



# Basic First Aid & CPR

For Self-Direction Direct Service Workers

# Consent to Assist Victim

Before assisting the victim, you MUST have one of the following types of consent:

- ▶ Verbal / Gestural Consent from a conscious victim
- ▶ Implied Consent from an unconscious victim, or an injured child without parent or guardian present

▶ \*If you don't get a consent to assist from the conscious victim, call 911 and remain with the victim until EMS arrives\*

▶ Know where you are so that you can give an exact location, if you are using your cell phone.

# Universal Precautions

The purpose of the precautions is for the protection of the rescuer(s) while giving First Aid to the victim(s).

Personal Protective Equipment (PPE):

Gloves, Goggles, Mask, Shield/Barrier, Robe

- ▶ You are to use PPE's any time you could be exposed to a victim's bodily fluids, or if you and/or the victim have any open wounds.
- ▶ Sometimes, you will not have the PPE's you need, so you will have to improvise with what is available!

# Victim & Rescuer Safety

You and the victim could be in a dangerous area:

**Fire, Gas/Toxic Fumes, Water, Traffic Area, etc.**

- ▶ Only move the victim if you are confident you can move her/him to safety; then call 911.
- ▶ Otherwise, call 911 and yell for help from anyone near by.
- ▶ Keep in mind that there will be some situations that only First Responders will be able to secure: fire engulfed building, vehicle hanging on the edge, etc.



# Assessment of the Victim

By this point you have already gotten consent to assist, moved to a safe area (if needed) and called 911.

## Now, you must start assessing the victim

▶ **Determine Level of Consciousness:** Conscious, Confused/Little response, Unconscious

\*If the victim is conscious or unconscious and breathing, continue the assessment\*

▶ **Determine Breathing Ability:** Breathing on their own, Labored breathing, Not breathing at all

\*If the victim is not breathing or stops breathing, start CPR\*

▶ **Visual/Physical Assessment**

▶ **Check for Bleeding:** any level of bleeding anywhere on the body

▶ **Check for Injuries:** possible broken arm or leg, possible head, neck or back injury, abdominal injury

▶ **Use the S.A.M.P.L.E. acronym:** while you are checking a conscious victim, ask simple questions

S-(Signs) your Visual observations, A- ask about Allergies, M- ask about Medications, P- Has this happened in the Past, L-Last food & beverage items consumed, E- Event, what you were doing when this started.

▶ While you are talking to the victim, you want to maintain a calm appearance, so she/he will also be calm and not make their situation worse.

▶ Once EMS arrives, you will pass the information to one of the EMTs.

# Life Threatening Emergencies

We will cover situations that will require immediate medical care for victims who are usually conscious, and can go unconscious:

## Heart Attacks

### ► Factors that can lead to Heart Attacks:

Stress, High Blood Pressure/High Cholesterol, Smoking, Obesity, Heredity

### ► Signs of a Heart Attack:

Chest Pain/Discomfort, Shortness of Breath, Pain/Discomfort in other areas of the upper body (more so for women), Nausea, Lightheadedness

**As soon as you determine the victim is having a Heart Attack, call 911**

### ► Most victims will deny they are having a heart attack!

► You will need to make sure the victim is comfortable, this may include assisting the victim to loosen clothing around the neck area. You will also need to be calm, to encourage the victim to be calm, while you ask the SAMPLE questions. Continue to talk with the victim while waiting for EMS to arrive. If the victim stops breathing while waiting, move her/him to the floor, get the **automated external defibrillator** (AED - if one is there), and start CPR. After EMS arrives, pass along the information you have collected about the victim.

# Stroke

## Signs of a Stroke:

sudden to appear

Numbness / Weakness on one side of body,  
Confusion, Trouble Speaking or Understanding,  
Trouble seeing with one, or both eyes, Dizziness, Loss  
of Balance and/or Coordination, Severe Headache

## Signs of a Mini-Stroke:

sudden to appear

Shares most of the signs listed under Stroke, just  
smaller and/or limited signs of problems that are  
harder to detect if you are not familiar with the  
victim's normal habits & actions.

