

1. What to do SAFETY

First aid is the temporary and immediate care given until trained help arrives. If a medical emergency occurs and the person is conscious, ask “What’s wrong, where does it hurt?” If the person is not moving , determine if they are conscious by tapping them on the shoulder and asking “Are you okay”? If there is no response, look for a **Medic Alert Tag** (bracelet, watch, necklace).

If the person is unconscious: Check for the SCAB's:

- **Safety**
- **Circulation**
- **Airway**
- **Breathing**

CALL for Emergency Medical Services when you see **CALL EMS** at the top right corner of any card.

2. What to do SAFETY (continued) *CALL EMS 04 708881-3*

Never give an unconscious person **anything by mouth**.

Do not move an injured person unless situation is life-threatening. You may cause further damage by moving, especially in neck and spinal injuries.

Please note: If a situation arises where you are giving first aid to **strangers**, adults may refuse first aid (you have implied consent if they are unconscious) for themselves or for children or the mentally impaired for whom they are guardians. With the risks of infectious diseases, precautions are always a good idea with any victim. Use rubber gloves and a mask whenever possible. After administering first aid, wash your hands and other exposed skin surfaces thoroughly with soap.

For this guide an **infant** is less than a year old, a **child** is 1 - 12 years old, and an **adult** is over 12 years old.

2. WHAT TO DO (cont.)

3. CPR: UNRESPONSIVE ADULT

3. CPR: Unresponsive Adult

CALL EMS 04 708881-3

- 1** Establish that the person is unresponsive.
- 2** **Call EMS immediately.**
- 3** Open airway with the head tilt - chin lift maneuver
- 4** Look, listen, and feel for breathing.
- 5** Begin chest compressors,

- Position one hand on centre of breastbone right between the nipples.
- Position second hand on top of first,
- Compress chest $\frac{1}{3}$ to $\frac{1}{2}$ the depth of the chest. (continue on next card)

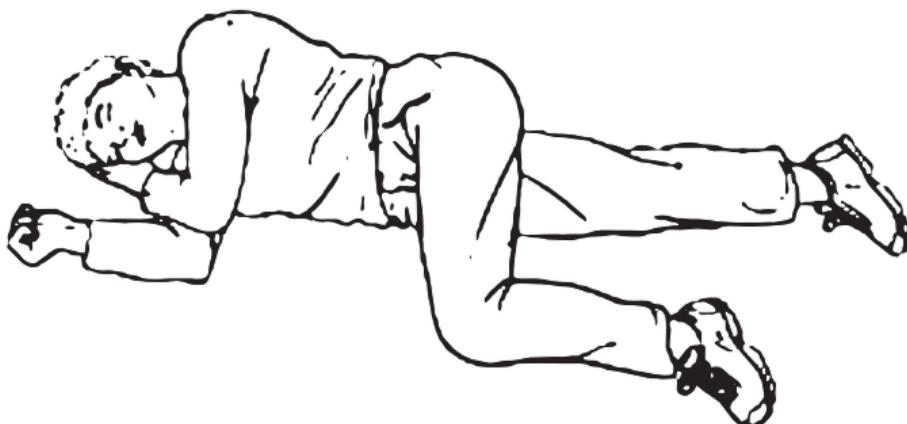


3. CPR: UNRESPONSIVE ADULT

4. CONT.

4. CPR: Unresponsive Adult (cont.) CALL EMS 04 708881-3

- Do **100 compressions per minute**
- 6** If signs of circulation are present, but person is not breathing give **1 slow breath every 5 seconds.**
 - 7** Once breathing and circulation have returned, place person on their side in the recovery position.



5. CPR: Unresponsive Child

CALL EMS 04 708881-3

- 1** Determine unresponsiveness.
- 2** Open airway using the head tilt - chin lift method.
- 3** Look, listen, and feel for breathing.
 - If breathing, position on side in recovery position. Call **EMS**.
- 4** Check for signs of circulation (normal breathing, coughing, or movement.) **THIS SHOULD TAKE NO MORE THAN 10 SECONDS!**
- 5** If no signs of circulation, begin compressions.
 - Position the heel of one hand in the centre of the breastbone between the nipples.

(continued on next card)



5. CPR: UNRESPONSIVE CHILD

6. CONT.

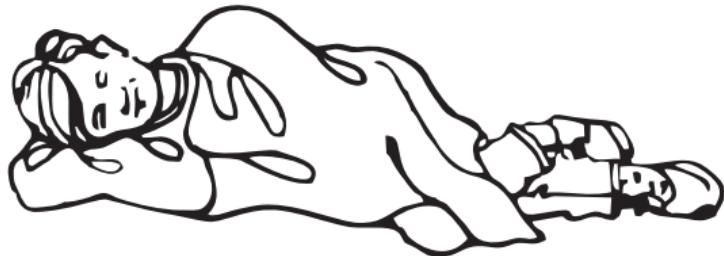
6. CPR: Unresponsive Child (cont.) CALL EMS 04 708881-3

- Compress the chest approximately 1/3 to 1/2 the depth of the chest.

