CHAINSAW INJURY

First Aid Quick Reference — Fire Adapted Park County

CHAINSAW INJURIES ARE SEVERE – CALL 911 IMMEDIATELY

Chainsaw injuries typically involve deep lacerations cutting through skin, fat, muscle, and potentially severing tendons, nerves, or blood vessels. Arterial bleeding can cause loss of consciousness in minutes. **This guide covers immediate response only and is not a substitute for professional emergency medical care.**

WHAT TO EXPECT FROM A CHAINSAW INJURY

Deep Lacerations	Cuts through skin, fat, and muscle far beyond a normal cut.
Severed Structures	Tendons, nerves, or blood vessels may be involved.
Arterial Bleeding	Rapid, spurting blood loss – life-threatening within minutes.
Shock	Body's response to severe trauma; can develop quickly.
Infection Risk	Chainsaw chains carry dirt and oil – high contamination risk.

IMMEDIATE RESPONSE WORKFLOW (IN ORDER)

STEP 1: CALL 911 FIRST

- Call emergency dispatch before doing anything else. Every second matters.
- Provide your **exact location** and visible injury type.

STEP 2: STOP BLEEDING

- Apply firm, direct pressure with a clean cloth or gauze.
- **Do NOT remove cloth** if soaked; add more clean cloth directly on top.
- **Do NOT remove embedded objects** (wood, metal).
- **Do NOT probe** or examine the wound.
- Maintain continuous pressure until paramedics take over.

STEP 3: ELEVATE & POSITION

- **If NO spine or neck injury is suspected:** Elevate the injured limb above heart level to reduce bleeding. Lay the patient down and elevate legs slightly to help prevent shock.
- **If spine/neck injury is possible (fall, head strike):** Do NOT move the patient. Keep the head perfectly aligned with the body.

STEP 4: MONITOR & TREAT FOR SHOCK

- **Signs of shock:** Pale/bluish skin, rapid weak pulse, shallow breathing, confusion, cold clammy skin.
- Keep the patient warm and insulated (blanket, jacket).
- Keep legs elevated 8–10 inches (unless spinal injury is suspected).
- Stay calm and constantly reassure the patient.
- **Do NOT give food or drink** (patient may require immediate surgery).

STEP 5: STAY & WAIT

- Keep the patient perfectly still and alert.
- Continue monitoring breathing and responsiveness. **Do not leave them alone.**
- Follow dispatcher instructions exactly until paramedics arrive.

SPECIFIC INJURY SCENARIOS

INJURY SCENARIO	CRITICAL FIRST AID ACTIONS
Leg Injury (incl. chap contact)	• **CALL 911 immediately.** Lay patient down, elevate leg, and apply direct pressure. Monitor closely for shock. • *If chaps jammed the chain but skin is not visible:* Still call 911. Professional emergency assessment is strictly required. • **Do NOT remove chaps** – let the professional medical team do so safely.
Arm or Hand Injury	• **CALL 911.** Apply direct pressure. Elevate the arm above heart level while on the phone with dispatch. • *If possible amputation:* Wrap the severed part cleanly in a dry cloth, place it inside a sealed plastic bag, place that bag on ice, and hand it directly to paramedics. • Watch carefully for shock; keep the patient warm, stationary, and calm.
Head or Neck Injury	• **CALL 911.** Do NOT move the patient unless absolutely necessary due to immediate external danger. • Apply gentle, localized pressure on bleeding sites (do NOT press hard on the skull). • Keep talking to the patient continuously to monitor their level of consciousness. • *If patient vomits:* Roll them onto their side as one fixed unit to protect spine alignment.
Severe / Arterial Bleeding	• **CALL 911.** Apply firm, aggressive, continuous pressure immediately. • If blood spurts or will not stop: Maintain absolute, unrelenting weight/pressure on the wound site. • Add cloth on top if layers become soaked; **never remove the first layer**. • Patient may lose consciousness quickly; be physically prepared to support them safely down.

BEFORE YOU START: PREPARATION CHECKLIST

ITEM / PREP ELEMENT	VERIFICATION STEPS
Cell Phone	Fully charged and actively confirmed to have a usable signal at the specific work location.
First Aid Kit	On-site and stocked with heavy gauze, trauma bandages, and clean cloths. Explicitly give its location to someone before pulling a cord.
Location Ready	Physical address or precise GPS coordinates confirmed and noted down.
Second Person	Present on-site if at all possible — someone who can actively call 911 and manage the patient.
Emergency Contacts	Programmed into the phone or physically written down and immediately accessible.
Flight Plan / Notification	Informed a reliable off-site contact of your precise location and expected return time.

❌ CRITICAL RESTRICTIONS & PROHIBITIONS (DO NOT)

- **Do NOT remove embedded objects** (wood, metal fragments).
- **Do NOT probe**, wash, or deeply examine severe wounds.
- **Do NOT move a patient** with a suspected spinal or neck injury unless in immediate peril.
- **Do NOT give food or drink** (the patient may require immediate emergency surgery).
- **Do NOT leave the patient alone** under any circumstances.
- **Do NOT assume it's minor** – all chainsaw contacts require professional evaluation.

This guide provides an overview of first aid principles and is not a substitute for professional medical training or emergency services.
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