

# First Aid Manual

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## **First Aid General Concepts**

- Always make sure the scene is safe before you help anyone. There could be a fire, active shooter, gas leak, electrocution, slippery surface, etc. If the scene is not safe, do not proceed to the victim, just call 911 and stay safe! Wait until it is safe to help the victim.
- Giving immediate care to a person with an illness or injury can save a persons life.
- Most of the time you will be providing first aid for minor injuries. When providing first aid
  minor injuries could become life threatening. It is important to be prepared for all types of
  injuries large and small.
- First aid can be given by anyone in any situation.
- When providing first aid, its always possible that the victim could go into cardiac arrest. You
  will recognize cardiac arrest when the victim becomes unresponsive and stops breathing. If
  the victim becomes unresponsive and stops breathing begin CPR!
- Always call 911 whenever someone is ill, injured, or not sure what to do in an emergency. If you think they will need more help than you can provide, always call 911 and get an AED.

## **Good Samaritan Law**

- You must get consent to help any responsive person. Ask the victim "Can I help you?". If the
  victim gives you consent by verbal, written, or hand signals proceed to help them. If the
  victim does NOT give you consent, do not touch them, everyone has the right to refuse
  your help. If the victim is unresponsive you always have implied consent.
- When providing First Aid or CPR you are protected by the *Good Samaritan Law* in the event someone tries to sue you for helping them. Each State in the United States has a Good Samaritan Law but they differ from State to State. Make sure you understand the Good Samaritan Law in your State. To be protected by the Good Samaritan Law you must follow these guidelines:
  - Always get consent
  - Don't provide care beyond your skill level or training
  - Act in good faith, everything you do must be done with an effort to try and help
  - Try to be reasonably careful

## **Medical Identification Jewelry**

- Always look for medical identification jewelry, you will typically find them located around a
  persons wrist, neck, or ankle. The jewelry will list medical information for the person you
  are helping, make sure you tell 911 all the information that is listed on the medical jewelry.
  Medical conditions you will typically find on medical identification jewelry are as follows:
  - Allergies to medications, plants, food, animals, or insects
  - Autism
  - Epilepsy
  - Diabetes
  - DNR (DO NOT RESUSCITATE)
  - Asthma
  - Seizures
- If any medical identification jewelry has listed the letters DNR or says DO NOT RESUSCITATE, do NOT perform CPR, just call 911 and stay with the person.

## **Bloodborne Pathogens**

 When providing First Aid or CPR make sure you take the universal precaution and treat all blood and other body fluids as if they are infected with disease. If you take this universal precaution it will help protect you from bloodborne pathogens.

"If it is wet and not yours, don't touch it!"

- If you are going to provide First Aid or CPR and there is blood or body fluids make sure you are wearing PPE, personal protective equipment. These items include:
  - Gloves
  - Masks
  - Eye protection
  - Gowns
  - Face Shields
- Once finished providing help to a victim, properly remove all equipment that has touched blood or body fluids. Make sure you dispose of all equipment that has touched blood or body fluids in a biohazard waste bag or container.
- After removing and disposing of all equipment that has touched blood or body fluids, wash
  your hands well with soap and lots of water for at least 20 seconds.

## **First Aid Assessment**

- **Scene safety**. Your first step is to make sure the scene is safe. Only if it is safe you will proceed to the victim. If it is not safe, call 911 and make sure you stay safe until help arrives.
- **2. Call 911** if:
  - The person is unresponsive, the person does not respond to your voice or touch
  - Signs of heart attack
  - Signs of stroke
  - Severe bleeding
  - Seizures
  - Severe burns
  - Head, neck, and spinal injuries
  - If you are not guite sure what to do
- **3. Get consent**. If the person is responsive, ask what the problem is and get consent to help them.
  - If the victim is UNRESPONSIVE, you have implied consent and check the victim's breathing for 5-10 seconds. If the victim is not breathing or not breathing normally (only gasping) you must start CPR beginning with chest compressions.
- **4. Help**. Start helping with any major injuries and medical identification jewelry. Start by looking for any head injuries and then visually scan over the victims entire body looking for any obvious injuries and any medical identification jewelry.

## **Bleeding**

### **Signs**

- Broken skin with blood oozing, draining, or spurting out
- Pain in the area
- Light headed or dizzy

#### **Treatment**

- Place a clean dressing on top the wound. (Gauze pads or any other clean piece of cloth)
- Apply direct pressure to the dressing on top of the wound. If bleeding does not stop apply more dressing and more pressure, repeat as necessary.
- Elevate the affected limb above the heart.
- If an arm or leg has major bleeding that you are unable to control with direct pressure and elevation, a tourniquet can be used.
- Treat for Shock.

