

Fast Facts

First Aid

- Provide basic treatment to an injury
- Need to act quickly and efficiently
- Practice skills so you are competent
- Take a first aid course
- Have a well-stocked first aid kit in several key places (home, traveling, cars, etc.)

Common First Aid Skills

Choking

- May use hand gestures if unable to talk
- Encourage talking person to cough
- Person struggling to breathe, stand behind them, position their head forward and hit them vigorously in between shoulder blades with the palm of hand (repeat as needed)
- Use the Heimlich maneuver (stand behind the person, put arms around their waist, make a fist and put this just above their belly button, grab fist with other hand and forcefully thrust inwards and upwards of the person's stomach)
- Can do maneuver on yourself if you are alone or use a chair by bending over it and thrusting downward

Difficulty Breathing

- Talk to/gently shaking person to see if they respond
- No response = move person to their back on hard surface (floor)
- Tilt their head back by using one hand under their chin to lift up while using other hand to gently push back on their forehead
- Hold head in this position, lean down and look at their chest to see if it is rising and falling as your cheek is near their mouth/nose to see if you feel any air movement
- If breathing, keep head tilted back until help arrives
- Np breathing = Start CPR (don't waste time checking for a pulse) put the heel of one hand over the middle the person's chest (not over their ribs or stomach) and the heel of your other hand on top of the first one (keep fingers off chest); weight over hands and elbows locked straight; press down firmly and quickly at a rate of about 100 times a minute
- If alone, do one minute of CPR before calling for help
- If not alone, send someone to get help while you start CPR
- Do not stop until someone else can take over for you or you become so exhausted that if you continue, you will hurt yourself.

Bleeding

- Must control and stop it
- Small: bleeding will stop on its own within a few minutes; hold pressure to the site (remove any foreign objects before holding pressure); wash with soap and water.

First Aid Kit Essentials

Home Kit:

- Adhesive tape
- Anesthetic spray (Bactine) or lotion (Calamine, Campho-Phenique)
- 4" x 4" sterile gauze pads
- 2", 3", and 4" Ace bandages
- Adhesive bandages (all sizes)
- Oral antihistamines -- diphenhydramine (Benadryl causes drowsiness) or loratadine (Claritin doesn't cause drowsiness)
- Topical corticosteroids (Hydrocortisone 1%)
- Aloe vera topical gel or cream
- Exam gloves
- Polysporin antibiotic cream
- Nonadhesive pads (Telfa)
- Pocket mask for CPR
- Resealable plastic bags
- Safety pins (large and small)
- Scissors
- Triangular bandage
- Tweezers

Travel Kit:

- Deep: harder to control bleeding; steady pressure on site; often need stitches/glue
- Arterial bleeding: bright red blood that squirts in sync with pulse; needs immediate medical attention; hold hard pressure (do not let go until told to by a medical professional); use clothes, bandages or whatever you have available to put over the site (if become soaked, do not remove them but put more material over the top while continuing to hold pressure); lie person down and raise injury higher than body
- Nosebleed: small blood vessels in the nose burst; do not bend your head backwards or lie down; pinch your nostrils shut for 10 minutes with fingers and remain upright

Burns

- Damage to your skin and deeper tissue that can be caused by fire, heat, electricity, radiation or chemicals
- 4 types: First degree: skin is red, painful and very sensitive to touch; some drainage of fluid from deeper layers of skin possible; sunburn. Second degree: damage is deeper and blisters form; painful and sensitive to touch; touching hot pan. Third degree: all layers of the skin are dead; appear in a variety of colors from normal skin tone, white, black (charred) or bright red (blood is in the bottom of the wound); no blisters or pain (all the sensory nerves in the area have been killed). Fourth degree: burn extends into the muscle and/or bone beneath the skin; muscle tissue or bone is visible; may or may not be painful
- Goal of treatment: reduce the amount of damage; remove all clothing and jewelry from the area (if clothing stuck to the skin, leave it in place); run lukewarm water over area; heat loss can occur from large burns, so be sure to warm areas that are not injured; never open blisters; do not use any ointments, butter or lard because these actually trap heat in
- Seek medical treatment for burns bigger than the palm of a hand, any burn that is on the face/neck/hand/groin, any chemical or electrical burn, all third-degree burns, most second-degree burns, people over 65 or under 5 and anyone who has been burned and has cold/clammy skin, other injuries or appears to be in distress

Shock

- Brain is not getting enough oxygen because due to lack of blood circulation
- Symptoms: paleness, sweaty/clammy/cold skin, dizziness, low blood pressure, anxiousness/restlessness, weak/fast pulse, slow/shallow breathing, disorientation and loss of consciousness

(in addition to the items in home kit)

- Antacids
- Antidiarrheals
- Antihistamine creams
- Aspirin
- Book on first aid
- Cigarette lighter
- Cough medications
- Dental kit
- Small flashlight
- Ibuprofen (pain relief)
- Insect repellants
- Knife (small Swiss Army-type)
- Moleskin (for blisters or hot spots)
- Nasal spray
- decongestants
- Oral decongestants
- Personal medications and items
- Phone card that has at least 60 minutes of time (and not a close expiration date), 10 quarters (minimum) for pay phones and a list of important people to reach in an emergency
- Sunscreen with an SPF of 30 or more
- Thermometer

-Treated at hospital; while waiting for ambulance, lie down on back and raise feet, keep warm with blankets and don't let them eat/drink

Strains, Sprains and Fractures

-Sprain/strain are similar to each other but different from a fracture (if are able to walk on the injury, then it usually isn't broken

-Treatment is to reduce swelling; RICE (Rest, Ice, Compression, Elevation) treatment (is means you need to not use the affected area, put on ice on it for 10-20-minute intervals with 10-minute breaks in between for the next several hours, wrap the area in a compression bandage and keep the area elevated to the same level as your heart)

-Majority of swelling and pain should go away in the first week, but it can take four or more weeks to heal completely

-If affected body part swells significantly in the first hour or it is impossible to walk, it is probably fractured and needs to be evaluated by a doctor

Concussion

-Any time you get hit in the head are at risk

-If you pass out for any period of time, are too dizzy to walk or start vomiting, then you need to go to the emergency room immediately

-May not have these symptoms, but still need to take it easy and not participate in any strenuous activities

-Is possible to have a concussion and not pass out – if have a headache, confusion, blurry vision, irritability, memory loss, sensitivity to light/noise and/or sleepiness, then you should be evaluated by a doctor (sometimes may not appear until 24 – 72 hours after the injury and can last several weeks)

Insect bites

-Itchiness makes us scratch the area, introduces bacteria from skin and underneath our fingernails, so don't scratch and keep clean with soap and water

-If area becomes redder and/or enlarged, might be infected

-Flu-like symptoms after an insect bite might be the sign of a mosquito-borne illness and should be evaluated by a doctor

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