# **As soon as you determine the victim has had a Stroke, call 911**

**Most victims will deny they could have had a Mini-Stroke!**

- ▶ Make sure the victim is in a safe, comfortable position; this may result with the victim laying down, because the furniture near by would not be safe and could cause injuries
- ▶ Put a pillow under her/his head
- ▶ Be calm, to encourage the victim to be calm
- ▶ Ask the SAMPLE questions in a simple yes/no format
- ▶ Continue to talk to the victim while waiting for EMS to arrive
- ▶ If the victim stops breathing while waiting, remove the pillow from under the victim's head, get the AED (if one is there), and start CPR
- ▶ After EMS arrives, pass along the information you have collected about the victim



# Shock

## Possible causes of Shock:

Sudden (severe) hit to the body, Loss of Blood internally, Severe Heart Attack, Severe Allergic Reaction

## Signs of Shock:

Suddenly feeling Weak, Faint, Dizzy or Nauseous, Has Pale or Grayish Skin, Cold & clammy skin, Unusually restless, agitated or confused

**\*If the victim is not already laying down, assist her/him to lay down on their back\***

**You must remember that victims of any injury or life threatening situations can go into Shock!**

## Shock, continued

Once you determine a person is in shock:

- ▶ If they are on a hard surface, ask her/him to lift their head so you can put a little bit of cushion under their head.
- ▶ If the victim was already on the ground, ask the victim to move their head, lift their arms, then their legs. If the victim tries to move but doesn't move their head, arms and/or legs; **DO NOT** let the victim know (just make a simple positive response such as "Good")
- ▶ Remain calm and continue talking with the victim. If the victim was able to raise their legs, have something close by to lift their feet up 8 to 12 inches
- ▶ Calmly talk with the victim about the SAMPLE questions,
- ▶ Pay attention to shakiness, the color of their skin and their voice developing a tingly sound.
- ▶ Comment to the victim that they appear to be cold, and put a blanket over them.
- ▶ Continue to talk with the victim, while waiting for EMS to arrive. Ask if there is someone you can call for them
- ▶ If the victim stops breathing, start CPR. After EMS arrives, pass along the information you have collected about the victim.

# Injurious Situations

## Bleeding & Wound Care

**Make sure you have your PPE gear in place before you start giving first aid!**

- ▶ **Minor, or minimal, Bleeding:** usually results from a scrape or a small cut. The area involved will need to be washed with soap and water, and covered with a sterile dressing.
- ▶ **Mid-Level Bleeding:** usually resulting from a tear, cut or puncture. When you start to wash area involved, if it is still bleeding some; you will need to get a sterile dressing to cover the area while applying direct pressure over the area to stop the bleeding. After the bleeding stops, wash with soap and water, and cover with a sterile dressing.
- ▶ **Moderate, or excessive Bleeding:** usually resulting when an artery has been nicked or cut. This will have continuous bleeding, and you will need to get sterile dressings to apply, one at a time, over the area while using direct pressure to stop the bleeding. You will continue to add sterile dressings, one over the one before, until the bleeding stops. Then you will put a final dressing over the area and secure them with gauze or a bandage. **DO NOT** remove any of the dressings with which you have covered the area. If 911 was called, wait for EMS to arrive and take over. Otherwise, make sure the victim receives medical treatment in a timely manner by yourself, or someone the victim contacted to take her/him to the ER.

**If the victim goes unconscious, as some do when they see blood; continue to apply pressure to the area, call 911 (if not already done) and monitor the victim's breathing. Start CPR if they stop breathing.**

# Wound Care

## part 1

- ▶ **Nose Bleed:** When the victim is bleeding from their nose; you will have the victim sit down, you will press in both sides of the nose (nostrils), and the victim will lean forward while holding a towel under their face until the bleeding stops. If the bleeding doesn't stop in a few minutes, apply more pressure (press harder) to the nose. If the victim is bleeding heavily (gushing), has difficulty breathing, and/or does not stop bleeding after 15 minutes, call 911.
- ▶ **Bleeding from Mouth:** When a victim is bleeding from their mouth; you will need have the victim sit down, you will determine where the blood is coming from (usually the tongue, cheek or lip) and apply direct pressure to the area with sterile gauze or a clean cloth over the area. If the bleeding is in a area you can't reach, the bleeding will not stop, and/or the victim starts to have difficulty breathing, call 911.
- ▶ **Tooth Injury:** The victim could have a mouth injury, or could have bitten down on something and broken or loosened a tooth. Check the mouth for any missing, loose or broken teeth; if there is a tooth out of place, pick it up by the crown(top) and put it in a cup of milk or clean water. **DO NOT** touch the roots. Clean the area with Saline or clean water. Then place a folded piece of gauze in the socket area and have the victim bite down to apply pressure to stop any bleeding. If the victim has a loose tooth (still connected) place a piece of gauze over the tooth and have the victim bite down to keep the tooth in place. If a tooth is chipped, gently clean the area. If you notice a tooth that has changed color, along with all of the other possibilities, call the victims dentist and explain the situation; and the dentist will instruct you what to do.

