



# First Aid

It's an old saying, but...*An Ounce of Prevention, IS Worth a Pound of Cure*, especially in an emergency situation when seconds count. Here are a few selected first aid tips that may be useful in a disaster situation!!



**Taking it one step at a time.**

First aid is the immediate care given to a person who is injured or ill. Sudden illness or injury can often cause irreversible damage or death to the victim unless proper care is initiated as soon as possible. First aid includes identifying a life-threatening condition, taking action to prevent further injury or death, reducing pain, and counteracting the effects of shock, should they be present.

Because life-threatening situations do occur, everyone should know how to provide emergency care until a victim can be treated or transported to a medical facility.

First aid is not intended to replace care by a physician. Its intent is to protect the victim until medical assistance can be obtained. For any situation that appears to be life-threatening, it's important to remember to call 9-1-1 and get help on the way as soon as possible.

The primary purpose of first aid is to:

- Care for life-threatening situations.
- Protect the victim from further injury and complications.
- Arrange transportation for the victim to a medical facility.
- Make the victim as comfortable as possible to conserve strength.
- Provide reassurance to the victim.

## As a Rule of Thumb Call 9-1-1 if:

- The victim has lost consciousness, is unusually confused, or is losing consciousness
- The victim has difficulty breathing or is not breathing in a normal way
- The victim has chest pain or pressure that won't go away
- The victim has persistent pressure or pain in the abdomen
- The victim is vomiting or passing blood
- The victim is having seizures or severe headache, or has slurred speech
- The victim has head, neck, or back injuries
- The victim seems to have been poisoned

An accident can occur at any time or any place. If you are the first person to arrive, there are a few basic principles you should follow to protect yourself and the victim. First, **CALL 9-1-1**; then:

1. **Survey the Scene.** Before you help the victim, determine if the scene is safe. If anything dangerous is present, don't put your own life at risk to try and help the victim; you will be of no aid if you become a victim too. Summon help and wait for trained people to resolve the situation. If the scene is safe, try and determine what happened and how many victims there may be. Never move the victim unless an immediate, life-threatening danger exists, such as a fire or the threat of a building collapse.

2. **Primary Victim Survey.** After ensuring the scene is safe, you can turn your attention to the victim. Begin by performing a primary survey to determine if the victim:

- A] is conscious
- B] has an open, unobstructed airway
- C] is breathing
- D] has a heartbeat
- E] is not bleeding severely

To check for consciousness, gently tap the person and ask if they are okay. If there is no response, this is an indication that a possible life-threatening situation may exist. If the person is responsive and can talk or cry, this indicates they are conscious, breathing, have an unobstructed airway, and a pulse.

If the victim is unconscious, kneel down next to the head and check for the **ABC's**: **A**irway, **B**reathing, and **C**irculation. To check the **A**irway (clear and maintain an open airway), **B**reathing (restore breathing), and **C**irculation (restore circulation), place your ear next to the victim's mouth and listen/feel for breath sounds while looking for a rise and fall of the chest. While doing this, check for a pulse by placing your fingers on the neck, just below the angle of the jaw, and feel for the pulse from the carotid artery. These three steps will determine if cardiopulmonary resuscitation (CPR) is needed. If you would like to **learn how to perform CPR and First Aid, contact your local fire department, hospital, or the American Red Cross.**

## WOUNDS

### Caring for a Minor Open Wound

*Blood color in a minor wound is dark red/purple and is the result of venous bleeding.*

- Stop the bleeding by applying direct pressure with a clean, absorbent cloth; if a cloth is not available, use your fingers.
- If the blood soaks through, apply a second bandage on top. DO NOT remove the first bandage because it will disturb the clotting which has already occurred.
- If the bleeding still does not stop, elevate the wound higher than the heart.
- Once the bleeding stops, clean the wound gently to get all the debris and dirt out.
- Apply an antibiotic ointment if necessary.
- Wrap the wound firmly in a cloth or bandage. DO NOT cut the circulation off.

### Caring for a Major Open Wound

*Blood color of a major wound can be either dark red /purple or bright red. If the blood is bright red and spurts from the wound, it is arterial. Arterial bleeding is life-threatening and must be treated immediately.*

- Cover the wound with a clean dressing and press against it firmly with your hand.
- Elevate the wound above the level of the heart.
- Cover over the clean dressing with a roll bandage to hold the dressing in place.
- If the bleeding does not stop, add additional dressings over the roll.
- Squeeze a pressure point, which means to press the artery, above the wound, against the bone. The primary pressure points are on the inside of the arm, just under the armpit, and on the inside of the leg in the groin.
- Seek medical aid as soon as possible.
- Be careful not to shut the circulation off, except as a last resort.

## First aid Kit

### What Your First Aid Kit Should Consist Of

- First Aid Manual
- Basic Bandages (an assortment of adhesive bandages or athletic tape and moleskin)
- Basic Drugs/Lotions (aspirin, antiseptic, antacids)
- Basic First Aid Tools (Tweezers, small mirror, razor blade)
- Additional items if desired such as: gauze pads, ace and butterfly bandages, burn ointment, Caladryl, ice packs, slings, and basic splints.

## SHOCK

### The Silent Killer

Shock is a life-threatening secondary condition wherein the body's vital physical and mental functions are seriously impaired due to an inadequate supply of oxygenated blood reaching the lungs, heart or brain. This is the body's reaction to a serious injury, illness, or other traumatic event.

Characteristics of shock include: (1) Anxiety (usually the earliest sign), weakness, paleness, sweating, and thirst; (2) Pulse may become rapid and weak; (3) Patient may become dizzy and pass out; (4) The more severe the injury or illness, the more likely shock will set in; (5) Shock can result in death if not treated rapidly.

To treat shock, check your "ABC's," then, (1) Handle the patient gently, and only if necessary; (2) If conscious, place the victim on his/her back; if unconscious, place face down, with the head to one side, but only if no neck injury is suspected; (3) Except in the case of a head injury or suspected neck fracture, lower the head and shoulders and elevate the feet approximately 15 inches; (4) Make sure there are no broken bones before straightening the patient out; (5) Protect the patient from becoming cold, especially from the ground below; (6) Continue to reassure the patient.

## Bone Fractures

There are two types of fractures:

- (1) Closed Fracture, which is a break or crack in a bone that does not puncture or penetrate the skin.
- (2) Open Fracture, where there is a break in the skin caused by a protruding bone, or there is an open wound in the area of the fracture. Open fractures are more serious than closed fractures.

Some symptoms of a fracture are: (1) The injured part appears deformed; (2) Pain is present when attempting to move the part; (3) Absence of feeling when touched; (4) Bluish color and swelling in the area of the injury.

To treat a fracture: (1) Splint the patient before moving; (2) Pad the splint and place it so that it supports the joint above and below the fracture. Immobilize a leg fracture by splinting the fractured leg to the unbroken leg if no other materials are present; (3) If the limb is grossly deformed by the fracture, splint in place, and do not try to straighten it; (4) Elevate and use indirect (not on skin) ice packs if available.