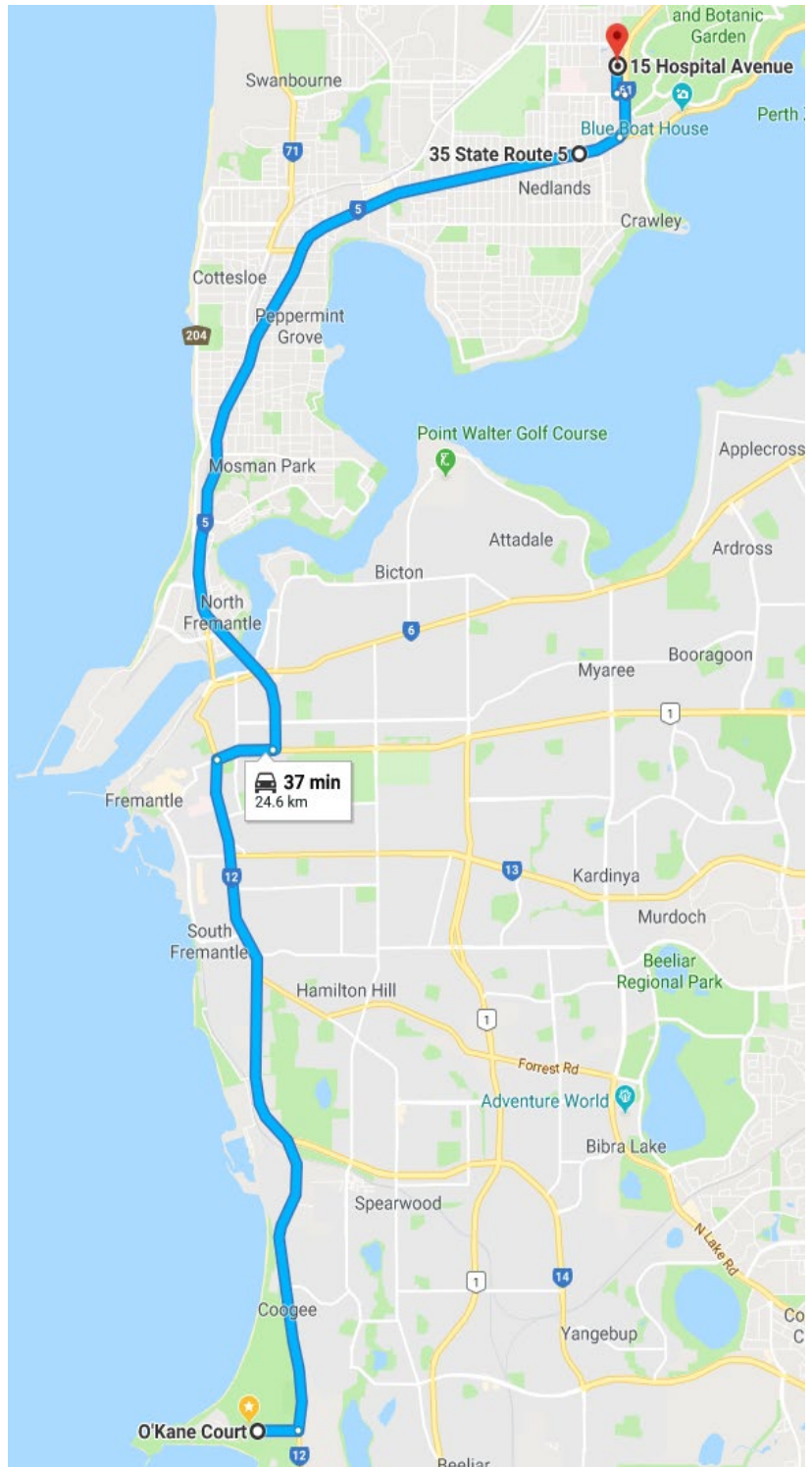
Perth Children's Hospital

15 Hospital Avenue, Nedlands WA 6009
6456 2222
25km about 35-40 min

- Turn left onto **Cockburn Road**
- After 9.5km, turn right onto **High Street**
- Turn left onto **Stirling Highway**
- After 13km, turn left onto **Winthrop Avenue**
- Turn left onto **Monash Avenue**
- Turn right into **Hospital Avenue**
- Follow signs to **Perth Children's Hospital**.