## **Tourniquet**

- A tourniquet is a strap or band that you place around the injured limb. They can come
  with a stick, or windless, that is twisted to tighten the tourniquet. If you do not have a
  premade tourniquet you can use any cloth, bandage, or torn piece of clothing, as long as
  it is at least an inch wide
- A tourniquet should be applied about 2-3 inches above the injury
- Tighten until the bleeding stops, or until the bleed is controllable
- Note the time you placed the tourniquet
- Never remove or loosen the tourniquet
- Always seek medical attention

## Internal Bleeding

### Signs

- Car crash, motor bike crash, or bicycle crash
- Fallen
- Sports injuries, being hit by another person or object
- Injury to the torso
- Pain in the chest or abdomen
- Blood coming from the mouth
- Shock symptoms

#### **Treatment**

- Call 911.
- Have the patient stay still and lie down if possible.
- Treat for Shock.

## **Nosebleeds**

## Signs

Blood coming from the nose or draining into the mouth

- Pinch the soft part of the nose below the nasal bone.
- Tilt their head forward to allow blood to drain out.
- Encourage them to not swallow the blood.
- Call 911 if the bleeding does not stop within 10 minutes.

## **Impaled Object**

### **Signs**

Object is stuck in a persons body or in their wound (Knife, pencil, stick)

#### **Treatment**

- Makes sure the scene is safe.
- Call 911 or seek medical care.
- NEVER REMOVE THE IMPALED OBJECT.
- Control bleeding around the object.
- Stabilize the object so it cannot move in and out or back and forth.

## **Amputation**

### Signs

Any part of a hand, foot, arm, or leg is removed from the body

- Call 911.
- Make Sure the scene is safe.
- Control the bleeding. A tourniquet may be necessary to stop the bleeding.
- Rinse the amputated body part.
- Place the limb in a sealed bag.
- Place the sealed bag over ice .
- Write the time, date, and patient's name to avoid misplacing the body part.
- Treat for Shock.

## Shock

### Signs

- Lots of blood loss, heart attacks, dehydration, severe allergic reactions, infection, broken bones, and car crashes will cause a person to go into shock
- Weakness, lightheaded or dizzy
- Feeling Nauseous
- Pale or grayish skin
- Feeling cold and clammy
- Confused, disoriented, or agitated
- Feeling Thirsty

- Call 911.
- Control any bleeding.
- Have the person lie flat on their back.
- Elevate the feet if possible.
- Keep them warm and cover them with a blanket.
- Keep them calm and ensure they stay responsive.

## **Head Injuries**

### Signs

- Non-responsive
- Nausea and Vomiting
- Headaches
- Confusion
- Dizziness
- Double vision or blurry vision
- Loss of memory

#### **Treatment**

- Call 911.
- Limit moving the patient and tell them to not move.
- Wait for advanced help to show up.
- Limit daily activities until fully healed.

## **Neck and Spine Injuries**

## **Signs**

- Car crash, motor bike crash, or bicycle crash
- Fallen
- No feeling, tingling, or is weak in the extremities
- Pain or tenderness in the neck or back
- Appears disoriented or not fully alert

- Have the person remain as still as possible.
- Do not twist or turn the persons head, neck, or back unless absolutely necessary.
- Wait for someone with more advanced training to arrive and take over.

## **Broken Bones**

## Signs

- Severe pain in the limb
- Severe pain whenever the limb is moved
- Deformity of the bone
- Numbness or tingling below the break

- Call 911 or seek medical care.
- Control bleeding.
- Splint or immobilize the broken bone if possible.
- Cover the injured body part with a towel or blanket.
- Place ice packs on the injured area.
- Treat for Shock.

### **Burns**

### Signs

- First degree = Redness and swelling skin
- Second degree, Partial-thickness = Redness, swelling, and blisters of skin
- Third degree, Full-thickness = White or blackened charred skin

#### **Treatment**

- Call 911 for all third degree burn
- Make sure the scene is safe, don't get burned yourself.
- Remove any jewelry or tight-fitting clothing that is not stuck to the skin.
- Cool the burn with cool running water, do not use ice or ice water.
- Cover the burns with sterile dressing If needed.
- Do not apply lotions or creams until the burn is fully cooled down.