# Wound Care

## part 2

**Signs of Eye Injuries:** Pain, Trouble seeing, Bleeding, Bruising, Redness & Swelling

### Types of Eye Injuries:

- ▶ **Something in the Eye:** When sand/dirt or a chemical gets in an eye, wash the affected eye out continuously for 20 minutes. Then; contact the victim's eye doctor to describe what happened, and the doctor will instruct the victim what to do.
- ▶ **Shattered or Small objects in the Eye:** When shattered glass, small bits of metal, etc. get in the eye(s); **DO NOT** attempt to remove any of the fragments, you could cause additional damage. You will need to cover the affected eye(s) with a cup(s), or something like it that will **NOT** apply direct pressure on the affected eye(s), to discourage movement of the eye(s). Also, you will need to put a patch of some sort over the non injured eye, to discourage any eye movement and cause additional damage. The victim will need to be taken to the ER by EMS, or by a staff/friend/relative for medical attention.
- ▶ **Impaled object in the Eye:** When an object becomes lodged in an eye, **DO NOT** attempt to remove the object. You can secure the object in place by putting a piece of tape on both sides of the object from the eyebrow to the cheekbone, then cover the affected eye with something large enough to not touch the impaled object. Also, remember to put a patch over the other eye to discourage any eye movement and cause additional damage. The victim will need to be taken to the ER by EMS, or by a staff/friend/relative for medical attention.

**Anytime you see any of the signs of an Eye injury, contact the eye doctor to get instructions, or go to the ER.**

# Wound Care

## part 3

- ▶ **Amputation:** Save the cut off body part, because doctors might be able to reattach it. To preserve the body part you will need to: wash it in clean water; cover/wrap the body part with a clean/sterile dressing; place the covered body part in a dry, watertight plastic bag; place that bag in a container/bag with ice; write the date, time and the victim's name on the container/bag, and make sure it goes with EMS to the hospital. As soon as you have secured/prepped the body part, you will need to stop the bleeding on the injured area. You will need to get a number of sterile dressings, and apply firm, direct pressure to the affected area; adding another dressing over the one before until the bleeding stops. If the bleeding does not slow down, you will also need to apply firm indirect pressure on the major artery for the affected area. **DO NOT** remove the dressings after the bleeding stops; secure the dressings in place by wrapping a bandage over/around the dressings. Continue to talk with the victim during this task. If the victim goes unconscious, monitor their breathing. If they stop breathing, start CPR.
- ▶ **Impaled Objects:** **DO NOT** move the impaled object; try to keep the victim from moving. If you do see some bleeding around the object, very gently wrap a sterile dressing around the impaled object, making sure not to move it. If the victim goes unconscious while waiting for EMS, monitor their breathing.
- ▶ **Bleeding you can't see:** This usually results from a sudden impact to the body (chest, abdominal area). The signs noticeable after injury are: Pain, Shortness of breath, Bruising, Coughing up blood, Going into shock. You will assist the victim to lie down and follow the process listed under Shock. Also, continue to talk to the victim and, calmly get as much information on what happened, and who the victim would like you to call. If the victim goes unconscious while waiting for EMS, monitor their breathing. If she/he stops breathing, start CPR.



# Sprains, Fractures & Joint Injuries

- ▶ **Sprains:** Swelling around the affected area and skin turning a slight blue tint are signs of a sprain. You will need to remove sock, shoe, glove, etc. from the injured area. You will need to elevate the affected limb and loosely wrap the limb with a towel, then secure a bag of ice over the affected area for 30 minutes. Remove the ice and towel after the 30 minutes, and see if the swelling has gone down any. Leave the limb elevated for 30 minutes, then place the towel and ice back in the correct positions for another 30 minutes, while keeping the limb elevated. If the swelling does not go down and the skin becomes darkly discolored, the victim will need to be taken to the ER via EMS, yourself or a staff/friend/relative of the victim for medical care.
- ▶ **Fractures:** The most common types of fractures are: the 'Closed' fracture, in which the broken bone stays under the skin; and the 'Open' fracture, in which the bone breaks through the skin. **DO NOT** move the broken bone! At this point, you will need to find 2 stick like items (rulers, branches, etc.) that are the length of the limb to use as splints. You will place the splints on the sides of the affected area, then you secure the splints with 2 pieces of cloth, or something that can be tied; one a few inches above the break, and the other one a few inches below the break. For an 'Open' fracture, you will have to gently place a clean cloth around the exposed bone to stop any bleeding. Then secure the limb in a sling to remain in position, if possible. The victim will need to be taken to the ER via EMS, yourself or a staff/friend/relative of the victim for medical care.
- ▶ **Joint Injuries:** Swelling, Discomfort/pain and difficulty moving a joint are signs of a joint injury. **DO NOT** move the injured joint. You will need to get a bandage and secure the joint in the exact position of the injury, using the figure-eight method. Start with wrapping the bandage twice a few inches above the joint then, in the figure-eight style, wrap the bandage once a few inches below the joint, going back and forth until secure. The victim will need to be taken to the ER for medical care.

