

## heal thyself?

Chances are, someone in your household will suffer one of the injuries listed here (roughly in order from least to most serious). To be prepared, review the instructions and then post them on your refrigerator or keep them in your first-aid kit.



### bloody nose

A nosebleed occurs when blood vessels inside the nose break. Because they're delicate, this can happen easily.

- **What to do immediately:** Lean slightly forward and pinch your nose just below the bridge, where the cartilage and the bone come together. Maintain the pressure for 5 to 15 minutes. Pressing an ice pack against the bridge can also help.
- **What not to do:** Tilt your head back. "You may swallow blood, and potentially some could go in your lungs," says David Markenson, M.D., chair of the American Red Cross Advisory Council on First Aid and Safety.
- **When to seek medical attention:** Call your doctor if you can't stop the bleeding after 20 minutes; if the nosebleed happened spontaneously; or if it accompanies a headache, dizziness, ringing in the ears, or vision problems.



### object in eye

Anything that gets in your eye, whether it's a speck of sand or a chemical, can cause pain and could damage the cornea.

- **What to do immediately:** Try to dislodge a small particle by blinking several times. If it's not budging, rinse the eye by holding the lid open under a running tap (if possible, remove contact lenses first).
- **What not to do:** Never rub your eyes. Even a tiny piece of dirt can scratch the cornea and cause an infection. Never try to remove an object that's deeply embedded—leave that to the professionals.
- **When to seek medical attention:** If you have splashed a chemical (such as bleach) in your eye or have an object embedded in it, call 911. For minor irritants, call your doctor if your eye is still stinging or swelling after rinsing or if you have vision problems.



### sprain

Sprains occur when the ligaments surrounding a joint are pulled beyond their normal range. Sprains are often accompanied by bruising and swelling.

- **What to do immediately:** Alternately apply and remove ice every 20 minutes throughout the first day. Wrapping the joint with an elastic compression bandage and elevating the limb may also help. Stay off the injury for at least 24 hours. After that, apply heat to promote blood flow to the area.
- **What not to do:** Work through the pain, says Art Hsieh, chief operating officer for the San Francisco Paramedic Association, or you risk doing more serious damage, like tearing the ligament.
- **When to seek medical attention:** If the injury doesn't improve in a few days, you may have a fracture or a muscle or ligament tear; call a doctor.



### burn

First-degree burns produce redness; second-degree burns cause blisters; third-degree burns result in broken or blackened skin.

- **What to do immediately:** Place the burn under cool running water, submerge it in a bath, or apply wet towels. Loosely bandage a first- or second-degree burn for protection.
- **What not to do:** Put an ice pack on major burns. "Ice can damage the skin and worsen the injury," says Markenson. Don't pop blisters. Don't apply an antibiotic or butter to burns; doing so can breed infection.
- **When to seek medical attention:** Call 911 for third-degree, electrical, and chemical burns or if the victim is coughing, has watery eyes, or is having trouble breathing. Go to the ER for a second-degree burn that's larger than your palm—treatment may prevent scarring.



## blow to the head

The skull is very protective, so hitting it rarely results in injuries to the skull itself. But if the force is great, the neck, the back, and soft tissues inside the head can be injured.

- **What to do immediately:** If the person is unconscious, call 911. If the struck area is bleeding, treat it as you would any other cut, but follow up with your doctor, as there may be internal injuries. Icing a small bump can help reduce the swelling.

- **What not to do:** Leave the victim alone, especially when he's sleeping. Wake him up every three to four hours and have him answer simple questions to make sure there's no brain injury, such as a concussion.

- **When to seek medical attention:** Call 911 if the victim exhibits seizures, dizziness, vomiting, nausea, or obvious changes in behavior.



## choking

True choking is rare, says Hsieh. When a person is really choking, he can't cough strongly, speak, or breathe, and his face may turn red or blue.

- **What to do immediately:** Call 911. For a victim age one or older: Have the person lean forward and, using the palm of your hand, strike his back between the shoulder blades five times. If that doesn't work, stand behind the victim, place one fist above the belly button, cup the fist with your other hand, and push in and up toward the ribs five times, as in the Heimlich. If you're alone: Press your abdomen against something firm, like a kitchen counter, or use your hands.

- **What not to do:** Give water or anything else to someone who is coughing.

- **When to seek medical attention:** For a case of true choking, always call 911.



## poisoning

Potential household hazards include cleaning supplies, carbon monoxide, and pesticides. Bites and stings can also be poisonous to some people.

- **What to do immediately:** If a person is unconscious or having trouble breathing, call 911. In other cases, call the Poison Control Centers' national hotline (800-222-1222). Be prepared to tell what substance was involved, how much was taken and when, and the age and the weight of the victim.

