

A decorative graphic consisting of three blue circles of varying sizes and two thin blue lines. One large circle is at the top center, a smaller one is below it, and another large one is at the bottom right. Two thin blue lines cross the page diagonally, one from the top left to the bottom right, and another from the top right to the bottom left.

CETPA VEHICLE HANDBOOK

Version 2.0

Please keep a copy of this “vehicle handbook” in every vehicle owned by CETPA, Inc.

CETPA VEHICLE – EMERGENCY PLAN

Revised 5/9/2011

Emergency Phone Numbers:

- 1) Police, Fire, and Emergency Medical Services (EMS)
9-1-1

- 2) Gwinnett County 9-1-1 Communication Center
(770) 513-5134

- 3) Child Protective Services
(678) 518-5630

- 4) Gwinnett County Dept. of Fire and Emergency Services
(678) 518-4800

- 5) Gwinnett County Sheriff's Department (770) 619-6500 or
(770) 619-6300

- 6) Gwinnett Sexual Assault Center
(770) 476 7404

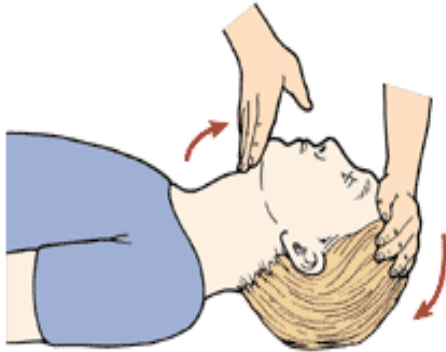
- 7) Poison Control
(800) 222-1222

- 8) Georgia Crisis and Access Line
(800) 715-4225

- 9) National HIV Hotline
(800) 232-4636

MEDICAL EMERGENCIES

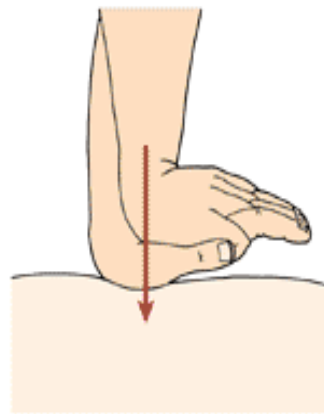
CPR



1. Tilt the head back and lift the chin until the teeth almost touch. Look and listen for breathing.



2. If the person is not breathing, pinch the nose closed and cover the person's mouth with yours. Give 2 full breaths.



3. Put your hands in the center of the person's chest between the nipples. Place one hand on top of the other. Push down 30 times. Continue with 2 breaths then 30 pushes until medical help arrives or the person starts moving.

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VEHICLE EMERGENCIES

In the event you drive a CETPA vehicle

Emergency Vehicle Procedures:

- A) CETPA, Inc. provides automobile insurance for all company vehicles through the Granite State Insurance Company. A copy of the insurance identification card must be in the vehicle at all times.
- A) **In the event of a breakdown** or any reason that warrants the automobile to be disabled and unable to operate:
- 1) Make sure no one is injured. If so, call 9-1-1.
 - 2) Make sure no one is in imminent danger (i.e., no shoulder on side of the road; breakdown on a highway). If so, call 9-1-1.
 - 3) Set up road warning and hazard signs.
 - 4) Call insurance agency
 - 5) Identify yourself as a CETPA employee
 - 6) Provide insurance policy number
 - 7) Provide all information required
 - 8) Document name of person you spoke with.
 - 9) Document any instructions given
 - 10) Provide assistance necessary for towing
 - 11) Document where the vehicle is being taken
 - 12) Contact CETPA and arrange for transportation.
 - 13) If at the time of the incident you were carrying passengers, contact passenger's parent or guardian, or family member and inform them of the incident and the steps you are taking including who is picking you up and where they are taking you.
 - 14) Write incident report and turn in to Compliance Officer
 - 15) If rental car arrangements need to be made, contact Executive Director at (770) 881-5894.