6. After 1 minute of 100 compressions per minute **call EMS.**

Recheck for breathing and signs of circulation.

- If no breathing or signs of circulation continue CPR cycle
- If signs of circulation are present, but no breathing give 1 slow breath every 3 seconds.
- If signs of breathing and circulation are present, place child on side in recovery position.

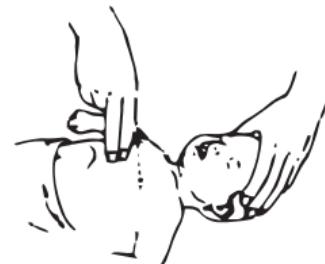


7. CPR: Unresponsive Infant

CALL EMS 04 708881-3

- 1** Determine unresponsiveness. (**Do not shake an infant**).
- 2** Open the airway so the head is in a neutral position using the head tilt - chin lift maneuver.
- 3** Look, listen, and feel for breathing.
 - If no breathing, give **2 slow breaths**. (should be no more than is in an adult cheek).
 - If breathing, keep airway open with head in neutral position, Call **EMS**.
- 4** Check for signs of circulation (normal breathing, coughing, or movement in response to the 2 breaths). **THIS SHOULD TAKE NO MORE THAN 10 SECONDS!**
- 5** If no signs of circulation, begin chest compressions.

(continued on next card)



7. CPR: UNRESPONSIVE INFANT

8. CONT.

8. CPR: Unresponsive Infant (cont.) CALL EMS 04 708881-3

- Use 2 fingers to compress in the center of the breastbone 1 finger's breadth below the nipple line.
- Compress the sternum 1/3 to 1/2 the depth of the chest.
Do **100 compressions per minute.**

6. After 1 minute of 100 compressions call EMS

Recheck for breathing and signs of circulation:

- If no breathing or signs of circulation, continue CPR cycle
- If signs of circulation are present, but breathing is absent, give 1 rescue breath every 3 seconds.
- If signs of breathing and circulation are present, keep infant's airway open with head in neutral position.

9. Airway

CALL EMS 04 708881-3

Make sure an unconscious person's **airway** is open. There are two ways of opening a person's airway: 1. the **modified jaw-thrust** and 2. the **head-tilt/chin lift**.

How to do **modified jaw-thrust** ?

- 1 Kneel behind the person facing the top of the person's head.
- 2 Grasp the jawbone on both sides where it angles up towards the ears.
- 3 Move the jaw forward and upward.
- 4 Pull the lower lip back with your thumb if the lips close.
(continued on next card)

Important - Use modified jaw-thrust if **neck or spine** injury is suspected.



10. Airway (continued)

CALL EMS 04 708881-3

How to do **Head-tilt/chin lift**?

- 1** Kneel at the person's shoulders.
- 2** Place palm of one hand on person's forehead.
- 3** Place first 2 fingers of the other hand under the bony part of the chin.
- 4** To open the airway, lift the chin in an upward manner and tilt (gently) the head backward.



10. Airway (cont.)

11. BREATHING

11. Breathing

CALL EMS 04 708881-3

After doing the **head-tilt/chin lift** or **modified jaw-thrust** place your head down, close to the person's mouth and **look, listen, and feel** for **breathing** - while maintaining open airway.

Look to see if the person's chest is rising and falling, listen for breathing, and feel for air escaping from the person's mouth.

This process should take only 3 - 5 seconds. If not breathing, do the following: While keeping the airway open, pinch the nose shut, make a tight seal over the person's mouth with yours and give **2 slow (over 2 seconds) breathes**. For an infant or small child, cover the nose and mouth with your mouth and give **2 small (between 1 - 1-1/2 seconds) breaths**.

(continued on next card)



12. Breathing (continued)

CALL EMS 04 708881-3



Adult/Large Child

1. Pinch nose
2. Place your mouth over person's mouth



Infant/Small Child

1. Cover nose and mouth with your mouth.



Stoma/Neck Opening

1. Cover stoma with piece of cloth,
2. Keep person's mouth closed
3. Place your mouth over the stoma.

Breathe in enough air to make the chest rise. If no air goes in, **re-open airway** and attempt to breathe again. If air goes in, give **2 breaths**; if air still does not go in, the person probably has a **blocked airway**.