# Head, Neck and/or Back Injuries

- ▶ **Head Injuries:** A head injury can occur from a fall, getting hit on the head, vehicle crash, diving, etc. Signs of a Head Injury are: Sleepy, Confused, Not responding, Vomits, Complains of a headache, Trouble seeing and/or walking, Has a seizure. Usually, if the injury is from falling or running into something, the victim will deny it is a major injury and refuse medical care. In this case, you will need to monitor the victim for 2 days; it can take that long for it to surface. During this time you will need to watch for mood swings, out of character outbursts, painful headaches, nausea, and unequal dilation of the pupils. Whether you discovered a victim of a head injury, or you have been monitoring one starting to show the signs, call 911. If the victim goes unconscious while you are waiting for EMS, start CPR using the Jaw Thrust, **DO NOT move the head!**
- ▶ **Neck and Back Injuries:** Usually you will find a victim of these injuries on the ground or trapped in a vehicle. No matter how you find the victim, call 911. If you can't safely get to the victim, talk to her/him from a safe point, and let them know you have called 911. Keep talking to the victim, and monitor for any signs of danger (gas leak or smoke from a vehicle leading to a fire, is one example). Hopefully, the First Responders will arrive before a fire does start, and take over the situation. If you find a victim on the ground, observe the area and the position of the victim as you are approaching the victim. You have already introduced yourself, gotten consent and assessed that the victim could have head, neck & back injuries, based on the awkward position of the victim and a tall ladder on the ground. You will start to ask the SAMPLE questions, while maintaining a calm voice; this will encourage the victim to be calm. While you are talking to the victim, notice any shakiness, discoloration of the skin and a tingly sound in their voice; get a blanket to cover the victim. Also ask the victim if there is someone you can call for her/him. If the victim goes unconscious while you are waiting for EMS, start CPR using the Jaw Thrust, **DO NOT move the head!**

# Medical Situations / Emergencies

## Part 1

### Anaphylactic Shock:

This is a result of someone having a life threatening reaction to:

**peanuts, seafood or bee stings.**

▶ **There are different levels of allergic reactions to the above mentioned items:**

- Some people can have a mild reaction: consisting of itchiness and/or a rash, and sometimes sneezing.
- Some people have a mid-level reaction: of the itch and/or rash being more intense.
- Some people have a life-threatening reaction: when the person will swell up and have difficulty breathing.

**Everyone with known life-threatening reactions to peanuts, seafood and/or bee stings should carry an EpiPen with them at all times and be familiar how to use it. They also need to let friends, coworkers and relatives know where they keep the EpiPen, in case they can't get to it during a reaction.**

- ▶ **To apply the EpiPen; take the safety cap off, not touching the needle, and push the end with the needle in hard against the person's thigh, mid-way between the hip and knee, holding the pen in position for at least 10 seconds. If the victim does stop breathing, call 911 and start CPR.**

**Anyone allergic to above mentioned items can start out with a mild reaction, and it can escalate to life-threatening status.**

# Medical Situations / Emergencies

## part 2

### Seizures

- ▶ **Not all seizures are the same:** During some, the person appears to be daydreaming and they are unresponsive; Some involve unresponsiveness and limited loss of muscle control; The most problematic ones usually involve spasticity of arms and legs and/or the whole body, and unresponsiveness (these can become injurious).
- ▶ **Signs of someone having a seizure:** Stops responding, Loss of muscle control, Falls to the ground, Spastic/jerk movements of body and/or limbs
- ▶ The only thing you need to do while **monitoring** a seizure is to maintain a safe area for the victim; this means that you place something soft under their head and, if the victim is moving toward a large piece of furniture, you place yourself between the victim and the furniture to prevent possible injury, but not interrupt the seizure.
- ▶ **We must let any seizure run its course, it could become life threatening for the victim if you interfere!**
- ▶ **After the seizure, the victim will usually sleep or appear to be confused, not knowing what just happened.**
- ▶ **Once the seizure is finished, check to make sure the victim, who appears to be sleeping, is breathing. You might need to give some rescue breaths. If the victim does not start to breath on their own, call 911 and start CPR.**