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B) **In the event of an accident:**

- 1) Call 9-1-1 and report the accident.
- 2) Make sure no one is injured. If so, report it to the 9-1-1 operator.
- 3) Make sure no one is in imminent danger (i.e., no shoulder on side of the road; breakdown on a highway). If so, reported to 9-1-1 operator.
- 4) Set up road warning and hazard signs.
- 5) Call insurance agency.
- 6) Identify yourself as a CETPA employee.
- 7) Provide insurance policy number.
- 8) Provide all information required.
- 9) Document name of person you spoke with.
- 10) Document any instructions given.
- 11) Secure information of the other vehicle, license plate, driver's name and insurance information if available.
- 12) Provide information to the police or other authority who responds to the call.
- 13) If at the time of the incident you were carrying passengers, contact passenger's parent or guardian, or family member and inform them of the incident and the steps you are taking including who is picking you up and where they are taking you.
- 14) Provide assistance necessary for towing.
- 15) Document where the vehicle is being taken.
- 16) Contact Executive Director at (770) 881-5894 Write incident report and turn in to Compliance Officer.

** Make sure to document all accidents in the **Damages and Accident Report Log.**

UNIVERSAL PRECAUTIONS and INFECTION CONTROL

UNIVERSAL PRECAUTIONS

1. Wash hands before and after each medical procedure (may use a waterless hand cleaner)
2. Wear gloves whenever there is a possibility of coming in contact with blood or other potentially infectious materials (body fluids and tissues)
3. Wear full-body gowns whenever there is a possibility of blood splashing onto the rescuer
4. Wear face masks and eye protection whenever there is a possibility of blood splashing into the rescuer's face
5. Dispose of all contaminated sharp objects in an appropriate puncture-proof container
6. Dispose of all contaminated personal protective equipment in an appropriate container marked for bio-hazardous waste

INFECTION CONTROL

Every year, many lives are lost because of the spread of infections. Health care workers can take steps to prevent the spread of infectious diseases. These steps are part of infection control.

Proper hand washing is the most effective way to prevent the spread of infections in hospitals. If you are a patient, don't be afraid to remind friends, family and health care providers to wash their hands before getting close to you.

Other steps health care workers can take include

- Covering coughs and sneezes
- Staying up-to-date with immunizations
- Using gloves, masks and protective clothing
- Making tissues and hand cleaners available (First Aid Kits)
- Following hospital guidelines when dealing with blood or contaminated items

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FIRST AID SITUATIONS

"What to do."

Taking this First Aid training today can help to save someone's life tomorrow.

These tips are designed to teach you the basic skills if accident happens. Someone chokes on an ice cube or gets stung by a bee. It is important to know when to call 9-1-1 – it is for life-threatening emergencies. While waiting for help to arrive, you may be able to save someone's life. Cardiopulmonary resuscitation (CPR) is for people whose hearts or breathing has stopped and the Heimlich maneuver is for people who are choking. CPR should only be done if you have had the training.

You can also learn to handle common injuries and wounds. Cuts and scrapes, for example, should be rinsed with cool water. To stop bleeding, apply firm but gentle pressure, using gauze. If blood soaks through, add more gauze, keeping the first layer in place. Continue to apply pressure.

It is important to have a first aid kit available. At CETPA, the first aid kits will be located at your nearest GREEN ZONE. It will include a first-aid guide. Read the guide to learn how to use the items, so you are ready in case an emergency happens.

Burns

You can get burned by heat and fire, radiation, sunlight, electricity or chemicals. There are 3 degrees of burns:

First-degree burns are red and painful. They swell a little. They turn white when you press on the skin. The skin over the burn may peel off after 1 or 2 days.