12. BREATHING (cont.)

13. CHOKING - ADULT

13. Choking - Adult

CALL EMS 04 708881-3

- 1 Ask “Are you choking”? If person nods yes, ask, “Can you speak ?” If person shakes head no or can’t make any sound, proceed.
- 2 Give abdominal thrusts (**Heimlich maneuver**) using the fist of one hand pointing inward just above the navel and thrust inward and upward toward the person’s head.
- 3 Repeat thrusts until the object is expelled or the person becomes unresponsive.

If **adult** becomes **unresponsive**:

- **Call EMS**
- Follow CPR-Unresponsive Adult guidelines. Every time you open the airway, look for the foreign object; if you see it, remove it.



14. Choking - Child

CALL EMS 04 708881-3

- 1** Ask "Are you choking"? If child nods yes, ask, "Can you speak ?" If child shakes head no or can't make any sound, proceed.
- 2** Give abdominal thrusts (**Heimlich maneuver**) by placing the fist of one hand pointing inward just above the navel and placing the other hand over the fist to guide it. Position yourself at the level of the child and thrust inward and upward toward the child's head.
- 3** Repeat thrusts until the object is expelled or the child becomes unresponsive.

(continued on next card)



14. CHOKING - CHILD

15. CHOKING - CHILD (cont.)

15. Choking - Child (cont.)

CALL EMS 04 708881-3

If **child** becomes **unresponsive**

- If two rescuers available, have one follow CPR-Unresponsive Child guidelines while other rescuer **calls EMS**

CPR - Unresponsive Child guidelines: every time you open the airway, look for the foreign object; if you see it, remove it. If you do not see an object, **do not finger sweep** the child's mouth.

- If only one rescuer available, follow CPR-Unresponsive Child guidelines for 1 minute. If child remains unresponsive, **call EMS**.



16. Choking - Infant

CALL EMS 04 708881-3

- 1** Confirm complete airway obstruction.
Check for serious breathing difficulty, ineffective cough, and weak or absent cry.
- 2** Support infant by cradling jaw in hand and body over forearm. Brace your forearm against your knee.
- 3** Give **5 back blows**, sandwich infant in arms and turn over; while supporting infant, give **5 chest thrusts** with 2 fingers in centre of breastbone 1 finger's breadth below nipple line. Thrust approximately 1/3 or 1/2 the depth of the chest,
(continued on next card)



16. CHOKING - INFANT

17. CHOKING - INFANT (cont.)

17. Choking - Infant (cont.)

CALL EMS 04 708881-3

- 4. Repeat** back blows and chest thrusts until object is expelled or infant becomes unresponsive.

If **infant** becomes **unresponsive**:

- If two rescuers available, have one follow CPR - Unresponsive Infant guidelines while the other rescuer **calls EMS**

CPR - Unresponsive Infant guidelines:

Every time you open the airway, look for the foreign object; if you see it, remove it. If you do not see an object, **do not finger sweep** the infant's mouth.

- If only one rescuer available, follow CPR-Unresponsive Infant guidelines for 1 minute. If infant remains unresponsive, **call EMS**.



18. Bleeding

If someone is **bleeding**, you need to stop the bleeding and bandage the wound. Whenever possible **1.** Wash your hands with soap and water and wear rubber gloves. **2.** Prepare a clean place to administer first aid. **3.** Keep hands and first aid materials as clean as possible. These precautions will reduce chance of infection. If there is large amounts of blood loss, and/or it is a serious wound, **get emergency medical help.**

Things around the home that can be used to control bleeding (if sterile pads are not available) are clean wash cloths, towels, diapers, even sanitary napkins. All these things can be used as pressure dressings.

Besides adhesive tape, other things to use to tie (only tight enough to keep dressing in place) the dressing to the wound could be neck ties, stocking, pillow cases, or strips of clothing.

18. BLEEDING

19. BLEEDING CONT.

19. Bleeding (cont.)

CALL EMS 04 708881-3

The most common way to stop bleeding is by **direct pressure**

This is done by applying a pressure dressing directly over the wound and applying pressure. Once the bleeding has stopped, secure the dressing to the wound.

The dressing should not be too tight because you don't want to cut circulation.

If the wound is on the arm or leg, and if **direct pressure** alone doesn't stop the bleeding, use **elevation**.

To **elevate**, raise the limb above the heart, then continue bandaging. This will slow the bleeding and also relieve some of the pain. If the dressing becomes saturated with blood, do not remove it; apply additional dressings on top.



20. Bleeding (continued)

CALL EMS 04 708881-3

If **direct pressure** and **elevation** does not stop the bleeding, you will need to use a **pressure point** (any point where you feel a pulse) at a place between the wound and the body.

Hands: There is a **pressure point** on inner side of wrist.

Arms: There is a **pressure point** located inside each upper arm, between the elbow and shoulder. What you will be doing here is pressing the artery (brachial) against the bone.

