

At Home



First Aid Guide



Safety Matters Certified Training

805-705-9222

www.cprtrainingsb.com

Safety Matters is a local and insured company specializing in providing quality CPR, AED and First Aid certification for Businesses, Schools, Construction and the medical community throughout Santa Barbara County. Safety Matters supports training and education with the sale of life saving products. Our primary goal is to offer you a resource for educational updates, innovative life saving products and certification training programs.

Table of Contents

INTRODUCTION.....	3
CHAPTER 1: Call 911.....	4
I.C.E. YOUR CELL PHONE	4
12 REASONS TO GO TO THE EMERGENCY ROOM.....	5
CHAPTER 2: Treat Bleeding.....	6
CUTS.....	6
NOSE BLEEDS.....	6
FOR FREQUENT NOSEBLEEDS:	7
TOURNIQUETS.....	7
CHAPTER 3: Poisonings	8
ARE YOU POISONING YOUR CHILD?.....	8
POISONING.....	9
BEE STINGS.....	10
CHAPTER 4: Treating Burns.....	10
BURNS	10
CHAPTER 5: Broken Teeth.....	11
INJURED TEETH	11
CHAPTER 6: Brain Injuries	12
SEIZURES	12
FEBRILE SEIZURES.....	12
STROKES.....	13
BLOWS TO THE HEAD.....	14
CONCUSSIONS.....	15
CHAPTER 7: Relieve Choking.....	16
CHOKING	16

INTRODUCTION

Many accidents (preventable or otherwise) occur at or near your home. Would you know what to do if you sliced your finger with a sharp knife while cooking dinner for your family? Would you know how to care for a broken limb if the neighbor's child fell out of a tree? If your co-worker began choking during the lunch break, could you help?

In most cases, professional emergency care is just a phone call away (EMTs, paramedics, the fire/police department, etc.), but while you're waiting for help, would you know what to do? Of course, taking a CPR/First Aid course *before* any accidents occur would be a great idea. You would learn how to care for some common injuries/illnesses (burns, cuts, bee stings, allergic reactions, diabetic emergencies) as well as learning how to care for more serious situations (stroke, sudden cardiac arrest) that may require the use of CPR. Training would give you knowledge and confidence to help out in an emergency at home or nearby, and possibly help you save the life of a loved one, neighbor, or friend.

Let's talk about some common injuries and illnesses and gain a little insight as to how you might be able to help if faced with an emergency in your home.

CHAPTER 1: Call 911

I.C.E. YOUR CELL PHONE

Have you programmed an “ICE” contact in your cell phone? ICE stands for "IN CASE of EMERGENCY" and would designate a contact person to speak on your behalf if you were unable to respond for yourself during an emergency.



The ICE concept is the brainchild of a British paramedic who found it difficult to get important contact details from patients who were unconscious or in shock. By programming your cell phone with ICE, not only will paramedics and hospital personnel have a method of contacting loved ones to advise them of your situation and your location, but also a method of getting pertinent information about your medical history. Your contact person should be aware of your blood type, medical allergies, current medications, or any other information that would be relevant.

This idea has begun to circulate and is becoming a recognizable and established method for getting information. It has an even greater significance with children. Many children do not carry a wallet or other types of identification, but many now carry cell phones. By programming your child's cell phone with an ICE contact (*your* phone number), it gives medical personnel an immediate means of contacting you when your child needs help. This time saving system can help expedite treatment which may mean the difference between life and death.

Many of the cell phone manufacturers have picked up on the idea and have hard coded ICE into your cell phone. When opening your contact list, if the first item to come up states “In Case of an Emergency,” simply click there and then enter in the information as requested. iPhones have a lock preventing access into your cell phone. There are free and paid apps you can use to add your ICE contacts on your wallpaper.

In spite of recent false information regarding a virus being downloaded to your phone if the ICE contact was detected, the Los Angeles Fire Department has dismissed this rumor as a hoax and maintains that the use of an ICE contact is a completely safe process and in fact may help you save someone’s life!