- **What not to do:** Wait until symptoms appear to call for help. And don't give ipecac syrup or try to induce vomiting. The poison could cause additional damage when it comes back up. The victim shouldn't eat or drink anything, unless the hotline operator tells you otherwise.

- **When to seek medical attention:** Always.



## open wound

Breaks in the skin that bleed (such as a cut, a scrape, or a puncture) need to be treated promptly to avoid infection.

- **What to do immediately:** Place a piece of sterile gauze on the injury and apply pressure to stop the bleeding. For minor cuts and scrapes, wash with soap and water; follow with a thin layer of Vaseline or an antibiotic ointment and cover with a bandage.

- **What not to do:** Wash or apply ointment to a wound that's large, deep, or profusely bleeding. Instead, seek medical help. If there's an object protruding from the injury, don't try to remove it.

- **When to seek medical attention:** If there's an object in the cut, call 911. If the wound is deep, accompanied by a fever, or has redness, swelling, or red streaks around it, call your doctor.



While these basic first aid tips can be useful, they are not a substitute for a hands-on class. To arrange a class for your group, call 973-376-2040 or e-mail [Training@SpringfieldFAS.org](mailto:Training@SpringfieldFAS.org)

**In an emergency, Call 9-1-1. This will get additional help coming as soon as possible.  
Do not enter a dangerous environment and become injured yourself.**

### Burns

Minor burns appear red and swollen. Unless they involve a large portion of the body, you can treat these at home by first flushing the area with cool water for several minutes, covering the area with a sterile bandage or cloth and using an over-the-counter pain reliever.

Moderate burns are intensely red in color and will begin to blister. Follow the same first aid procedures as for minor burns and seek medical attention.

Severe burns may be charred black or dried white. Nerve damage may result in no pain in the most severely affected areas. Remove the patient from the source of the burning without endangering yourself and Call 9-1-1 immediately. Remove any smoldering clothing and jewelry which may still be hot or may cut off circulation when hands and feet swell. Cover the burned area with a cool/moist sterile bandage or cloth. Do not apply any creams, ointments or ice, and do not break blisters. Be careful - you want to cool the burning but not the patient. Burnt skin will prevent the body from properly controlling its temperature and the patient can become hypothermic even during the summer.

### Cold Emergencies

When exposed to very cold temperatures, the skin and underlying tissues may freeze. Frostbite is most common in the extremities - hands, feet, nose & ears. First, get the patient indoors or otherwise out of the cold. Then, place hands under the armpits to warm them slowly. Cover nose or ears with a clean, dry, gloved hand. Do not rub the areas. If they remain numb, seek medical attention. If you are unable to get immediate help, use warm (not hot) water to help rewarm the affected areas.

### Choking

If the person's airway is only partially obstructed, they will still be able to speak short sentences and cough. Encourage them to continue but do nothing else. However, if the airway becomes completely blocked the person will not be able to speak or cough and will need your help. Stand behind the choking person and wrap your hands around their abdomen. Make a fist with one hand and place it just above their navel. With your other hand, grasp your fist and press in and up with a quick, forceful thrust until the obstruction is relieved. Call 9-1-1 if the patient loses consciousness.

### Diabetes

If a person's blood sugar level drops too low, they will start to become confused, weak and eventually unconscious. As long as they are still conscious, able to sit upright and swallow, give them sugar cubes, chocolate, a non-diet soda or fruit juice, milk or a peanut butter and jelly sandwich. If the patient becomes too weak to sit or swallow, or becomes unconscious, do not place anything in their mouth. Instead, place them on their side and Call 9-1-1.

### Electrocution

Even small amounts of electricity can be deadly and even just a small mark on the skin could hide a serious internal injury. If possible, turn off the source of the electricity. If that is not possible, separate the patient from the electricity using a non-conductive material such as a plastic or wooden stick. Call 9-1-1 and treat any burns, shock or cardiac/respiratory arrest.

### Eye Injuries

- Impaled objects - Do not attempt to remove the object. Instead, surround the object with large bulky dressings so that the object does not move. Also,





cover both eyes. Even if just one eye is injured, the two eyes move together and can cause further injury.

- Foreign debris - Debris such as dirt, sand, and sawdust can cause blinking and tearing which will help flush the substance from the eyes. If the object remains, turn the head to the side and flush with water from the bridge of the nose letting the water run off of the opposite cheek.

### Heat Emergencies

Heat exhaustion is characterized by weakness, a rapid heart beat, low blood pressure, nausea and cool, clammy skin. Loosen or remove clothing and the patient drink cool (not cold) water or a sports drink. Avoid carbonated beverages.. Afterwards, have the patient lay down and elevate their feet.

Heat shock is characterized by hot, dry skin, a rapid heart beat, rapid, shallow breathing and confusion or unconsciousness. Get the patient into a cool area. Call 9-1-1 then cover with damp sheets and fan air over the patient to help cool the body.