Legs: Another **pressure point** is located in the groin area, where each leg meets the torso. The idea is to press the artery (femoral)



20. BLEEDING (cont.)

21. BLEEDING CONT.

21. Bleeding (cont.)

CALL EMS 04 708881-3

against the bone until the bleeding stops. When you release pressure, release it slowly and look at the dressing. If it fills with blood, repeat the process.

Surface Bruises - Signs/Symptoms include: discoloration caused by bleeding in tissue near surface of skin, swelling, and pain. Treatment: Put very cold, wet cloths over injured area. Apply manual pressure and elevate to stop bleeding, relieve pain, and reduce swelling.

Serious internal bleeding can involve internal organs. Signs/Symptoms are large bruises; severe, intense pain; pale, cold, clammy skin; dilated pupils; weak, rapid irregular pulse rate; and swelling. Treatment: Keep person comfortable, warm and treat for **shock** if necessary. No food or drink should be given.

22. BLEEDING (continued)

Nosebleeds - Loosen clothing around neck area and have the person sit up with **head tilted forward**. Have person breathe through mouth. *If a fractured skull is a possibility, do not attempt to stop bleeding. To do so might put pressure on the brain.* Otherwise, if bleeding is in front part of nose, you can pinch nostrils together for ten minutes. Place cold, wet towels on nose. If bleeding persists for 20 - 30 minutes, or is from back of nose, **get emergency medical help.**



22. BLEEDING (cont.)

23. AED - ADULT

23. AED - Adult

CALL EMS 04 708881-3

- A.** Establish unresponsive.
- B. Call EMS.**
- C.** Get AED if available.
- D.** Open airway with head-tilt/chin lift method. **E.** Look, listen, and feel for breathing. If no breathing, give 2 slow rescue breaths, **F.** Check for signs of circulation, including: breathing, coughing, or movement. **G.** If no signs of circulation and AED not available, begin chest compressions. (See CPR - Adult)

Prior to using AED (Automatic External Defibrillator) you need to complete an approved training course.

If no signs of circulation and AED available:

- 1.** Turn on AED. **2.** Connect electrodes. **3.** Attach pads. One pad to left of breastbone below collarbone. One pad on right side 2-3 inches below armpit. **4.** Do not touch patient as AED is analyzing. If the AED has an analyze button, press to analyze; otherwise AED will automatically analyze.

(continued on next card)

24. AED - Adult (continued)

CALL EMS 04 708881-3

5. If AED voice prompt states a shock is indicated, **clear rescuers and bystanders from patient** and press SHOCK button. **6.** When AED voice prompt states no shock is indicated, recheck for breathing and signs of circulation. Follow CPR - Adult protocol. **7.** After 1 minute of CPR, push analyze button to reanalyze patient's rhythm.

Special Considerations:

1. Never place on child under 8 years old. **2.** Remove patient from water or metal surface. **3.** Remove any medication patches and wipe chest clean. **4.** Sweat or hair may affect adherence of pads. Shave area of chest where pads are to be placed or wipe chest with dry cloth if pads do not adhere. **5.** CHECK EXPIRATION DATE ON PADS. **6.** If patient has a pacemaker, place pads to side of pacemaker.

24. AED - ADULT (cont.)

25. HEART ATTACK/STROKE

25. Heart Attack/Stroke

CALL EMS 04 708881-3

Signs/symptoms of **Heart Attack**: chest pain that may extend to shoulders, arms, jaw - often described as uncomfortable pressure or “bad indigestion”; breathing difficulties; sweating; cool, pale skin; nausea/vomiting. However, person may **deny** they are having a heart attack.

Signs/symptoms of **Stroke**: red face; severe headache; dizziness; breathing problems; loss of bowel/bladder control; confusion; can't speak; weakness in arms, legs, or face - often progressing to paralysis. Aggressive medical treatment of stroke within 3 hours of onset of symptoms will greatly improve the person's chance of recovery.

Treatment: For both Heart Attack and Stroke, keep person comfortable and warm; loosen clothing. DO NOT give them anything to eat or drink. Place person in half-sitting position if possible Begin **rescue breathing** or **CPR** as required.