Lastly, you can even program more than one number such as ICE1, ICE2 or ICE3. Make sure the person or persons you are using can make medical decisions on your behalf and can give details about your medical background. If a child, the ICE number must or should be a parent or guardian.

The use of an ICE contact is a great idea - store it in your cell phone then share the idea with your family and friends.

12 REASONS TO GO TO THE EMERGENCY ROOM

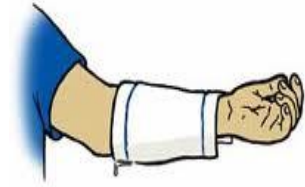
Accidents and injuries can occur at any time. Sometimes it may be difficult to determine if a situation is serious enough for immediate medical attention. Though this is not an all-inclusive list, here are a few general guidelines to help you decide if you should make a trip to the ER:

1. Loss of consciousness, however brief
2. Signs of a Heart Attack - such as difficulty breathing, chest pressure, numbness in the arm and profuse sweating
3. Signs of a Stroke – Unable to smile on both sides of face, difficulty raising either arm, slurred speech
4. Shortness of breath or any breathing difficulty
5. Bleeding that doesn't stop after 10 minutes
6. Poisoning
7. Insect bite or sting where breathing becomes difficult or worsens
8. Major injury, such as a head trauma, or a dislocation, or if bone is showing
9. Coughing up blood
10. Persistent or severe vomiting
11. Suicidal feelings
12. Unexplained disorientation or drowsiness

In general, if you are questioning whether or not to go to the Emergency Room, it would be best to default on the side of safety and seek immediate medical attention.

CHAPTER 2: Treat Bleeding

CUTS



Have you ever cut your finger before? Of course you have. What did you do? You probably grabbed the injured finger and squeezed it. And guess what? That's just the right thing to do! Bleeding (even serious bleeding) is simply treated by putting direct finger-tip pressure right over the wound. Even more serious bleeding, such as arterial bleeding (that's when you see "squirting" blood), can be controlled with direct pressure.

Clean all small cuts and wounds with plain soap and water and apply a bandage to protect the wound from contamination. Deep or large cuts (longer than an inch long) or cuts on a joint, or jagged wounds where the ends will not mend easily, or any wounds to the face and genitals will always need medical attention and most likely stitches.

NOSE BLEEDS

Even nose bleeds can be controlled with "direct pressure." If you, or your child, have a nose bleed: sit down, lean forward slightly, and pinch the "squishy" part of your nose. Hold the pressure for a few minutes, or until the bleeding stops. Don't blow your nose afterwards, and don't put Kleenex or other objects into the nostrils.

The sight of blood can be very disturbing for young people. A little bit of blood can look like a lot, especially if it gets mixed with other fluids (water, vomit, etc.), but the fact is that bleeding is quite easily controlled using the methods we talked about above.

Seek medical care immediately if the nose bleed lasts for more than 20 minutes or follows an accident, such as from a fall or an injury to the head, including a punch to the face that may have broken the nose.



FOR FREQUENT NOSEBLEEDS:

Try coating the inside of the nostrils with Vaseline. Do this several times a day. Many kids experience ongoing nosebleeds due the drying of the air during the summer and winter months. As the child inhales, the Vaseline is slowly drawn into the nose keeping the nasal passages moist and helps reduce the number of nosebleeds.

If you or your child experience frequent nosebleeds, make an appointment to see your doctor. You may need to have the blood vessel that's causing your problem cauterized. Cautery is a technique in which the blood vessel is burned with an electric current, silver nitrate, or a laser.

Also call your doctor if you're experiencing nasal bleeding and are taking a blood thinner, such as aspirin or warfarin (Coumadin). Your doctor may advise adjusting your dosage.