# Medical Situations / Emergencies part 3

## Diabetes & Low Blood Sugar

- ▶ **Causes of Low Blood Sugar:** Has not eaten enough food for activities at the time, vomiting, injected too much insulin
- ▶ **Signs of Low Blood Sugar:** Sudden change in behavior, confusion or irritability; Hunger, thirst or weakness; Sweating and/or pale skin; sleepiness/ not responding; a seizure

**If someone is having low blood sugar, give them food or a drink that contains sugar: candy, regular soft drinks, sugar itself, etc.**

**If the person can't sit up and swallow, DON'T give anything to eat or drink!**

- ▶ **Signs of High Blood Sugar:** Frequent trips to the bathroom, Extremely sweet skin odor, Possible irritability & discomfort

**If someone is displaying any of these signs, check their blood sugar and follow the medical orders if they have high blood sugar.**

- ▶ **If You are not sure if the person has high or low blood sugar, go low and give them something with sugar!**

**If the person is not responding to the sugar or insulin, call 911 for medical assistance.**

**If the person stops breathing, call 911 and start CPR.**

# Medical Situations / Emergencies

## part 4

### Fainting

- ▶ Fainting is usually caused by lack of blood to the brain. It can also occur when someone stands too long without moving (more so in hot weather), Stands too quickly after bending or squatting, Has a heart condition, and when someone receives very bad news.
- ▶ If someone starts to appear to be dizzy, especially after experiencing one of the above mentioned possible causes, and is still responsive, help them lie down in a safe area.
- ▶ If someone has fainted, and starts to respond; ask them if they hurt anywhere, while looking for injuries.
- ▶ **If the victim remains unresponsive and/or stops breathing, call 911 and start CPR.**



# Medical Situations / Emergencies

## part 5

### Asthma

- ▶ An asthma attack occurs when there is blockage, usually swelling, in the airway.
  - ▶ The attack can be triggered by a number of things: dust, mold, pollen, etc.
- ▶ People diagnosed with asthma have prescribed inhalers, and they should always know where the inhaler is located. The person should also let friends, staff and family know where the inhaler is in case she/he is too weak and/or having too much difficulty breathing to get to it.

**If the person does not respond to the inhaler, or stops breathing, call 911 and start CPR.**

# Medical Situations / Emergencies

## part 6

### Choking

- ▶ **Mild Choking** is when the victim can still cough and make sounds; you let the victim continue to cough, and hopefully cough up the item they were choking on.
- ▶ **Severe Choking** is when the victim can not make sounds, cough or breathe; in this case you would have to perform the Heimlich maneuver on the victim. To perform the Heimlich, stand behind the victim, reach around their waist, place your dominate hand in a fist (face down) and the other hand in front of the fist just above the belly button, then you push in (angled upward), staying just above the belly button each time. You keep repeating the push until they cough up what they were choking on, or go unconscious and you help them to the floor.
- ▶ **Unconscious Choking** is when the victim goes unconscious before you can reach her/him, or goes unconscious while you are performing the Heimlich maneuver on them. In either case, you need to do a mouth check to see if they they coughed up the item she/he was choking on during the fall. Yell for someone else near by to call 911 while performing the mouth check. If you were able to remove the item, give 2 rescue breaths. **The rescue breaths might not be enough, and you will need to start CPR, or if you did not see the item they were choking on, start CPR with the added mouth check.**

