

FIRST AID

Call 911 or an Emergency Number for any severely ill or injured child.

STINGS AND BITES

Stinging Insects Remove the stinger as quickly as possible with the scraping motion of a fingernail. Put a cold compress on the bite to relieve the pain. If trouble breathing, fainting, or extreme swelling occurs, call 911 or an emergency number immediately. For hives, nausea, or vomiting, call the pediatrician. For spider bites, call the pediatrician or Poison Center and describe the spider. Have the pediatrician examine any bites that become infected.

Animal or Human Bites Wash wound thoroughly with soap and water. Call the pediatrician. The child may require a tetanus or rabies shot.

Ticks Use tweezers or your fingers to grasp as close as possible to the head of the tick and slowly pull the tick away from the point of attachment. Call the pediatrician if the child develops symptoms such as a rash or fever.

Snake Bites Take the child to an emergency department if you are concerned that the snake may be poisonous or if you are unsure of the type of snake bite. Keep the child at rest. Do not apply ice. Loosely splint the injured area and keep it at rest, positioned below the level of the heart. Try to identify the snake, if you can do so safely.



BURNS AND SCALDS

General Treatment First stop the burning process by removing the child from contact with hot water or a hot object (for example, tar). If clothing is burning, smother flames and cool clothing by soaking with water. Remove clothing unless it is firmly stuck to the skin. Run cool water over burned skin until the pain stops. Do not use ice or apply any butter, grease, medication, or ointment.

Burns With Blisters Do not break the blisters. Call the pediatrician for advice on how to cover the burn and about any burns on the face, hands, feet, or genitals.

Large or Deep Burns Call 911 or an emergency number. After stopping and cooling the burn, keep the child warm with a clean sheet covered with a blanket until help arrives.

Electrical Burns Disconnect electrical power. Do NOT touch the victim with bare hands. Pull the victim away from the power source with a wooden pole. ALL electrical burns need to be seen by a doctor.

SKIN WOUNDS

Make sure the child is immunized for tetanus. Any open wound may require a tetanus booster even when the child is currently immunized. If the child has an open wound, ask the pediatrician if the child should receive a tetanus booster.

Bruises Apply cold compresses. Call the pediatrician if the child has a crush injury, large bruises, continued pain, or swelling. The pediatrician may recommend acetaminophen for pain.

Cuts Wash small cuts with water until clean. Use direct pressure with a clean cloth to stop bleeding. Apply an antibiotic ointment, then cover the cut with a clean bandage. Call the pediatrician for large and/or deep cuts, or if the wound is gaping, because stitches should be placed without delay. For major bleeding, call for help (911 or an emergency number). Continue direct pressure with a clean cloth until help arrives.

Scrapes Rinse with soap and water to remove dirt and germs. Do not use detergents, alcohol, or peroxide. Use antiseptic soap. Apply an antibiotic ointment and a bandage that will not stick to the wound.

Splinters Remove small splinters with tweezers, then wash and apply local antiseptic. If you are unable to remove the splinter completely, call the pediatrician.

Puncture Wounds Do not remove large objects such as a knife or stick from a wound. Call for emergency medical assistance (911). Such objects must be removed by a doctor.

Call the pediatrician for all puncture wounds. The child may need a tetanus booster.



EYE INJURIES

If anything is splashed in the eye, flush gently with water for at least 15 minutes. Call the Poison Center or the pediatrician for further advice. Any injured or painful eye should be seen by a doctor. Do NOT touch or rub an injured eye. Do NOT apply medication. Do NOT remove objects stuck into the eye. Cover the painful or injured eye with a paper cup or eye shield until you can get medical help. An eye injury may require a tetanus booster.

FRACTURES AND SPRAINS

DO NOT MOVE A CHILD WHO MAY HAVE A NECK OR BACK INJURY, as this may cause serious harm. Call 911 or an emergency number.

If an injured area is painful, swollen, deformed, or if motion causes pain, wrap it in a towel or soft cloth and make a splint with cardboard or another rigid material to hold the arm or leg in place. Apply ice or a cold compress, or seek emergency care, if there is a break in the skin near the fracture or if you can see the bone, cover the area with a clean bandage, make a splint as described above, and seek emergency care.

If the foot or hand below the injured part is cold or discolored, seek immediate emergency care.