Treatment. Soak the burn in cool water. Then treat it with a skin care product like aloe vera cream or an antibiotic ointment. To protect the burned area, you can put a dry gauze bandage over the burn. Take an over-the-counter pain reliever, such as acetaminophen (one brand name: Tylenol), ibuprofen (some brand names: Advil, Motrin) or naproxen (brand name: Aleve), to help with the pain.

Second-degree burn is a thicker burn, has blisters and is painful. The skin is very red or splotchy, and it may swell a lot.

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Treatment. Soak the burn in cool water for 15 minutes. If the burned area is small, put cool, clean, wet clothes on the burn for a few minutes every day. Then put on an antibiotic cream, or other creams or ointments prescribed by your doctor. Cover the burn with a dry nonstick dressing held in place with gauze or tape. Please advise the person burned to check with your doctor's office to make sure you are up-to-date on tetanus shots.

Change the dressing every day. First, wash your hands with soap and water. Then gently wash the burn and put antibiotic ointment on it. If the burn area is small, a dressing may not be needed during the day. Check the burn every day for signs of infection, such as increased pain, redness, swelling or pus. If you see any of these signs, see your doctor right away. To prevent infection, avoid breaking any blisters that form.

Burned skin itches as it heals. Keep your fingernails cut short and don't scratch the burned skin. The burned area will be sensitive to sunlight for up to one year.

Third-degree burns cause damage to all layers of the skin. The burned skin looks white or charred. These burns may cause little or no pain because the nerves in the skin are damaged.

Treatment. For third-degree burns, go to the hospital right away. Don't take off any clothing that is stuck to the burn. Don't soak the burn in water or apply any ointment. You can cover the burn with a sterile bandage or clean cloth until you receive medical assistance.

Bruises

A bruise is a mark on your skin caused by blood trapped under the surface. It happens when an injury crushes small blood vessels but does not break the skin. Those vessels break open and leak blood under the skin.

Bruises are often painful and swollen. You can get skin, muscle and bone bruises. Bone bruises are the most serious.

It can take months for a bruise to fade, but most last about two weeks. They start off a reddish color, and then turn bluish-purple and greenish-yellow before returning to normal. To reduce bruising, ice the injured area and elevate it above your heart. See your healthcare provider if you seem to bruise for no reason, or if the bruise appears to be infected.

Choking

Food or small objects can cause choking if they get caught in your throat and block your airway. This keeps oxygen from getting to your lungs and brain. If your brain goes without oxygen for more than four minutes, you could have brain damage or die.

Young children are at an especially high risk of choking. They can choke on foods like hot dogs, nuts and grapes, and on small objects like toy pieces and coins. Keep hazards out of their reach and supervise them when they eat.

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To perform the Heimlich maneuver:

Stand behind him or her. Form a fist with one hand and place your fist, thumb side in, just below the person's rib cage in the front. Grab your fist with your other hand. Keeping your arms off the person's rib cage, give four quick inward and upward thrusts. You may have to repeat this several times until the obstructing object is coughed out.

Heimlich maneuver on an unconscious person:

If the person is lying down or unconscious, straddle him or her and place the heel of your hand just above the waistline. Place your other hand on top of this hand. Keeping your elbows straight, give four quick upward thrusts. You may have to repeat this procedure several times until the obstructing object is coughed out.

Heimlich maneuver on a child:

Stand behind the child. With your arms around his or her waist, form a fist with one hand and place it, thumb side in, between the ribs and waistline. Grab your fist with your other hand. Keeping your arms off the child's rib cage, give four quick inward and upward thrusts. You may have to repeat this several times until the obstructing object is coughed out.

Heimlich maneuver on an infant:

Place the infant face down across your forearm (resting your forearm on your leg) and support the infant's head with your hand. Give four forceful blows to the back with the heel of your hand. You may have to repeat this several times until the obstructing object is coughed out. If this does not work, turn the baby over. With two fingers one finger width below an imaginary line connecting the nipples, give four forceful thrusts to the chest to a depth of 1 inch. You may have to repeat this several times until the obstructing object is coughed out.