Don't let the sight of blood distract you from what's really important, however, such as, is the victim *breathing*? If not, you'll want to forget about the bleeding for the time being and call for help. Then return to the victim and help them with more important things, like CPR.

If you don't know how to perform CPR, sign up for a class and bring your family and friends. It's easy and you'll have a great time learning how to do something so important. And who knows? You just might end up saving the life of someone you know and love!

TOURNIQUETS

Sometimes on TV we see people controlling bleeding on the arms or legs by tying a tight belt or scarf around the limb. The belt or scarf used in this way is called a "tourniquet." Using one is *very* dangerous, so never use a tourniquet **when emergency help is available**. If you are isolated from help and bleeding cannot be controlled using direct pressure, it may become necessary to use a tourniquet. Tying a tight tourniquet around a limb will cut off the supply of blood to the wound. However, it will also cut off the supply of oxygen to the limb. The limb, like any other living thing, requires oxygen to survive, so understand that using a tourniquet may kill the limb and it may need to be amputated once medical care is received.

So before applying a tourniquet to yourself or someone else (when help is not available), ask yourself this question: “If this bleeding is not controlled, will the victim die?” If the answer is “yes,” then use the tourniquet. If the choice becomes “lose the life or lose the limb,” do what is necessary to stop the bleeding and save the victim’s life. But as stated before, direct pressure is very effective at stopping even serious bleeding, so it will be quite unlikely that you will ever be faced with the choice of whether or not to use a tourniquet.

CHAPTER 3: Poisonings

ARE YOU POISONING YOUR CHILD?

Poison Control warns all consumers that lead can still be found in a variety of products available to children. Lead poisoning is a serious health and safety issue for children. Lead poisoning can lead to learning disabilities, anemia, growth problems, attention deficits, and aggressive behavioral issues.

You may be surprised by the different types of lead surfaces you may currently have in your home. To help prevent lead poisoning in children, have them wash their hands, and the toys they play with, frequently. A great way to check the safety of your child’s toys or the surfaces your child may come in contact with is to purchase a Consumer Lead Testing Kit, which can be found at most hardware stores.

To create a safe environment for your child, here are 10 lead-poisoning prevention tips:

1. Do not allow children to chew painted surfaces on toys.
2. Report chipped or cracked paint to the landlord in homes built before 1978.
3. Use duct tape to cover peeling or chipping paint surfaces.
4. Have your doctor test your child for lead even if they seem healthy.
5. Jewelry from Mexico (such as watches, bracelets, and religious items) as well as food containers and dishware have been found to contain lead.
6. Car and house keys contain a small amount of lead. Do not allow babies to chew on them.
7. Mexican candies that contain chili or tamarind have been found to contain lead.
8. Run the water faucet for several minutes before using for infant formula preparation. Better yet, use bottled water.
9. Avoid consuming canned foods from outside of the United States.

Home First Aid guide

10. Many imported folk or home remedies contain lead such as: Pay-loo-ah, Azarcon, Maria Luisa, Liga, Alazron, Greta, Coral, Rueda, Ghasard, Bali Goli, Kandu, farouk and bint al zahab.

As the Poison Center Control jingle says.

*Poison is the kind of thing you're not supposed to touch
Old prescriptions, cleaning stuff, or spider bites and such
If you swallowed something bad, or think you took too much
Call the Poison Control Center Hotline. We're the people you can trust.*

US Poison Control Hotline Number: **1-800-222-1222**. For more information about poisonings, visit the Poison Control website at www.poison.org.

POISONING

Almost anything can become a poison if misused - aspirin, baby vitamins, and even certain spices. For example, too much salt could be deadly for a young baby. Many poisonings are easily prevented by teaching your children about poisons, locking toxic materials in high cabinets, keeping products in their original containers, etc. Some household products come in bottles or jars that look like food items and could be confusing to small children as well as adults.

If you or a loved one swallows
1-800-222-1222 (if you're in
transfer you to a regional



poison, call the **National Poison Help Hotline** at
the United States) and they will immediately
poison control center for help.

