

First Aid Management For Suspected Decompression Illness (DCI)

1. Have a high index of suspicion. DCI can present as a wide variety of symptoms.
2. Initiate treatment as soon as possible.
3. Standard ABC's.
4. Keep unnecessary movement to a minimum. Ideally the patient should remain lying flat.
5. Administer high flow Oxygen via mask (as close to 100% O₂ as possible).
6. Insert IV line - 1000mLs Normal Saline q4h.
7. Monitor urine output. An indwelling catheter may be required if spinal DCI is suspected.
8. Obtain a Dive History - following information is required:
 - Depth
 - Duration
 - Surface Intervals
 - Number of Dives
 - Any significant events during the dive such as equipment failures, uncontrolled ascents, multiple ascents etc
 - Diving at altitude (lake diving)?
 - Altitude ascent post diving
 - Past history of DCI
 - The experience of the diver
9. Contact DES (Diver Emergency Service) for advice:
0800 4 DES 111
0800 4 337 111
10. Evacuate to the Navy Hospital – Auckland or Christchurch Hospital Recompression Unit if required by:
 - Pressurised Fix Wing (300m Cabin Pressure) aircraft
 - Helicopter
 - Road (below 1000 ft altitude)
 - Unpressurised aircraft below 1000 ft altitude
11. Keep on O₂ and IV fluids as above until reviewed at a Recompression Chamber.
12. Avoid analgesia or sedation.
13. **DO NOT USE** Entonox or Nitrous Oxide as it can potentially worsen DCI by isobaric counter-diffusion.