If you're the only rescuer, **perform the Heimlich maneuver before calling 911** for help. If another person is available, have that person call for help while you perform the Heimlich maneuver.

Diagram on next page...

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Heimlich Maneuver



1. Lean the person forward slightly and stand behind him or her.



2. Make a fist with one hand.



3. Put your arms around the person and grasp your fist with your other hand near the top of the stomach, just below the center of the rib cage.



4. Make a quick, hard movement, inward and upward.

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Cuts and Scrapes

Stop the bleeding. Minor cuts and scrapes usually stop bleeding on their own. If they don't, apply gentle pressure with a clean cloth or bandage. Hold the pressure continuously for 20 to 30 minutes. Don't keep checking to see if the bleeding has stopped because this may damage or dislodge the fresh clot that's forming and cause bleeding to resume. If the blood spurts or continues to flow after continuous pressure, seek medical assistance.

Clean the wound. Rinse out the wound with clear water. Soap can irritate the wound, so try to keep it out of the actual wound. If dirt or debris remains in the wound after washing, use tweezers cleaned with alcohol to remove the particles. If debris remains embedded in the wound after cleaning, see your doctor. Thorough wound cleaning reduces the risk of tetanus. To clean the area around the wound, use soap and a washcloth. There's no need to use hydrogen peroxide, iodine or an iodine-containing cleanser. These substances irritate living cells. If you choose to use them, don't apply them directly on the wound.

Apply an antibiotic. After you clean the wound, apply a thin layer of an antibiotic cream or ointment such as Neosporin to help keep the surface moist. The products don't make the wound heal faster, but they can discourage infection and allow your body's healing process to close the wound more efficiently. Certain ingredients in some ointments can cause a mild rash in some people. If a rash appears, stop using the ointment.

Cover the wound. Bandages can help keep the wound clean and keep harmful bacteria out. After the wound has healed enough to make infection unlikely, exposure to the air will speed wound healing.

Change the dressing. Change the dressing at least daily or whenever it becomes wet or dirty. If you're allergic to the adhesive used in most bandages, switch to adhesive-free dressings or sterile gauze held in place with paper tape, gauze roll or a loosely applied elastic bandage. These supplies generally are available at pharmacies.

Get stitches for deep wounds. A wound that cuts deeply through the skin or is gaping or jagged-edged and has fat or muscle protruding usually requires stitches. A strip or two of surgical tape may hold a minor cut together, but if you can't easily close the mouth of the wound, see your doctor as soon as possible. Proper closure within a few hours minimizes the risk of infection.

Watch for signs of infection. See your doctor if the wound isn't healing or you notice any redness, drainage, warmth or swelling.

Get a tetanus shot. Doctors recommend you get a tetanus shot every 10 years. If your wound is deep or dirty and your last shot was more than five years ago, your doctor may recommend a tetanus shot booster. Get the booster within 48 hours of the injury.

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Electrocution

The danger from an electrical shock depends on how high the voltage is, how the current traveled through the body, the person's overall health, and how quickly the person is treated. **Call 911 immediately** if any of these signs or symptoms occur:

- Cardiac arrest
- Heart rhythm problems (arrhythmias)
- Respiratory failure
- Muscle pain and contractions
- Seizures
- Numbness and tingling
- Unconsciousness

While waiting for medical help, follow these steps:

1. **Look first. Don't touch.** The person may still be in contact with the electrical source. Touching the person may pass the current through you.
2. **Turn off the source of electricity if possible.** If not, move the source away from you and the affected person, using a nonconducting object made of cardboard, plastic or wood.
3. **Check for signs of circulation (breathing, coughing or movement).** If absent, begin cardiopulmonary resuscitation (CPR) immediately.
4. **Prevent shock.** Lay the person down and, if possible, position the head slightly lower than the trunk, with the legs elevated.