26. Burns - First, Second, and Third Degree

1st degree burns show a slight redness on the skin. Treatment can be given by using cool water. **2nd degree burns** usually blister and have a red appearance around the burn. Treatment: Immerse burn area in cool water and cover with cool compresses within 30 minutes of accident. Do not use ointments, salves, or anesthetics. **Call EMS.** Sunburns can be 1st degree, 2nd degree, or both. **3rd degree burns** show open blisters and are gray or charred around the burn area. A 3rd degree burn is less painful than a 2nd or 1st degree burn because nerve endings are burned off. The pain starts only after the healing begins. Treatment: Do not use ointments, salves or anesthetics. If a small burn - cool the burn with water, wrap with dry dressings, and bandage loosely. If large burn, use dry dressings and loose bandage only. In 3rd degree burns, treat for **shock** and monitor **breathing/signs of circulation.** **Call EMS.**

26. BURNS

27. CHEMICAL BURNS/INHALATION INJURIES

27. Chemical Burns/Inhalation Injuries **CALL EMS 04 708881-3**

Protect yourself from contamination. Wear protective equipment

- mask, cover gown, safety glasses, and rubber gloves. For

chemical burns, flush area with **large** amounts of water for

20 - 30 minutes. Remove any contaminated clothes, shoes,

jewelry etc. After flushing with water is completed, cover affected

area with a sterile dressing. Treat for **shock** if necessary. Make

chemical available for **EMS** to examine. Note: **NEVER** place

grease, oil, or butter on any type of burn. It will only make

wound and pain worse. **Inhalation injuries** can be caused by

smoke, heat, chemicals, and/or carbon monoxide. Signs/

symptoms: hoarse singed nasal hairs, smoky breath, facial

burns, headache, confusion. Treatment: Move person away

frpm exposure so they can breathe fresh air. Loosen or remove

clothing, not stuck to skin, to help breathing. Place person in

upright position, if possible. Monitor **airway** and **breathing**.

28. Shock

CALL EMS 04 708881-3

Signs/Symptoms of **shock** can be pale skin colour, breathing difficulty, moist clammy skin, higher pulse rate, or mental confusion. Restlessness and anxiety may be the first signs and symptoms you may see.

The treatment for shock is to maintain body temperature and keep the victim calm. Place a blanket over the person (and under the person in a cold environment), monitor **airway, breathing, signs of circulation**, and check for **bleeding**. You may raise the legs 8 to 12 inches to help the body's blood flow if you don't suspect a head, neck, back, or leg injury.

No food or drink should be given.



28. SHOCK

29. FRACTURES, SPRAINS, & STRAINS

29. Fractures, Sprains, and Strains CALL EMS 04 708881-3

The signs/symptoms of fractures, sprains, and strains are: swelling, deformity, discoloration, pain or possibly but not always inability to use affected part. You cannot tell if the person has a fracture, sprain or strain. Therefore treat it as a fracture.

There are two types of fractures: **Open** and **Closed**.

With an **Open fracture** the bone has broken through the skin, and bleeding is present. Do not try to clean the wound or push the bone ends back into the skin.

Treatment for Open and Closed Fractures: Do not move the person. Keep the person warm and still, treat for **shock** if necessary. Immobilize injured area by using a **splint**

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There are a variety of things that can be used for **splinting**. Boards, cardboard, magazines, pillows, and even rolled newspapers make very good splints.

To **splint a fracture**:

1. Place the splint above and below fracture so that the splint extends beyond the fracture site.
2. Tie the splint to the fracture, leaving the knot tied on the splint. If the fracture is on the arm, put the arm in a sling. If there is deformity in the fracture, pad the splint to fit the deformity.



31. Fractures (cont).

CALL EMS 04 708881-3

Broken back - Signs/symptoms: the person may experience pain, numbness, and/or inability to move legs, feet, or toes.

Broken neck - Signs/symptoms: person may have numbness around shoulders, inability to move fingers, or complete/partial paralysis of limb/limbs. There might be pain or unequal strength in hand grasps. Person may not be able to breathe. Perform **rescue breathing** if necessary.

Treatment: Person must be completely immobilized, **NEVER** move person to test for pain or extent of mobility. Keep person warm and still. If necessary, maintain airway by performing **modified jaw-thrust**. Keep the person lying flat on a firm surface. Place one of your hands on each side of the person's head and hold the head in a neutral position (not flexed, extended, or rotated). Hold this way until EMS arrives. **Never move the person unless they or you are in imminent danger.**

32. Fractures (continued)

CALL EMS 04 708881-3

Head injuries (including skull fractures) - Signs/symptoms:

bleeding from mouth, nose, ears; drowsiness; confusion; loss of balance; garbled speech; ringing in ears; bruises around eyes or behind ears; unconsciousness; nausea; vomiting; and severe headaches.

Treatment: Person should lie down and keep head as still as possible (assume neck injuries). If person is vomiting or bleeding from mouth, (keeping neck and head in line) turn person gently onto their side.

Wipe out mouth if necessary.
Maintain **airway** if necessary
by performing **modified jaw-thrust**.



32. FRACTURES (cont.)

33. POISONING

33. Poisoning

CALL EMS 04 708881-3

Swallowed Poisons (accidental or intentional) - Signs/
symptoms: Change in behaviour, nausea, vomiting, stomach pain, diarrhea, stains on clothing or around the mouth, chemical breath odor, unusually constricted or dilated pupils. Check for open containers or bottles.