Try to give them as much
victim ingested, about how
not induce vomiting, but if the victim does vomit, save it, along with any bottles or containers to give to
EMS (Paramedics). Do not give them anything to eat or drink and do not attempt *any* type of treatment
without the express advice the of poison control center.

If the poisoned victim is unconscious or becomes unconscious, call 911 immediately.

BEE STINGS

Bee stings are common and easily treated, however, some people may be very allergic to bee stings and find themselves in a life-threatening situation after being stung.

Here's how you can help. Check the sting and see if the bee's stinger is still in the skin. If so, gently scrape the stinger away with the edge of a dull butter knife or the side of a credit card. A sac of venom may be attached to the stinger, so don't pinch the stinger as this may squeeze more venom into the skin.

Minor bites and stings may turn red and have some pain and itching, but this is normal. You can wash the site with soap and water, remove jewelry in case of swelling, and apply an ice pack. Some people may have a severe allergic reaction which could affect their breathing and blood pressure, so monitor the bee sting victim for about 30 minutes after the sting to assess their ability to breathe properly.

Individuals who know that they are allergic to certain insects or foods or other items may carry an "epi pen" with them in case of an emergency. The epi pen contains a shot of epinephrine and is prescribed for them by their physician. You should use the epi pen only on the person it was prescribed for.

Assisting a person with their injection can help reverse the bad reaction and could even save their life.

Always call 911 if the person exhibits any signs of breathing difficulty, or any time the epi pen was used.

CHAPTER 4: Treating Burns

BURNS

Minor burns are a common household injury, and very easy to treat. If there are no open wounds, simply cool the burn with tap water. Use cool water, of course, and continue to cool until the pain stops.

There will be no need to use ointments, butter, lard, toothpaste, eggs, tomatoes, potatoes, or other home remedies. Doing so may trap the heat and cause the pain to last longer, and in some cases cause even more problems. If necessary, a clean, dry dressing may



be used to cover the burn. Don't break any blisters that may form. The blister will help protect the burn and will break on its own.

Burns are considered serious when they cover a large area of the body, face, hands or feet, and/or have open wounds and tissue damage. These types of burns require emergency care, so call 911 immediately. DO NOT put water or anything else into an open burn. If clothing is stuck in the burned skin, do not pull it away, otherwise it's OK to cut clothing away from the affected area.

If possible, also remove jewelry from the burn area. You can put a clean, dry dressing in between burned fingers or toes to keep them from sticking to each other and then wrap with a loose dressing. And while you're waiting for help, be sure to monitor the victim's breathing in case smoke inhalation is compromising their airway.

CHAPTER 5: Broken Teeth

INJURED TEETH

If you or your child got a tooth knocked out, what would you do? Fortunately, teeth are strong and resilient so if you get to a dentist as fast as you can (ideally within the first 30 minutes) the tooth may be able to reattach just like new! Here's what to do:

Stop any bleeding in the mouth by biting down gently on a piece of rolled up tissue or a cotton ball.

Handle the tooth carefully, by the crown (the part you would normally see,) and don't touch the root! If the tooth is dirty, rinse it gently with water and if possible, place it back into the socket and continue to bite down on that cotton ball.



If the victim is a young child and you're afraid he/she might swallow the tooth if you put it back in the socket, take the tooth and place it in a cup with the child's own spit, milk, or a sports drink (these liquids provide a protective environment for the tooth). Take the tooth with you and get the child to a dentist as soon as possible. Many teeth will be able to reattach!

There is no need to reattach baby teeth. If these are knocked out, be sure to control any bleeding and then place the tooth under the child's pillow for the tooth fairy!

CHAPTER 6: Brain Injuries

SEIZURES

Watching someone have a seizure can be very scary, but fortunately, it's easy to help them and in most cases, they will be just fine following the seizure. If you see someone having a seizure, don't restrain them in any way and move furniture and other objects out of their way so they don't injure themselves.