Alternate route via Kwinana Freeway (northbound):

- Turn left onto **Cockburn Road**
- Turn right onto **Mayor Road**
- Turn left onto the **Kwinana Freeway** ramp to **Perth**
- Take **Riverside Drive** exit (westbound),
- Turn right onto **Winthrop Avenue**
- Turn left onto **Monash Avenue**
- Turn right into **Hospital Avenue**.



Bites and stings information

Serious allergic reactions occur in approximately 2% of stings from ants, bees and wasps. Symptoms such as swelling of the face, lips and tongue, breathing difficulties or a generalised rash are potentially life-threatening and require urgent medical attention.

Insects

Bee stings: Remove the sting by scraping, never squeeze the site. Wash the area and apply antiseptic cream. Keep the sting site rested, elevated and cool. Local swelling and irritation may last for several days.

Wasp and Hornet stings: These do not leave a sting behind. Treat as for bee stings.

Ant and other insect bites: Treat as above.



Scorpions: Stings can be very painful and the pain may persist for several hours. Local redness and numbness often occur. Wash the sting site; apply antiseptic and a cool pack. Give oral analgesia such as paracetamol. Australian scorpions do not cause severe symptoms.

Centipedes: Apply antiseptic to the bite site. Local redness, itching and pain are common. Severe pain sometimes occurs.

Spiders

Red-back spider (*Lactrodectus*):

Wash the bite site; apply antiseptic and a cool pack. In the majority of cases only minor pain and redness occur. In 25% of cases, severe pain and other symptoms such as sweating, headache, vomiting and muscle pain develop over the first few hours. Hospital assessment is required for severe symptoms.

White-tailed spider (*Lampona*): There is no clear scientific evidence that bites from these spiders cause skin ulceration. Treat as for bites from spiders-other.

Spiders-other: Wash the bite site, apply antiseptic and see your GP if signs of local infection develop.

(This information only applies to the regions of South Australia, Western Australia and the Northern Territory).



First Aid for Snake Bites

Spotted Mulga Snake

Key points:

Treat all bites, including suspected bites as potentially life threatening

Do not wash, squeeze or puncture the bite site

Apply a pressure immobilisation bandage (see diagram)

Keep the victim calm and still

Do not give food or alcohol

Do not allow the victim to walk.

Get urgent medical/ambulance assistance. Call 000 for the ambulance

Do not attempt to catch or kill the snake

Bites to the head and trunk must be bandaged as firmly as possible

Apply a broad pressure bandage from below upwards and over the bite site as soon as possible. Do not remove trousers, as the movement of doing so will assist venom to enter blood stream. Keep the bitten leg still.

The bandage should be as tight as you would apply to a sprained ankle. The patient should avoid any unnecessary movements.

Extend the bandage as high as possible.

Apply a splint to the leg, immobilising joints either side of the bite

Bind it firmly to as much of the leg as possible. Walking should be restricted



Also used for Blue Ringed Octopus & Funnel Web Spiders

Marine

Jellyfish (non-tropical):
Apply vinegar or Stingose®
then shower in hot water for
at least 15 minutes.

Blue-ringed octopus:
Muscle paralysis with
breathing difficulties can
occur within minutes of the
bite. The bite may not be
painful. Apply a pressure
immobilization bandage,
perform mouth to mouth
resuscitation as required
and seek urgent medical
attention.



Fish stings:
Immerse the sting site in
hot water (as hot as can
be tolerated for at least 30
minutes). Medical assessment
is required for severe pain or
if the pain is not relieved by
the hot water

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This document has been developed as part of the Safety and Emergency Documentation Framework – Woodman Point Recreation Camp.



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