## **Electrical Burns**

### Signs

- Burns where the electricity has entered and left the body
- Burns on the outside of the body and there can be burns on the inside of their body, injuring the organs. There is no way to immediately tell how severe the burns are on the inside of the body.
- An electrical injury can cause a person to stop breathing or go into cardiac arrest

- Call 911.
- Make sure the scene is safe, don't get yourself electrocuted.
- Check to see if the person is breathing.
- Everyone with electrical injury should see a healthcare provider as soon as possible.

## **Eye Injuries**

### **Signs**

- Pain in the eye
- Trouble seeing or double vision
- Swelling or bruising in the eye

#### **Treatment**

- If material gets in the patient's eye, rinse with copious amounts of running water and have them continue blinking repeatedly.
- Cover both of the patient's eyes to limit movement of the injured eye.
- Seek medical care if needed.

## **Tooth Injuries**

### Signs

A tooth or portion of a tooth is broken off or gets knocked out

- Have the patient spit out any teeth or pieces of teeth.
- If a tooth completely fell out, place the tooth in milk or a cup filled with the patient's saliva (do not store in their mouth).
- Do not hold the tooth by the root, only by the crown.
- Seek medical attention immediately.

## **Diabetic Emergencies**

### Signs

- Altered mental status/confusion
- Irritability
- Sweating
- Shaking, trembling, or loss of coordination
- Dizziness

#### **Treatment**

- Quickly give the person sugar, juice, honey, syrup, soda, candy.
- Monitor patient.
- If symptoms are NOT resolved within 10-15 minutes call 911 and try more sugar.
- If symptoms are resolved give the patient food to each such as a sandwich or crackers.
- Call 911 if the patient ever loses consciousness.

## **Asthma**

### **Signs**

- Difficulty breathing
- Wheezing
- Chest Tightness
- Rapid heart rate

- Assist them in using their inhaler if they have one.
- Keep them calm and tell them to take deep breaths and slow their breathing.
- Call 911 if inhaler does not work or it is not available.

## **Seizures**

### **Signs**

- Loss of muscle control, muscle contractions, or spasms
- Not responding or loss of consciousness
- Fainting or extreme fatigue
- Some patients experience an 'aura' or a strange feeling before the seizure

- Call 911 if there is no history of seizures.
- KEEP THE PATIENT SAFE, move objects or place padding against surfaces to help prevent injuries to the patient while they are having the seizure.
- Try not to touch the patient and NEVER hold, restrict movements, or place anything in their mouth.
- Some seizures are managed by medication.
- Only touch the patient if they begin to vomit, roll the patient onto their side and let the seizure finish with them rolled on their side. This will help with breathing and help prevent aspiration.
- If the seizure lasts longer than 5 minutes always call 911.

## **Allergic Reactions**

## **Signs**

#### MILD SYMPTOMS

- Light headed and dizzy
- Stuffed nose, sneezing, or itchy eyes
- Itchy skin
- Swelling of skin, rashes, or hives

#### SEVERE SYMPTOMS

- Difficulty breathing OR rapid, short, wheezing breaths
- Swelling of the tongue and face
- Nausea or vomiting
- Going into Shock

#### **Treatment**

- Call 911 for severe symptoms.
- Administer an EpiPen if possible.
- Give a normal dose of an antihistamine.
- Treat for Shock.

## Epinephrine Pen (EpiPen) Use

- Call 911.
- Remove the safety cap on one end of EpiPen.
- Push the orange tip into the outer thigh, halfway between the knee and hip, until it clicks.
- Hold in place for 10 seconds and then remove the EpiPen pulling straight back.
- Have the patient rub the area for 30 seconds.
- Use a second EpiPen if the first EpiPen does not take effect in 60 seconds or if EMS help has not arrived and the severe symptoms return.

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## **Heart Attack**

## Signs

- Tightness, pressure, or pain in chest or back
- Discomfort or pain in the neck, jaw, arm, or both arms
- Shortness of breath
- Light headed and dizzy
- Sweating
- Nausea
- Indigestion or heartburn sensation

- Call 911.
- Have them chew one adult aspirin or 3 baby aspirin.
- Keep them calm.
- Put them in a position of comfort.
- Treat for Shock.

## **Stroke**

### Signs

- Facial droop
- Arm strength loss or loss of coordination
- Slurred or incorrect speech
- Time to call 911
- Some patients also complain of an headache or migraine

- Call 911.
- NO ASPIRIN.
- Keep them calm and comfortable.
- If given within 3 hours of the start of symptoms, a clot-busting drug can reduce longterm disability for the most common type of stroke, so it is vital that the patients seeks medical attention.