It's OK to place your hands, or a soft towel under their head to protect them if their head is banging on the floor. The person might even stop breathing for a short while during the seizure, but don't panic. Let the seizure run its course and then check the victim to be sure they're breathing properly and that everything seems to be OK.

There is no need to put anything in the victim's mouth to prevent them from "swallowing their tongue." They can't swallow their tongue and forcing objects into their mouths might injure them or break teeth, or you might find yourself missing a finger!

If there are any problems following the seizure, or the seizure is due to a blow to the head, poisoning or high fever you will need to activate your emergency response system (Call 911) and care for the victim until help arrives.

If the seizure patient is known to be epileptic and is breathing properly and uninjured, it may not be necessary to call for help. If you have a family member who is a seizure patient, their doctor may give you more specific information for caring for and handling your loved one during a seizure. If it differs from the information presented here, always follow doctor's orders.

FEBRILE SEIZURES

Newborns to the age of three may sometime experience febrile seizures which are usually associated with a high fever. Though scary to watch, especially if it's your child, febrile seizures are not likely to be an indication that your child is epileptic. Most children will outgrow these types of seizures by the age of three. Always treat all seizures seriously and seek medical attention.

STROKES



A stroke occurs when there is a blockage or a rupture in a blood vessel serving the brain. That part of the brain begins to die and depending on where in the brain the blockage occurs will determine the types of signs you may observe. There's been a lot of information about how to identify a stroke on the internet lately. It's great advice and in this case it's actually accurate.

Let's review the signs of a stroke:

- The affected person smiles, but only one side of their mouth curves up.
- They speak but suddenly say something that doesn't make sense, (*"my name is door."*) or their speech is slurred.
- You ask them to hold both arms out in front of them and they can't seem to hold one arm up with the other one.

Other signs may include:

- numbness or weakness on one side of the face or body (they may not be able to use their arm or leg on one side of their body)
- confusion
- vision problems (dizziness, blurred vision)
- they may get very red and then turn very pale
- and *"the worst headache I've ever had."*

If you think a stroke may be occurring, call 911 and stay with the victim. Be sure to keep an eye on their airway and breathing. If there is weakness or paralysis on one side of the body, lay the person on the floor and roll them onto their affected side. This will give them the use of their good side, but will aid in keeping saliva draining out of their mouth so that their airway will remain open and unobstructed.

People who have suffered a stroke and may be unable to communicate through speaking will likely be able to understand *you*. So it's important to watch what you (and other bystanders) may say.

Comments such as *"Is he dying?? – Oh my gosh, is she going to be OK?? – Oh, he looks terrible!!"* will not help anyone, least of all the stroke victim.

Since the victim is likely to be terrified, it would be helpful to establish some sort of easy, non-verbal communication with them so they won't feel so isolated. Using their good hand, you can have them squeeze your hand **once for yes, twice for no**, for example. You might ask them, using this method, if they would like you to call a relative for them. They may be very grateful and relieved to receive help like that.

Home First Aid guide

Though a stroke is frightening for all involved, the good news is that if you recognize the signs and symptoms and act quickly, you may be able to prevent permanent brain damage from occurring. The emergency team can administer drugs that may break up the clot in the brain thereby preventing the stroke or at least minimizing the damage – so make that call!

NEVER give aspirin to a stroke victim. If the stroke is due to a aneurism or bleeding of a blood vessel in the brain, thinning the blood with aspirin may make the situation much worse.

BLOWS TO THE HEAD

Any time there is an injury to the head, always consider a possible injury to the neck or back. Check for pain or tenderness in those areas. The victim complains of any pain, immobilize and call 911. If the victim does not complain of pain in the neck or back, then check for these additional signs:

- Reduced level of responsiveness
- Obvious deformities of the scalp
- Bruising around the eyes
- Blood or clear fluid coming from the ears or nose
- Nausea
- Vomiting
- Combative behavior



If the victim shows any of these signs, call 911 immediately and have them checked by a physician as soon as possible.