Fracture

A fracture is a broken bone. It requires medical attention. If the broken bone is the result of a major trauma or injury, call 911 or your local emergency number. Also call for emergency help if:

- The person is unresponsive, isn't breathing or isn't moving. Begin cardiopulmonary resuscitation (CPR) if there's no respiration or heartbeat.
- There is heavy bleeding.
- Even gentle pressure or movement causes pain.
- The limb or joint appears deformed.
- The bone has pierced the skin.
- The extremity of the injured arm or leg, such as a toe or finger, is numb or bluish at the tip.
- You suspect a bone is broken in the neck, head or back.
- You suspect a bone is broken in the hip, pelvis or upper leg (for example, the leg and foot turn outward abnormally, compared with the uninjured leg).

Symptoms of a fracture are

- Out-of-place or misshapen limb or joint
- Swelling, bruising or bleeding
- Intense pain
- Numbness and tingling
- Limited mobility or inability to move a limb

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Take these actions immediately while waiting for medical help:

Stop any bleeding. Apply pressure to the wound with a sterile bandage, a clean cloth or a clean piece of clothing.

Immobilize the injured area. Don't try to realign the bone

Apply ice packs to limit swelling and help relieve pain until emergency personnel arrive. Don't apply ice directly to the skin — wrap the ice in a towel, piece of cloth or some other material.

Treat for shock. If the person feels faint or is breathing in short, rapid breaths, lay the person down with the head slightly lower than the trunk and, if possible, elevate the legs.

Remember ICE:

"I" is for ice - if possible apply an ice pack or ice cubes to the injured area. This will keep down the swelling and reduce pain.

"C" is for compression - if the wound is bleeding, apply direct pressure with a clean cloth to reduce blood flow.

"E" is for elevation - try to keep the injured area as high above heart level as possible. This will reduce blood flow to the injury and minimize swelling.

Head Injury

Every year, millions of people in the U.S. sustain head and brain injuries. Some are minor because the skull is quite good at protecting the brain. More than half are bad enough that people must go to the hospital. Serious head injuries can lead to permanent brain damage or death. Symptoms of minor head injuries usually go away without treatment. Serious head injuries need emergency treatment.

Dial 911 or call for emergency medical assistance if any of the following signs are apparent:

- A headache that gets worse or does not go away
- Repeated vomiting or nausea
- Convulsions or seizures
- An inability to awaken from sleep
- Dilation of one or both pupils of the eyes
- Slurred speech
- Weakness or numbness in the arms or legs
- Loss of coordination
- Increased confusion, restlessness or agitation

Stop any bleeding. Apply firm pressure to the wound with sterile gauze or a clean cloth. Don't apply direct pressure to the wound if you suspect a skull fracture.

Watch for changes in breathing and alertness. If the person shows no signs of circulation (breathing, coughing or movement), begin CPR.

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If severe head trauma occurs: Keep the person still. Until medical help arrives, keep the person who sustained the injury lying down and quiet in a darkened room, with the head and shoulders slightly elevated. Don't move the person unless necessary and avoid moving the person's neck.

Nosebleed

Nosebleeds are common. Most often they are a nuisance and not a true medical problem. But they can be both. Why do they start, and how can they be stopped?

Among children and young adults, nosebleeds usually originate from the septum, just inside the nose. The septum separates your nasal chambers.

In middle aged and older adults, nosebleeds can begin from the septum, but they may also begin deeper in the nose's interior. This latter form of nosebleed is much less common. It may be caused by hardened arteries or high blood pressure. These nosebleeds begin spontaneously and are often difficult to stop. They require a specialist's help.

To take care of a nosebleed:

Sit upright. By remaining upright, you reduce blood pressure in the veins of your nose. This discourages further bleeding.

Pinch your nose. Use your thumb and index finger and breathe through your mouth. Continue the pinch for five to 10 minutes. This maneuver sends pressure to the bleeding point on the nasal septum and often stops the flow of blood.