# Burns

## Part 1

- ▶ **1<sup>st</sup> Degree Burns:** Sunburn is the most common form of 1<sup>st</sup> degree burn. The skin is hot and a reddish color, and it will eventually start to itch. You take care of the burn by placing the affected area under cool, **NOT COLD**, tap water for 15 minutes. If you can still feel the heat radiating from the skin, repeat the process for another 15 minutes. Continue this process until the area is in normal range.
- ▶ **2<sup>nd</sup> Degree Burns:** This type of burn usually results from hot water, gardening chemicals, etc. In this case, the skin is hot and reddish in color with rashes (which will eventually turn into blisters). You will use the same process as for a 1<sup>st</sup> degree burn, with the only difference being that when it does reach the normal range, you will need to cover the blistered area loosely with sterile dressing. Because the blisters will eventually pop/burst. Contact her/his doctor and explain the situation so the doctor can instruct them how it needs to be treated.
- ▶ **3<sup>rd</sup> Degree Burn:** This type of burn can be life threatening. The skin will have an old, cracked leathery look, and there is a chance that the skin will be burned away over an area and you might be able to see the bone exposed. In the case of 3<sup>rd</sup> degree burns, call 911 then find a sterile cover (clean sheet is one example) to place over the affected area. **DO NOT PUT ANY WATER ON THE 3<sup>RD</sup> DEGREE BURN AREA!** It could contaminate the open burn wounds. If the victim also has 1<sup>st</sup> and/or 2<sup>nd</sup> degree burn areas, away from the other affected area, start the process listed for those burns using towels (or something like) to control the water while cooling them down. You should also calmly talk to the victim while you are helping them and waiting for EMS to arrive.

# Burns

## part 2

- ▶ **Chemical Burns:** Most chemical burns are from household and gardening supplies, unless the victim works in an area that uses chemicals for work tasks; and can result with 1<sup>st</sup> or 2<sup>nd</sup> degree burns. You would use the process(s) listed on the previous slide for those burns to treat the affected area(s). **If it is a dry chemical, you need to wipe/brush off the chemical before you start the process, the water could activate the chemical and cause more problems.** There are some chemicals that can cause 3<sup>rd</sup> degree burns; you will need to call 911 and, if possible, have the information describing the involved chemical so the 911 operator can include the information to the first responders. Unless the 911 operator states otherwise, you will start the process for 3<sup>rd</sup> degree burns until EMS arrives.
- ▶ **Electrical Burns:** This can occur when someone is struck by lightning or has contact with live electrical wires. The affected areas are not always visible, most of the burn/damage is internal and will usually result with the victim not breathing. One key example of this is when people start to clean up from a storm, and don't pay attention that there are downed electrical wires mixed in the debris. Before you start to assist a victim of electrical burns, **YOU MUST MAKE SURE THE POWER SOURCE IS OFF!** Once you have called 911 and confirmed the power is off, you need to check the victim's breathing; if the victim is still breathing, you will need to monitor her/his breathing until EMS arrives; and if the victim is not breathing, or stops breathing, you will need to start CPR.

**It is very important to remember: If the victim is on fire, you need to have her/him "STOP, DROP and ROLL" to put the fire out, and remove any jewelry or clothing not stuck to the skin, then start the appropriate process(s) for the burned area(s) while waiting for the first responders, and if the victim stops breathing, start CPR.**

# Cold / Hot Related Emergencies

## part 1

### Cold Related Emergencies

- ▶ **Frost-Bite:** This usually occurs on parts of the body that are exposed to the cold, such as fingers, nose, ears, etc.; It can also affect areas that were covered, but got wet and exposed to the cold for a short period of time. Signs of frost-bite are: area is cold & numb; the area of skin will have a white, waxy or grayish-yellow appearance; and the skin does not move when you push on it. **To assist a victim with frost-bite, you will need to:** Take/move to a warm place; Call 911, Remove any wet and/or tight clothing and jewelry, dry the area and put on dry clothes; Cover the victim with a blanket to warm up; **Only if you are sure the affected area will not refreeze**, use warm (**NOT HOT**) tap water thawing the affected area, and keep changing the warm tap water every 15 minutes until EMS arrives.
- ▶ **Hypothermia:** This occurs when the body temperature falls; usually when someone gets wet in cold weather, or is exposed to the cold weather for a long period of time without enough cold weather gear. Signs of Hypothermia are: Skin is bluish and cool to the touch; Shivering has stopped; Personality change, confused or drowsy; Stops responding; Hard to tell if the victim is breathing; May appear to be dead. Hypothermia will cause the victim's inner-body systems to gradually slow down, until they fully shut down; this is why it can be difficult when first determining if they are breathing. **To assist a victim of Hypothermia, you will need to:** Move the victim into a warm place; Remove the wet clothing and pat dry before changing into dry clothes; Call 911; Cover the victim with a blanket (or what is available), keep adding more blankets (or what is available) for her/him to start to warm up. Monitor the victim's breathing, if the victim stops breathing, start CPR.