Control any bleeding with direct pressure, as discussed earlier. However, if there is any blood or clear fluid coming from the ears or nose, let this type of bleeding continue to flow. This is the body's way of protecting the brain by letting off pressure that may be building in the head. Stopping the blood flow from this type of injury may cause the fluid to build up pressure and possibly injure or rupture the eardrum or worse. Continue to monitor the responsiveness level and provide additional care if needed.

CONCUSSIONS

Any blow to the head must be taken seriously. Sadly, the actress, Natasha Ricardson, died after receiving what seemed to be a minor blow to the head. Concussions are basically a bruising of the brain and can have several degrees of seriousness. Some can be as simple as the victim experiencing some mild confusion. More serious concussions may cause extended loss of consciousness with memory loss and coordination problems. In most cases, concussions will heal over time and do not cause long term or permanent damage, although repeated concussions can have a cumulative effect, which may cause permanent or longer term neurological problems.

Children will bump their heads many times as they're growing-up. Taking them to the hospital each time would be expensive and unnecessary. If your child (or an adult) receives a blow to the head, do a quick and easy examination. If any of the following signs are observed, call 911 immediately and keep the patient still and calm as you wait for help.

After receiving a blow to the head:

- The victim loses consciousness, even if it's very brief
- The victim experiences confusion
- Nausea or vomiting
- Blurred vision
- Memory loss
- A headache which seems to be getting worse
- Repeating the same thing (i.e., asking what happened over and over, even though you've already explained)
- Unequal pupil size
- The victim's eyes are unable to follow your finger (or they are skipping), as you move it back and forth in front of their face
- Complaining of neck or back pain

If they don't experience any of these symptoms, some ice on the bump can help control swelling. The use of acetaminophen (Tylenol) or ibuprofen (Motrin, Aleve) can help with any discomfort. When in doubt, always play it safe and have the individual seen by a physician.

CHAPTER 7: Relieve Choking

CHOKING

It's the holiday season now and let's face it, at almost every get together or family and friend function there is food. From young to old we all enjoy being around one another and partaking in holiday festivities. Among all the hustle and bustle of this busy time we all need to be aware on a few fundamental techniques in case of an emergency in the household. The one I'm going to cover in this issue is choking. From young to old there are many things that a person can choke on. When dealing with adults the most common thing you'll find them choking on is food.

Symptoms that an adult is choking:

- One or both hands brought up to clasp their neck.
- Motions from them alluding to the fact that they are choking.
- Panicked look on their face.
- Gasping for air and not getting any or a high pitch wheezing sound.



What to do if an adult is choking:

Call 911 immediately.

- Ask the person, "Are you choking?"
- After receiving confirmation say, "I know how to help. Can I help you?"
- Once the person gives you permission, stand behind them and place your foot in between their legs to help support them.
- Locate the person's belly button by cupping your hands and slide them down their sides of the victim until you reach their hipbone. Walking your finger to the front and their belly button should be right there.
- Make a fist with your dominant hand and place the flat part of your fist (made up of your thumb and pointer finger) directly above their belly button.
- Take your other hand and clasp it over your fist pulling them firmly against your front.
- At this time you will perform five separate and distinct abdominal thrusts into their stomach in a "J" pattern. In and then up in a firm, smooth movement.
- Continue the thrusts until the object is cleared or they become unconscious.
- If they become unconscious, immediately begin CPR.

Choking is a common but serious condition. Prompt and efficient care is the best way to help a coking victim. To help ensure you don't choke, make sure to take small bites when eating. Don't try to talk and eat and the same time. Breathing in air with food in your mouth is the easiest way to choke. Being aware of these precautions is the perfect preventative solution. Have a happy holiday!