FEVER

Fever in children is usually caused by infection. It also can be caused by chemicals, poisons, medications, an environment that is too hot, or an extreme level of exertion. Take the child's temperature to see if he has a fever. Most pediatricians consider any thermometer reading above 100.4°F (38°C) a sign of a fever. However, the way the child looks and behaves is more important than how high the child's temperature is. Call the pediatrician immediately if the child has a fever and:

- Appears very ill, is unusually drowsy, or is very fussy
- Has been in an extremely hot place, such as an overheated car
- Has additional symptoms such as a stiff neck, severe headache, severe sore throat, severe ear pain, an unexplained rash, or repeated vomiting or diarrhea
- Has a condition causing immune suppression (such as sickle cell disease, cancer, or the taking of steroids)
- Has had a seizure
- Is less than 2 months of age and has a rectal temperature of 100.4°F (38°C) or higher

To make the child more comfortable, dress him in light clothing, give him cool liquids to drink, and keep him calm. The pediatrician may recommend fever medications. Do not use aspirin to treat a child's fever. Aspirin has been linked with Reye syndrome, a serious disease that affects the liver and brain.



FAINING

Lay the child on his back with his head to the side. Do NOT give the child anything to drink. If the child does not wake up within 1 minute, call the pediatrician, or dial 911 or an emergency number, if the child is not breathing, begin CPR.

TEETH

Baby Teeth If knocked out or broken, apply clean gauze to control bleeding and call the pediatric dentist.

Permanent Teeth If knocked out, find the tooth and, if dirty, rinse gently without scrubbing or touching the root. Do not use chemical cleaners. Use milk or cold, running water. Place the tooth into clean water or milk and transport the tooth with the child when seeking emergency care. Call and go directly to the pediatric dentist or an emergency department.

If the tooth is broken, save the pieces in milk and call the pediatric dentist immediately.



CONVULSIONS, SEIZURES

If the child is breathing, lay her on her side to prevent choking. Make sure the child is safe from objects that could injure her. Do not put anything in the child's mouth. Loosen any tight clothing. Perform rescue breathing if the child is blue or not breathing. Call 911 or an emergency number.

HEAD INJURIES

DO NOT MOVE A CHILD WHO MAY HAVE A SERIOUS HEAD, NECK, AND/OR BACK INJURY. This may cause further harm.

Call 911 or an emergency number immediately if the child loses consciousness and does not awaken within a few minutes.

Call the pediatrician for a child with a head injury and any of the following:

- Loss of consciousness
- Drowsiness that lasts longer than 2 hours
- Difficulty being awakened
- Persistent headache or vomiting
- Clumsiness or inability to move any body part
- Coughing or blood or watery fluid from ears or nose
- Convulsions (seizures)
- Abnormal speech or behavior

For any questions about less serious injuries, call the pediatrician.

POISONS

If the child has been exposed to or ingested a poison, call the Poison Center at 800/222-1222.

Swallowed Poisons Any nonfood substance is a potential poison. Call the Poison Center immediately. Do not induce vomiting except on professional advice. The Poison Center will give you further instructions.

Fire, Gas, or Smoke

Get the victim into fresh air and call 911 or the fire department. If the child is not breathing, start cardiopulmonary resuscitation (CPR) and continue until help arrives.

Skin Exposure If acids, lye, pesticides, chemicals, poisons, or any potentially poisonous substance comes in contact with a child's skin, eyes, or hair, brush off any residual material while wearing rubber gloves, if possible.

Remove contaminated clothing. Wash skin, eyes, or hair with large quantities of water or mild soap and water. Call the Poison Center for further advice.

If a child is unconscious, becoming drowsy, having convulsions, or having trouble breathing, call 911 or an emergency number. Bring the poisonous substance (safely contained) with you to the hospital.



NOSEBLEEDS

Keep the child in a sitting position with the head tilted slightly forward. Apply firm, steady pressure to both nostrils by squeezing them between your thumb and index finger for 10 minutes. If bleeding continues, or is very heavy, call the pediatrician or seek emergency care.

Does your community have 911? If not, note the number of your local ambulance service and other important numbers below.