Call EMS. While waiting for help, maintain person's **airway**. Read label of ingested material for treatment recommendations. However, because poisons act differently depending on the poison ingested. **DO NOT! induce vomiting unless told to do so by the Poison Control Center.** Have poison available for **EMS** to examine. If person's lips and skin are bright cherry red, poisoning may be a result of **poison gases**, including carbon monoxide.

(continued on next card)

34. Poisoning (continued)

CALL EMS 04 708881-3

Treatment: If possible (keep yourself and others safe from poison), move person to fresh air and loosen clothing.

Food poisoning (often occurs 8 hours after eating) -

Signs/Symptoms of food poisoning from **poisonous mushrooms** include dimmed vision and drunken behaviour.

Botulism (caused by contaminated canned food)

Signs/Symptoms include vision problems, drooping eyelids, slurred speech, breathing difficulties.

Salmonella (bacterial contamination) symptoms include nausea, chills, fever, stomach cramps, and diarrhea.

Treatment: **Call EMS** Monitor person for signs of **shock** or **breathing problems.**

34. POISONING (cont.)

35. OBJECT IN EYE

35. Object in Eye

Be **extremely** careful/gentle. Remove contact lenses if present.

Floating objects (may appear to be objects and actually be a scratch) in the eye which can be seen may be flushed from the eye with water. Flush from the nose outward so as to not get the object in the other eye. If object stays **under upper lid**, you can hold eyelashes of upper lid and gently pull forward and downward over lower lid, hoping the object sticks to lower lid. Remove with moistened sterile pad or cloth. If this didn't work, have person look upward and roll upper eyelid back over cotton-tipped applicator. Gently wipe off object with moistened sterile pad or cloth. If object is **under lower lid**, gently pull down lower lid and remove with moistened sterile pad or cloth.



Never attempt to remove objects **embedded** in the eye.

Treatment for these injuries consists of bandaging both eyes closed. If embedded object sticks out from eye socket, stabilize embedded object with soft bandage and place cone over object.

If eye has been **burned** by chemicals, acid, gas, alkali, etc.; flood face, eyelids, and eyes with cool water for at least 15 minutes. Lift eyelid away from eye so the inside of the eyelid is washed. Then wrap a bandage around both eyes and get emergency medical help immediately. Have chemical available for **EMS** to examine.

If person has a **black eye**, if there is swelling present, or person complains of blurred vision and/or flashing lights, apply cold compresses and get emergency medical help.

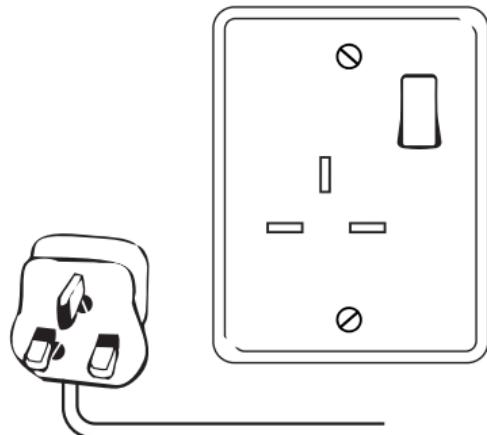
37. Electrocution

CALL EMS 04 708881-3

Electrocution is truly a life threatening emergency. Before you can help anyone who has been electrocuted, you must first shut off the power source. If you cannot reach the plug without putting yourself in danger go to the electrical panel and turn off the power source.

If the power cannot be turned off, contact the **utility company** and/or local **EMS**.

Treatment: Treat person according to injuries. The person may be in **shock**, be **unresponsive**, or have various degrees of **burns**.



38. Seizures

CALL EMS 04 708881-3

Signs/Symptoms muscle spasms, eyes may roll upward, face/lips turn blue, biting of tongue, may lose bladder and bowel control, and foaming at mouth. If they vomit, turn them on their side to let the fluid drain from their mouth.



DO NOT attempt to restrain the person and DO NOT put anything in their mouth. Protect the head from injury and remove any furniture or equipment that the person may injure themselves on.

After the seizure movements have stopped, be alert for **breathing problems**. Person suffering is often “sleepy” afterwards. Reassure person and allow them to rest.

38. SEIZURES

39. DIABETIC EMERGENCIES

39. Diabetic Emergencies

CALL EMS 04 708881-3

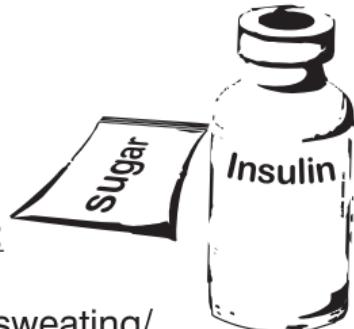
Check for Medic Alert Tag.