# Cold / Hot Related Emergencies part 2

## Heat Related Emergences

- ▶ **Heat Cramps:** This occurs when someone is vigorously working or exercising outside in the heat. Signs of Heat Cramps are: Painful muscle spasms; Sweating; Headache. **To assist a victim with Heat Cramps, you will need to:** Have the victim rest and cool off in a safe area; Give the victim a sports drink, juice or water (if others are not available); Massage the muscle cramp, and/or put ice on the cramped muscle for 20 minutes (make sure the ice is wrapped in a towel before placing on the area).
- ▶ **Heat Exhaustion:** This occurs when someone ignores the warning signs of heat cramps, and continues to work or exercise. Signs of Heat Exhaustion are: the above mentioned along with; Nausea; Dizziness; Vomiting; Fatigue. **To assist a victim with Heat Exhaustion you will need to:** Have the victim rest/lie down in a safe, cool place; Call 911; Remove as much of the victim's clothing as possible; Use a cool water spray, or towels dampened with cool tap water (especially on the neck area), to cool the victim down; Have the victim drink a sports drink, juice or water (if the others are not available). If the victim stops breathing, start CPR.
- ▶ **Heat Stroke:** This occurs when someone ignores the warning signs of heat exhaustion, and can be life threatening. Signs of a Heat Stroke are: the above mentioned along with; Passing out; Seizures; Skin is hot and flush. **Since the victim's life is in danger, you will need to QUICKLEY cool the victim down:** Call 911 & make sure they are in a safe area; Yell for people near by to bring as much ice & water as they can, and use a hose if one is close by to start the cool down; place bags of ice on both sides of the neck, in both arm pits and in the groin area (this will speed up the cooling process). You are not concerned about the victim going into shock as much as you are to cool them down! If the victim stops breathing while waiting for EMS, start CPR.



# Bites & Stings

## part 1

- ▶ **Bee Stings:** If someone has never been stung by a bee, they will not know if they will have an allergic reaction; you need to monitor the victim for 30 minutes and watch for swelling and difficulty breathing. After the bee sting, you will need to get the victim to a safe place; Use a thin, flat item (credit card) to slide in the opposite direction of the stinger to pull the stinger out; Wash the area with running, soapy water; Wrap some ice in a towel and place over the area for 20 minutes. Continue to monitor the victim's breathing during the process, and if they start having any difficulty, call 911. If they stop breathing while waiting for EMS, start CPR.
- ▶ **Snakebites:** If someone has been bitten by a snake, and they can't tell you what kind of snake, assume it is a poisonous one. Signs of a snakebite are: Pain in the bite area, that could get worse; Swelling around the bite area; Nausea, vomiting, sweating and weakness. After a snakebite, you will need to get the victim to a safe area; Call 911; Remove any tight clothing or jewelry that can affect the area, while making sure the victim does not touch the bitten area; Gently wash the area with running water and soap (if available). Keep encouraging the victim to be still and calm. If the victim stops breathing, start CPR.
- ▶ **Spider Bites:** As with snakes, assume it is a poisonous spider if you don't know what spider bit the victim. Signs of a spider bite are: the above mentioned along with; Difficulty breathing, Seizures, Unresponsive. After a spider bite, you will need to get the victim to a safe area; Call 911; Remove any tight clothing or jewelry that can affect the area; Gently wash the area with running water and soap (if available); Wrap a bag of ice in a towel and place it over the bite area. Monitor the victim's breathing while waiting for EMS; if they stop breathing, start CPR.

# Bites & Stings

## part 2

- ▶ **Dog, Cat and Wild animal Bites:** Unless you know the dog or cat, assume it has rabies, like all wild animals. After a dog, cat or wild animal bite, you will need to get the victim to a safe area; Call 911; Wash the area with running water and soap (if available); If there is any bleeding, put a sterile dressing over the area with direct pressure applied until the bleeding stops (follow the process for bleeding); if they have a bruise or swelling, place a wrapped bag of ice over the bite area for 20 minutes, or while waiting for EMS.
- ▶ **Ticks:** Some ticks can carry life altering diseases, and need to receive medical treatment. After a tick is found on the body (usually by scratching), you will need to get the victim to a safe area; Call 911; If the victim has not already damaged the body of the tick, you will need to get a pair of tweezers, grasping close to the tick's mouth and lifting straight up enough to tent the skin for a few seconds so the tick will, hopefully, let go; Wash the area with running water and soap (if available). If the victim stops breathing while waiting for EMS, start CPR.