### Poisoning

Poisoning can be accidental or intentional, and can be through contact (ingesting, inhaling, injecting or touching) with a dangerous substance or simply having too much of something that is normally safe. If you know what poisoned the patient, follow the instructions on the container. If you do not know what poisoned the patient, Call 9-1-1.

Do not induce vomiting unless instructed to do so. Remove the patient's clothing if it has been exposed to the poison. Try to remove the poison by brushing it off of the patient's skin. Do not use water unless instructed as some poisons will react with the water to create something even more dangerous. If you are told to seek further medical attention, take the container that held the poison with you so the substance can be positively identified.

### Nosebleed

Sit upright or lean slightly forward. Use your thumb

and forefinger to pinch your nose. Do not release the pressure for at least 10 minutes. Breathe through your mouth during this time. Call 9-1-1 if the bleeding continues or you feel lightheaded, dizzy or have a severe headache.

### Minor Cuts and Scrapes

Stop the bleeding by pressing a gauze pad or clean cloth against the wound. Once bleeding stops, clean the area with mild soap and water, dry gently with a clean cloth (do not remove the dried blood) and cover with a protective bandage. If the bleeding does not stop after several minutes of applying pressure, Call 9-1-1.

### Seizures

Try to keep the area around the patient clear of any objects that could injure further. If possible, loosen tight clothing. Once the seizure ends, try to have the patient lay on his or her side and reassure him or her. Do not put anything in the patient's mouth, whether to protect the tongue or food or drink. Do not restrain the patient.

If the patient has only one seizure and has a history of seizures, he or she may not want any further medical care. However, a first-time seizure, one seizure lasting more than five minutes and multiple seizures all require medical attention. Call 9-1-1 immediately.

### Severe Bleeding

Call 9-1-1 immediately. Lay the patient down. If possible, the head should be slightly lower than the rest of the body and the area that is bleeding should be elevated above the heart. Apply steady, firm, direct pressure to the wound with sterile gauze or a clean cloth. If the first piece of gauze or cloth is soaked through, add another on top of the first but do not remove the previous layer. Once bleeding stops, keep the patient still until help arrives.

# **First Aid & Emergencies**

## **Insect Sting Allergy Treatment**

**Call 911 if the person has:**

- Trouble breathing
- Feelings of faintness or dizziness
- Hives
- A swollen tongue
- A history of severe allergy reaction to insect stings

**If the person *does not* have severe allergy symptoms:**

### **1. Remove the Stinger**

- Scrape the area with a fingernail or use tweezers to remove it.
- Don't pinch the stinger -- that can inject more venom.

### **2. Control Swelling**

- Ice the area.
- If you were stung on your arm or leg, elevate it.
- Remove any tight-fitting jewelry from the area of the sting. As it swells, rings or bracelets might be difficult to remove.

### **3. Treat Symptoms**

- For pain, take an over-the-counter painkiller like acetaminophen or ibuprofen. Do not give aspirin to anyone under age 18.
- For itchiness, take an antihistamine. You can also apply a mixture of baking soda and water or calamine lotion.

### **4. Follow-Up**

- It might take 2-5 days for the area to heal. Keep it clean to prevent infection.

**If the person *does* have severe allergy symptoms (anaphylaxis):**

## 1. Call 911

Seek emergency care if the person has any of these symptoms or a history of severe allergic reactions (anaphylaxis), even if there are no symptoms:

- Difficulty breathing or wheezing
- Tightness in the throat or a feeling that the airways are closing
- Hoarseness or trouble speaking
- Nausea, abdominal pain, or vomiting
- Fast heartbeat or pulse
- Skin that severely itches, tingles, swells, or turns red
- Anxiety or dizziness
- Loss of consciousness

## 2. Inject Epinephrine Immediately

If the person has an anaphylaxis action plan from a doctor for injecting epinephrine and other emergency measures, follow it. Otherwise, if the person carries an epinephrine shot or one is available:

- Inject epinephrine if the person is unable to.
- If the person has a history of anaphylaxis, don't wait for signs of a severe reaction to inject epinephrine.
- Read and follow patient instructions carefully.
- Inject epinephrine into outer muscle of the thigh. Avoid injecting into a vein or buttock muscles.
- Do not inject medicine into hands or feet, which can cause tissue damage. If this happens, notify emergency room staff.
- The person may need more than one injection if there's no improvement after the first. For an adult, inject again after 10 to 20 minutes. For a child, inject again after 5 to 30 minutes.
- A person should always go to the ER after an epinephrine injection, even if the symptoms subside.

## 3. Do CPR if the Person Stops Breathing

- For a child, start [CPR for children](#).
- For an adult, start [adult CPR](#).

## 4. Follow-Up

- Make sure that someone stays with the person for 24 hours after anaphylaxis in case of another attack.
- Report the reaction to the person's doctor.