## **Naloxone**

Naloxone is a drug that reverses the effects of opioids such as morphine, hydrocodone, and heroin. Family members and caregivers may carry naloxone to use in the case of an opioid overdose. It is safe and effective. Naloxone is available to purchase at most local drug stores.

#### How to use it

- If a person becomes unresponsive from an opioid overdose, call 9-1-1 and get the naloxone.
- Check for breathing, if not breathing give the naloxone.
- Two common forms of naloxone will be available, intranasal spray or auto injector (similar to an EpiPen).
- Give the naloxone by spraying it into the nose or by injecting it into a muscle with the auto injector.
- If the person becomes responsive and is breathing, wait for advanced help to arrive.
- If the person continues to be unresponsive and not breathing, begin CPR until advance help arrives.

## **Heat Exhaustion and Heat Stroke**

### Signs

- Being exposed to heat or hot temperatures for an extended period of time
- Light headed and dizzy
- Nausea
- Heavy sweating with heat exhaustion and no sweating with heat stroke
- Fast pulse
- Rapid breathing
- Cramping
- Headache
- Sign of Shock

- Call 911.
- Remove the person from the heat.
- Cool the person down quickly.
- Hydrate with water and electrolyte drinks.
- Apply cool packs to armpits, neck, and groin.
- Remove tight clothing, shoes, socks, and hats.
- Place them in an air condition room or in front of a fan if available.

## Hypothermia

### **Signs**

- Being exposed to cold or freezing temperatures for an extended period of time
- Shivering but as hypothermia gets worse they will stop shivering
- Loss of coordination and slow moving
- Slurred speech
- Lethargy
- Weak Pulse

- Call 911 or seek medical help immediately.
- Remove the person from the cold.
- Warm the person up slowly .
- Remove all wet and cold clothing.
- Cover them with warm dry towels or blankets.
- Give them slightly warm fluids to drink, never use HOT fluids and don't give them alcohol.
- Place in a heated room or by a heater if available.
- Treat for Frostbite.

## **Frostbite**

### Signs

- Skin and body parts that have been exposed to cold temperatures for long periods of time
- Cold skin
- Numbness
- As it worsens skin goes from red, to white, to bluish, to grayish-yellow
- Waxy skin
- When pushing on the skin, the skin does not move

- Seek medical attention.
- Remove jewelry.
- Soak the patients frostbitten parts in room temperature or slightly warm water, never use HOT water.
- If they cannot be soaked, cover frostbitten parts with a warm wet washcloth or towels.
- Do not rub or use friction to warm the frostbitten part up.

## **Snake Bites**

### Signs

- Visible bite marks
- Bleeding
- Pain increases over time
- Redness and swelling around the bite
- Difficulty breathing
- Nausea, vomiting, and sweating
- Loss of consciousness

- Make sure the scene is safe, do not get bitten yourself.
- Call 911.
- If you did not see the snake, assume it is venomous.
- Keep the bite below the heart and tell them to stay still.
- Immobilize the bitten limb if possible and tell the victim to stay still and remain calm.
- Remove tight fitting clothing or jewelry.
- Wash the bite with soap and lots of water.
- Do not suck out the venom or cut and bleed the wound.

## **Spider Bites**

## Signs

#### **NON-POISONOUS**

- Mild pain
- Itchy skin
- Swelling and redness at the bite
- Blister or blisters

#### **POISONOUS**

- Severe pain at the site of the bite
- Muscle cramps
- Nausea or vomiting
- Fever
- Joint pain or stiffness
- Difficulty breathing
- Headache
- Seizure
- Loss of consciousness

- Make sure the scene is safe.
- Call 911 or seek medical care.
- If you did not see the spider, assume it is venomous.
- Clean the bite with soap and lots of water.
- Place and ice pack on the bite.
- Apply antibiotic ointment.
- Watch for infection.

## **Bee Stings**

## Signs

- Pain
- Itchy skin
- Swelling and redness at the sting
- Severe allergic reaction, possible anaphylactic shock

- Make sure the scene is safe, do not get stung yourself.
- Call 911, if anaphylactic shock is suspected and use their EpiPen.
- Remove the stinger with a scraping motion.
- Wash the area with soap and lots of water.
- Place an ice pack on the sting site.