

First aid and emergencies

What to do while you wait for help. Guidance from St John Ambulance, who now provide the NHS's first aid advice.

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In an emergency

Call 999

Not sure if it is an emergency? Call 111. If you cannot speak, dial 999 then press **55** on a mobile. 112 works too, anywhere in Europe.



Before anything else — DR ABC

The check you run on any collapsed person, before you do anything else.

1. **Danger.** Before approaching, make sure the area is safe.
2. **Response.** Kneel beside them, gently shake their shoulders and ask “Are you OK?” or “Can you open your eyes?”
3. **Airway.** One hand on the forehead to tilt the head back, two fingers of the other hand under the chin to lift it.
4. **Breathing.** Ear above their mouth, looking down their chest. Listen, feel for breath on your cheek, watch the chest. **No more than 10 seconds.**
5. **Circulation.** Once normal breathing is established, look for signs of severe bleeding.

- Life-threatening bleeding is dealt with *before* the airway.

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Heart attack or cardiac arrest?

They are not the same thing, and what you do is completely different. This is the most confused pair in first aid.

Heart attack

A plumbing problem. A blocked artery cuts off blood to part of the heart muscle, and that muscle starts to die.

They are usually awake — in pain, frightened, grey and sweating, often clutching their chest. They can talk to you.

Call 999 · sit them down · 300mg aspirin, chewed

Cardiac arrest

An electrical problem. The heart stops pumping blood round the body altogether.

They are unconscious and not breathing normally — or taking slow, gasping, noisy breaths. They cannot respond to you.

Call 999 · start CPR now · get a defibrillator

- **The test is simple: can they respond to you?** If they can talk, it is not a cardiac arrest. If they are unresponsive and not breathing normally, start CPR — do not wait to be sure.
- **Gasping is not breathing.** Slow noisy gasps in someone unresponsive are a sign of cardiac arrest, not of recovery. Mistaking them for breathing is the commonest reason CPR gets started too late.
- **One can cause the other.** A heart attack can trigger a cardiac arrest, so a conscious heart attack casualty can collapse at any moment. Stay with them and be ready.

British Heart Foundation and St John Ambulance · [BHF on cardiac arrest](#)

Cardiac arrest — CPR

They are unresponsive and not breathing, or not breathing normally.

1. Ask a helper to **call 999** and fetch a defibrillator. If you are alone, put the phone on speaker and start CPR.
2. Heel of your hand on the middle of the chest, other hand on top, fingers interlocked.
3. Press down hard, **5-6cm**, then let the chest come all the way back up.
4. Push at **100 to 120 compressions a minute**.
5. After **30 compressions** give **2 rescue breaths**, then keep alternating **30:2**.
6. Keep going until emergency help takes over, or they start breathing normally.

- If you cannot or would rather not give rescue breaths, **compressions alone are acceptable** — do not stop to agonise over it.
- If rescue breaths do not go in, go straight back to compressions rather than trying repeatedly.

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Choking — adult or child over 1

They cannot speak, cough or breathe, or their cough has gone silent.

1. If they can cough, **encourage them to keep coughing**. Remove anything obvious from the mouth.
2. Support their upper body and give **five sharp back blows** between the shoulder blades. Check the mouth after each one.
3. If that fails, stand behind them, clenched fist between navel and chest, and give **five abdominal thrusts**. Check the mouth after each one.
4. If the blockage has not cleared, **call 999 straight away**.
5. Keep alternating five back blows and five abdominal thrusts until help arrives.

- If they become unresponsive at any point, **start CPR**.
- Abdominal thrusts are **not** used on babies under one — see the baby choking guidance.

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Severe bleeding

Blood is pouring, spurting or will not stop.

1. Wear gloves if you have them.
2. **Apply direct firm pressure** to the wound with a sterile dressing, or any clean non-fluffy cloth.
3. Ask a helper to **call 999**.
4. Secure the dressing firmly with a bandage, keeping the pressure on.
5. Check circulation beyond the bandage: press the skin, and if colour does not return within two seconds the bandage is **too tight**.

6. Treat for shock — lie them down, raise their legs above heart level, loosen tight clothing, keep them warm.
7. If blood seeps through, **remove that dressing and reapply pressure** with a new one.
8. Recheck circulation every 10 minutes.

- Be ready to start CPR if they become unresponsive.

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Heart attack

Crushing central chest pain that may spread to the jaw and down one or both arms; breathlessness, sweating, pain like indigestion, dizziness, pale skin with blue-tinged lips, a rapid or irregular pulse, a sense of impending doom.

1. **Call 999 straight away.**
2. Sit them on the floor, knees bent, head and shoulders supported by cushions.
3. Give **one 300mg aspirin** and ask them to **chew it slowly**.
4. Help them take their own angina medication if they have it.
5. Keep watching their responsiveness until help arrives.

- **No aspirin** for anyone under 16, or anyone allergic to it.
- Be ready to start CPR if they become unresponsive.

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Stroke — the FAST test

Sudden weakness, drooping or confusion. Every minute counts.

1. **F — Face.** Look at their mouth or eyes. They may be droopy and unable to smile evenly.
2. **A — Arms.** Ask them to raise both arms. They may manage only one.
3. **S — Speech.** They cannot speak clearly, or cannot understand you.
4. **T — Time.** Time to **call 999** and say you suspect a stroke.
5. Keep them comfortable and reassured while you wait.

6. Monitor their responsiveness until help arrives.

- **Do not give food or drink** — swallowing may be affected.
- Be ready to start CPR if they become unresponsive.

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Anaphylaxis

A severe allergic reaction: difficulty breathing, wheezing or a noisy airway, swelling of the tongue and throat, puffiness around the eyes, hives, rapid swelling of face, lips or neck, confusion, collapse.

1. If they carry an **adrenaline auto-injector**, use it immediately, following the instructions on the device.
2. **Call 999** and tell ambulance control you suspect **anaphylaxis**.
3. Lay them down with their legs raised — but if they are struggling to breathe, **sit them upright** instead.
4. Monitor breathing and consciousness continuously.
5. **A second dose can be given after five minutes** if there is no improvement, or if symptoms return.

- Be ready to start CPR if they become unresponsive.

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Seizure

Convulsions, jerking movements, sudden collapse with loss of awareness.

1. Ask bystanders to step back and protect their privacy. Clear away anything dangerous.
2. Put soft padding under their head. Loosen clothing around the neck.
3. Once the jerking stops, open the airway and check breathing. If they are breathing, put them in the **recovery position**.
4. Note how long the seizure lasted and monitor their level of response.
5. Recovery usually takes 15–30 minutes.

- **Do not restrain them** or move them unless they are in immediate danger.
- **Do not put anything in their mouth.**
- **Call 999 if:** it is their first seizure; seizures repeat; the cause is unknown; it lasts **more than five minutes**; they are unresponsive for **more than 10 minutes** afterwards; they are injured or breathing abnormally.

St John Ambulance · [read their full guidance](#)

This page is not first aid training. Reading is not the same as having done it, and in a real emergency you will be frightened and rushed. If you can, do a course — St John Ambulance, the British Red Cross and many employers run them. Knowing CPR before you need it is the difference this page cannot make.

Source: [St John Ambulance first aid advice](#), read 20 August 2026. The NHS redirects its own first aid pages there. Steps are reproduced in their order, with their figures; where anything here differs from theirs, **theirs is right** — follow the link and tell us so we can fix it. StreetOwl is not a medical service and gives no medical advice.