**BE PREPARED: CALL 911
KEEP EMERGENCY NUMBERS
BY YOUR TELEPHONE**

PEDIATRICIAN _____
PEDIATRIC DENTIST _____
POISON CENTER _____
AMBULANCE _____
EMERGENCY DEPARTMENT _____
FIRE _____
POLICE _____



Turn Over for Choking and CPR Instructions

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™

American First Aid Emergency Guide

American Medical Association

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American First Aid Emergency Guide:

The American Medical Association Handbook of First Aid & Emergency Care American Medical Association, 1990 When a medical emergency strikes what you do can mean the difference between life and death The AMA Handbook of First Aid and Emergency Care gives you all the information you need quickly easily clearly so that you can make the difference Key features include Injuries illnesses and medical emergencies an alphabetical listing to help you find the information you need quickly CPR the most up to date information for infants children and adults First aid techniques you can practice so you are prepared when emergency strikes What happens in the emergency room knowing when to call your doctor or the hospital and what information to have ready Lifesaving techniques clear easy to follow instructions such as how to transport a victim with head or neck injuries Sports injuries treatment and recovery especially for the amateur school and weekend athlete Comprehensive index a complete listing by subject and symptom for fast reference Completely revised and updated

Citizen-Soldier Handbook: 101 Ways Every American Can Fight Terrorism Michael Mandaville, 2009-02 Citizen Soldier Handbook 101 Ways for Every American to Fight Terrorism is a How To Guide for Americans to fight the greatest threat to Western Civilization Radical Islam Terrorists declared every man woman and child to be a target We have no choice but to become Citizen Soldiers The Handbook's Five sections Morale Intelligence Physical Training Mental Training and Action encourage Americans of all backgrounds ages and skills to do their part against Radical Islam The Citizen Soldier Handbook is a Call to Arms in the spirit of Citizen Soldiers at Lexington and Concord firing the Shot Heard Round the World brighten the glow of Freedom from the Torch of Liberty Citizen Soldier Handbook puts this power into the citizen's hands with knowledge about the threat of Radical Islam how to empower yourself and how to use media to stop the threat of Radical Islam in the age of Information Warfare This book will inspire you John Ziegler Radio Show Host Author The Death of Free Speech We are engaged in a great war of Ideas Freedom versus Tyranny Democracy versus Islamic Totalitarianism The weapon of is Information As a writer I understand the power of Ideas Information and Humor The Citizen Soldier Handbook will help and inspire you your friends family coworkers fellow Americans to get the word out in dozens of ways Burt Prelutsky Former WGA President Author Conservatives Are from Mars Liberals Are from San Francisco 101 Reasons I'm Happy I Left the Left The Citizen Soldier Handbook is an invaluable resource at once an exhaustively researched compendium of strategies and a stirring reaffirmation of the meaning of citizenship it is a clarion call to action in a time when too many have been lulled into a false sense of complacency Harry Stein Author of How I Accidentally Joined the Vast Right Wing Conspiracy and Found Inner Peace and is a Contributing Editor to City Journal this is more than a handbook It is a call to action In this age of information and internet warfare everyone can be a Citizen Soldier and everyone can join the fight The Citizen Soldier Handbook will show you the way Brandon L Millett Chairman and Co Founder The GI Film Festival Washington D C The Citizen Soldier Handbook's Five Sections has 101 Actions even more if you include subheadings urging

Americans to take action in their Lives Communities and the World to fight Radical Islam Morale Believe in the Greatness of America and Fight For Her Intelligence Learn about Radical Islam its Roots Adherents Beliefs and Dangers Physical Training As Physical Beings We Must Be in Shape to Take Action Mental Training Steel Yourself for the Mission Ahead Take Action Take Action With Suggestions Ideas Techniques Methods and Resources Organizations and More This Book is a Match to Light The Torch of Freedom that You America s Citizen Soldier Must Hold High to Stop the Encroaching Darkness The Fight Is Yours

Wilderness Medicine: What To Do When You Can't Call 911 Clifton Castleman, Phil Gardner II, Jennifer Kay, 2016-06-12 Wilderness Medicine What To Do When You Can t Call 911 provides both basic and in depth information on how to recognize treat and manage both common injuries and illnesses as well as life threatening conditions when professional emergency medical care is an hour away or more Designed for those who work or travel in remote locations this comprehensive guide will teach you what to look for what to do in the event of an emergency and then help direct you in the most appropriate type of care This book is used as the course textbook for the Wilderness First Aid Wilderness First Responder and Wilderness EMT classes taught by Center for Wilderness Safety online at www.wildsafe.org