To prevent rebleeding after bleeding has stopped, don't pick or blow your nose and don't bend down until several hours after the bleeding episode. Keep your head higher than the level of your heart.

If rebleeding occurs, sniff in forcefully to clear your nose of blood clots, spray both sides of your nose with a decongestant nasal spray containing oxymetazoline (Afrin, Dristan, others). Pinch your nose again in the technique described above and call your doctor.

Seek medical care immediately if:

- The bleeding lasts for more than 20 minutes
- The nosebleed follows an accident, a fall or an injury to your head, including a punch in the face that may have broken your nose

Puncture Wounds

A puncture wound — such as results from stepping on a nail or being stuck with a tack — can be dangerous because of the risk of infection. The object that caused the wound may carry spores of tetanus or other bacteria, especially if the object had been exposed to the soil. Puncture wounds resulting from human or animal bites, including those of domestic dogs and cats, may be especially prone to infection. Puncture wounds on the foot are also more vulnerable to infection.

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If the bite was deep enough to draw blood and the bleeding persists, seek medical attention. Otherwise, follow these steps:

1. **Stop the bleeding.** Minor cuts and scrapes usually stop bleeding on their own. If they don't, apply gentle pressure with a clean cloth or bandage. If bleeding persists — if the blood spurts or continues to flow after several minutes of pressure — seek emergency assistance.
2. **Clean the wound.** Rinse the wound well with clear water. A tweezers cleaned with alcohol may be used to remove small, superficial particles. If larger debris still remains more deeply embedded in the wound, see your doctor. Thorough wound cleaning reduces the risk of tetanus. To clean the area around the wound, use soap and a clean washcloth.
3. **Apply an antibiotic.** After you clean the wound, apply a thin layer of an antibiotic cream or ointment to help keep the surface moist. These products don't make the wound heal faster, but they can discourage infection and allow your body to close the wound more efficiently. Certain ingredients in some ointments can cause a mild rash in some people. If a rash appears, stop using the ointment.
4. **Cover the wound.** Exposure to air speeds healing, but bandages can help keep the wound clean and keep harmful bacteria out.
5. **Change the dressing regularly.** Do so at least daily or whenever it becomes wet or dirty. If you're allergic to the adhesive used in most bandages, switch to adhesive-free dressings or sterile gauze and hypoallergenic paper tape, which doesn't cause allergic reactions. These supplies are generally available at pharmacies.
6. **Watch for signs of infection.** See your doctor if the wound doesn't heal or if you notice any redness, drainage, warmth or swelling.

Bite Wounds

- **For minor wounds.** If the bite barely breaks the skin and there is no danger of rabies, treat it as a minor wound. Wash the wound thoroughly with soap and water. Apply an antibiotic cream to prevent infection and cover the bite with a clean bandage.
- **For deep wounds.** If the animal bite creates a deep puncture of the skin or the skin is badly torn and bleeding, apply pressure with a clean, dry cloth to stop the bleeding and see your doctor.
- **For infection.** If you notice signs of infection such as swelling, redness, increased pain or oozing, see your doctor immediately.
- **For suspected rabies.** If you suspect the bite was caused by an animal that might carry rabies — any bite from a wild or domestic animal of unknown immunization status — see your doctor immediately.

Domestic pets cause most animal bites. Dogs are more likely to bite than cats. Cat bites, however, are more likely to cause infection. Bites from non-immunized domestic animals and wild animals carry the risk of rabies. Rabies is more common in raccoons, skunks, bats and foxes than in cats and dogs. Rabbits, squirrels and other rodents rarely carry rabies. If an animal bites you or your child you must thoroughly clean the wound by washing with soap and tap water as soon as possible. A light scrubbing should occur during the wash. Then put a clean and dry bandage over the area. This treatment should not replace proper evaluation by a doctor.

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