Hyperglycemia (**Diabetic Coma**) Signs/Symptoms: **1.** Dry mouths, thirsty; **2.** weak, rapid pulse; **3.** stomach pain/vomiting **4.** person acts confused; **5.** breathing problems; **6.** eyes appear sunken; **7.** breath smells sickly sweet; **8.** may become unconscious. Treatment: Maintain **airway** and check **breathing/signs of circulation.**

Hypoglycemia (**Insulin Shock**) Signs/Symptoms:

1. Headache/dizziness; **2.** hostile behaviour; **3.** fainting/seizures; **4.** rapid pulse; **5.** hunger; **6.** sweating/skin - cold, pale, and clammy; **7.** drooling. Treatment: Administer sugar under tongue - avoid giving liquid if unconscious.

Above conditions are often confused with intoxication. If not sure whether person is suffering from Diabetic Coma or Insulin Shock, treat for Insulin Shock. **More sugar** will not hurt if Diabetic Coma, but could save a life if Insulin Shock.



40. Fainting

Normally when a person faints they are only unconscious few a few seconds to a couple of minutes.

- If a person is **about to faint**, act quickly to prevent them from falling. Have them sit or lay down and place their head lower than their heart. DO NOT give them anything to drink.
- If the person **has fainted**, lay them on their side and elevate their feet 8 to 12 inches. Loosen the person's clothing and place a cool cloth on their forehead. If the person vomits, roll them on their side (if not previously done) to let the fluids drain from their mouth.

As the person revives, offer reassurances. Do not allow the person to stand up right away. Have them rise slowly.

Get emergency medical help if the person does not fully recover within 5 minutes, is elderly, or complains of illness

40. FAINTING

41. HEAT STROKE/EXHAUSTION

41. Heat Stroke/Heat Exhaustion

CALL EMS 04 708881-3

Heat Stroke - Signs/Symptoms: person's skin is hot, red and usually dry; headache; dizziness; dry mouth; pupils are very small; person's temperature exceeds 40°C. Heat Stroke is a life threatening emergency that requires immediate action. While waiting for emergency medical help, move the person to a cool place. Use fan and/or cool wet blankets to **cool body**. Place them in a bathtub of cool (not cold) water. Cold water may cause the person to go into shock. If the person is outside, hose them down with cool water.

Heat Exhaustion - Signs/Symptoms; cool, pale, moist skin; heavy sweating; wide pupils; headache; nausea; dizziness; rapid, shallow breathing; thirst; and vomiting.

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42. Heat Exhaustion (continued)

CALL EMS 04 708881-3

Treatment: get the person out of the heat and into a cool place. Have them lie down, loosen or remove clothing. Apply a **cool compress** to their forehead.

If they are conscious, give them cool water to drink every 15 minutes. If untreated, Heat Exhaustion can lead to Heat Stroke.

Heat cramps are muscular pains and spasms due to heavy exertion. They usually involve the abdominal muscles or legs. It is generally thought this condition is caused by loss of water and salt through sweating.

Treatment: get the person to a cool place. Have them drink cool, low glucose beverages (for example: water, Gatorade, juices). Avoid sugary drinks.

42. HEAT EXHAUSTION/CRAMPS

43. COLD EMERGEN.

43. Cold Emergencies (Hypothermia) CALL EMS 04 708881-3

This condition may be life threatening. **Hypothermia - Signs/Symptoms:** shivering, loss of coordination, skin cold to touch, loss of consciousness, slow or absence of breathing or heart beat.

Treatment for Hypothermia: get the person out of the cold into a warm place. Make sure all their clothing is dry. Warm the body SLOWLY. Give nothing to eat or drink unless the person is fully conscious.

Frotnip is a cooling of the body's skin tissues with the skin looking white. Affects tips of ears, nose, cheeks, fingers, and toes. Painless.

Treatment for Frostnip: use steady firm pressure on the cooled area with a warm body part, (for example: put fingers in your armpit, put toes against another person's abdomen). **Do not rub skin.**

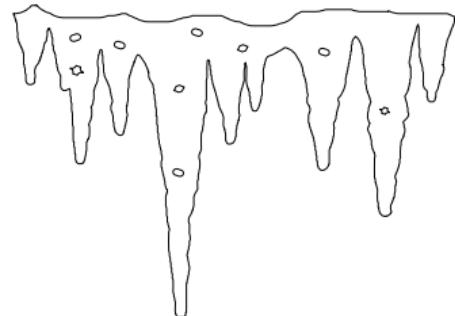
44. Frostbite

CALL EMS 04 708881-3

Frostbite is the freezing of body parts.

Signs/Symptoms of Frostbite:

Skin tissue is pale, cold, and solid, grayish patches may develop, person may develop pain, blisters.