Guidelines for Technical Planning for On-Site Emergencies CCPS (Center for Chemical Process Safety), 2010-09-09 Prevention preparedness response and recovery the key components of emergency planning form the major sections of this work The book first describes PSM Process Safety Management as the key to prevention then goes on to consider the main features of a preparedness program including recognizing credible incidents planning practical strategy to deal with these incidents selecting necessary physical support systems and equipment and developing a complete emergency response plan The Response section presents the functions implemented during an actual emergency and concludes with a section on managing cleanup and restoration of operations The many tables and figures include Sample Incident Command System Plans for both large and small organizations OSHA and EPA regulations affecting planning sample Fire Emergency Action Levels HAZMAT Responder Levels and OSHA Emergency Training Requirements

ACSM's Resource Manual for Guidelines for Exercise Testing and Prescription David P. Swain, ACSM, Clinton A. Brawner, 2012-12-26 ACSM s Resource Manual for Guidelines for Exercise Testing and Prescription was created as a complement to ACSM s Guidelines for Exercise Testing and Prescription and elaborates on all major aspects of preventative rehabilitation and fitness programs and the major position stands of the ACSM The 7th edition provides information necessary to address the knowledge skills and abilities set forth in the new edition of Guidelines and explains the science behind the exercise testing and prescription ACSM s Resource Manual is a comprehensive resource for those working in the fitness and clinical exercise fields as well as those in academic training

Outdoor Emergency Care: A Patroller's Guide to Medical Care Edward C. McNamara, David H. Johe, Deborah A. Endly, 2020-05-07 Update July 1 2024 The Outdoor Emergency Care course has migrated to NSP s Center for Learning Platform From July 1 December 31 2024 NSP will offer both the Navigate Advantage Access Navigate and NSP Center for

Learning Hybrid versions of the course Prior to enrolling verify with your instructor which course to choose Students enroll in either course through the NSP Center for Learning from the nsp.org website For students enrolled in the Outdoor Emergency Care Navigate version of the course please purchase either the Advantage Access fully digital or Paperback Advantage textbook to access the online course materials You will access the course portal via the Navigate Advantage Access code provided with your textbook For students enrolled in the Outdoor Emergency Care Hybrid version of the course please do not purchase the Advantage Access digital only version of the textbook You will access the course from your NSP Center for Learning Developed in partnership with the National Ski Patrol Outdoor Emergency Care A Patroller's Guide to Medical Care Sixth Edition is designed to prepare first responders to handle any medical situation in the outdoor environment during all seasons The Sixth Edition features A straightforward consistent patient assessment process The patient assessment process is presented in the same way patients are assessed in the health care system Flowcharts are provided throughout the Patient Assessment chapter to keep the reader focused on each step of the process Up to date content As you read through each chapter you will find new information that is current with present prehospital patient care Subject matter that meets and in many cases exceeds the National Emergency Medical Responder criteria Information unique for ski and bicycle patrollers including extrication is included This material is presented in a format that combines the disciplines of urban EMS and wilderness medical rescue Continuous case studies A continuous case study is included in each chapter to encourage critical thinking and application of the information as readers progress through the chapter End of chapter review questions The review questions included at the end of each chapter allow students to evaluate the knowledge they have gained while reading the chapter Focus on learning objectives Specific objectives listed at the beginning of each chapter tell students at the outset what they are expected to learn as they move through the chapter Physical TextbookInteractive eBook version of the textbookNavigate online access code that unlocks an eBook Audiobook Study Tools Assessments and AnalyticsNavigate online access code that unlocks Lecture Outlines Lecture PowerPoint Slides Skill Guides Scenario Bank and a Test Bank Available to instructors onlyPaperback Navigate Advantage AccessISBN 9781284205251X X Access to eBook included with your Navigate online access codeX X Access to Online Instructor's ToolKit included with your Navigate online access codeNavigate Advantage AccessISBN 9781284240764 X Access to eBook included with your Navigate online access codeX X Access to Online Instructor's ToolKit included with your Navigate online access codeOnline Instructor's ToolKitISBN 9781284240726 X Standalone access to Online Instructor's ToolKitISBN 9781284224085 X Standalone access to eBook 2021 1000 pages *Instructor's Guide IG 14.1. Basic Rescue Course Instructor's Guide* United States. Civil Defense Office,1963 *American Medical Association Handbook of First Aid and Emergency Care* Italo Subbarao,Jim Lyznicki,American Medical Association,James J. James,2009 Explains what to do in a medical emergency offering the latest information and instruction in CPR the treatment of sports injuries what to do and expect in an emergency room and when to

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