# Poisons

## Poison Related Emergencies:

- ▶ This is usually when someone swallows or breaths a poisonous substance. Anytime you are dealing with a poison, you need to call the Poison Control Center at (800) 222-1222. If you have access to the container the poison was in, have it available to answer any questions they will have about the substance and instruct you what to do, which also includes calling 911. If the victim spills a poison on their body, or gets some in their eye, refer to the processes for Burns part 2 - chemical burns and Wound Care part 2 - eye injuries for the treatment.
- ▶ **Make sure the area is safe:**
- ▶ Look for warning signs of poison(s) nearby; Spilled or leaking containers; More than 1 victim in the area; if you feel unsafe (example would be a stench in the area). **If you feel unsafe and/or there is more than 1 victim in the area, don't go in, call 911!**
- ▶ **Carbon Monoxide is the number 1 killer poison; it can't be seen and it does not have an odor. It will usually be a slow process for the gas to consume the building, and the victim(s) will assume they are tired and have a normal headache; they usually die in their sleep. This is why it is so important to maintain any gas appliances in a building, and have carbon monoxide detectors in the building. If you think you smell a gas leak, call for it to be checked ASAP; before it can turn into carbon monoxide.**

# CardioPulmonary Resuscitation

## CPR part 1

- ▶ **Assessing the victim:** First, you must implement the 'Tap & Shout'; where you tap on the victim's shoulder at the same time you are loudly asking them if they are OK. At the same time, you make any observations about the placement of the body; if it is in a peculiar position, you can go ahead and assume that there could be a head, neck and/or back injury. You will need to call 911, or have someone else call 911 while you check the breathing. If there is no response and the victim is in a strange position, you would use the jaw-thrust to check their breathing while checking for signs of circulation. If there is no response and no signs of a head, neck and/or back injury, you check for signs of circulation, which includes breathing; you do the head tilt-chin lift to open the airway, and look for the chest to rise while you are listening & feeling for breathing.
- ▶ **Compressions:** Once you have determined that the victim is not breathing, you need to start the compressions. You will place your hands, one over the other, with the fingers interlocked, on the middle of the chest directly between the nipples. You will need to give 30 high quality, quick compressions; each one at a 2 inch depth, allowing complete chest recoil after each compression. The 30 compressions should only take 15 to 18 seconds to complete. You are reaching an average of 100 compressions a minute.
- ▶ **Breaths:** Immediately after you finish the 30 compressions, give 2 breaths by tilting the head back and lifting the chin to open the airway. If there are signs of a possible head, neck and/or back injury, you will use the jaw-thrust (you use your thumbs to push both sides of the back of the jaw bone forward, while using 2 fingers to push the front of the jaw bone down, not moving the head at all) to give the 2 breaths using a shield or pocket mask, the breaths should take less than 10 seconds.
- ▶ **Cycles:** Each cycle consists of the 30 compressions and 2 breaths. After the 5<sup>th</sup> cycle, you will recheck the signs of circulation, including breathing. If there is still no sign of circulation, continue CPR.

# CardioPulmonary Resuscitation

## CPR part 2

- ▶ **Rescue Breaths:** Rescue breaths are given when the victim is showing signs of circulation, but not breathing. You give 1 breath at a time, lasting about 5 seconds, with a few seconds in between breaths. If the breaths are not taking and the chest is still risen, start CPR.
- ▶ **Recovery Position:** If the victim starts to breath on their own, put them in the Recovery Position; you turn them on their side; place the upper hand angled under their face, or straighten their lower arm to be under their face; Bend the upper leg and angle it to touch the floor. These positions will usually prevent the victim from rolling over. Also, you **MUST** continue to monitor the victim's breathing until EMS arrives; restarting CPR if they stop breathing.
- ▶ **Unconscious Choking:** When you find a person unresponsive, and the breaths will not go in; they are most likely choking. In this situation, you will start CPR with an added mouth check after the compressions. If the victim did cough up the item, pull it out and give 2 rescue breaths. If the victim continues not to respond, start CPR, without the mouth check.

# Reminders:

- ▶ Always remember to get a form of consent, verbal or gestural, from a conscious victim!
- ▶ Make sure you and the victim are in a safe area!
- ▶ Know where you are, so when you call 911 you can give an exact location!
- ▶ You might have to improvise items to use for PPE's!
- ▶ Any medical emergency or situation can result with the victim going into shock!
- ▶ You must always monitor a victim's breathing while waiting for EMS, and be ready to start CPR if they stop breathing!



The National Safety Council First Aid / CPR handbook  
and  
The AHA First Aid & CPR handbook

Were used to develop this power point project