Treatment for Frostbite:

1. Be very careful with injury as it will be very fragile.
2. DO NOT begin thawing if refreezing is a possibility.
3. Thaw rapidly by covering with clothes and blankets or immerse frozen part in warm (less than 40° C) water. Do not allow frozen part to touch bottom or sides of container.

44. FROSTBITE

45. INSECT BITES AND STINGS

45. Insect Bites and Stings

Ants, bed bugs, mosquitoes - Signs/Symptoms are redness and swelling around affected areas. Small welts may appear. Treatment: Wash with soap and cool water. Apply topical anesthetics. If swollen, cover with cold wet cloth.



Bees, hornets, wasps, yellow jackets -

Signs/Symptoms include pain, redness, swelling, burning, and itching. Treatment: Wash with soap and cold water. Apply ice pack to swollen area (Do not put ice directly on skin).

To **remove a stinger**, **1.** use the edge of a credit card or something similar and scrape it across the area where the stinger is until it comes out. **2.** If using tweezers be careful not to inject more venom from the stinger into the person.



(continued on next card)

46. Insect Bites and Stings (continued)

Once the stinger is removed, wash the area with soap and water. Cold compresses will lessen pain and reduce swelling

Insect bites can result in an **allergic reaction** for some people. Reaction to an insect bite or sting may be very rapid, or it could be delayed. Some **allergic reaction signs/symptoms** can be:

swelling around the affected area as well as swelling of the face, tongue, or throat; itching palms of hands and soles of feet; breathing difficulty; faintness; hives. If a person has any of these signs, **call EMS**.

*People with a history of severe allergic reaction to stings and bites may have a “**sting kit**”. 1. Keep affected area below heart. 2. If sting is on arm or leg, apply a constricting band above the sting site tight enough to stop blood flow through veins, but pulse below band should be present, 3. Remove stinger 4. Help administer contents of “**sting kit**”*

46. INSECT BITES (cont.)

47. ANIMAL/SNAKE BITES

47. Animal Bites/Snake Bites

CALL EMS 04 708881-3

Animal bites carry a high risk of infection. Signs/Symptoms are: redness, heat, swelling, pus around the wound site, red streaks in the skin around the wound and possible swollen glands closest to the wound. Treatment: wash the wound well with soap and water, and then cover the wound if the person is **bleeding**. Notify police if person has been bitten by unknown animal. The animal needs to be captured and tested for **rabies**.



Signs/Symptoms of **Snake bites** include: swelling, discoloration, pain, rapid pulse, blurred vision, nausea, vomiting, headache, pinpoint pupils, slurred speech, **shock**, **seizures**, and **unresponsiveness**. DO NOT give alcohol, sedatives, aspirin, or apply any form of cold therapy, including ice or sprays. Keep extremity lower than heart and wrap band 2-4" above fang marks. Band should be tight enough to stop blood flow through veins, but **pulse** below band should be present.

48. Fever

Fever is not always a cause for alarm, but can be a sign of infection.

Have the person wear lightweight clothing, drink plenty of fluids (like 7-up), and give non-aspirin fever reducing medication.

Sponge bathe person with tepid (not cold) water. Do not cover person with blankets even if they state they feel cold.

The following are guidelines as to **when you should call a doctor** for fever:

1. When a child is less than 3 months old.
2. When a child is less than 2 years old with a temperature of 38°C for more than 24 hrs.
3. When a temperature reaches 40°C Celsius or higher in any person.
4. When fever is accompanied by a seizure.



48. FEVER

49. DENTAL INJURIES

49. Dental Injuries

Knocked out Permanent Tooth: Find the tooth, handle it by the crown, not the root portion. You may rinse the tooth but do not clean or handle the tooth unnecessarily. Inspect the tooth for fractures. If the tooth is sound and the person is fully conscious and old enough to follow instructions, try to reinsert it. Have the person hold it in place by biting on a piece of gauze. If you cannot reinsert it or the tooth is fractured, transport it by placing it in a cup of milk.

The person must see a **dentist immediately.**
Time is a critical factor in saving the tooth.



Broken Tooth: Rinse the dirt from the injured area with warm water. Place cold compresses over the face in the area of the injury. Locate and save any broken tooth fragments.

Immediate dental attention is necessary

50. *EMERGENCY CALL NUMBERS*

NET ONE - 114

ECONET - 112

MICHAEL GELFAND CLINIC - 251067

PHARMACY - 762940

POLICE - 999 / 995

FIRE - 999 / 993

ER24 AMBULANCE SERVICE - 0777969111 - 04 708881/3

EMRAS - 250011 - 250012

BRIGHTSTAR - 795051

ER24 ROOMS - 762937

ST. ANNES - 339832 - 6

AVENUES CLINIC - 251140 - 251144