

Physical Education and Health

Learner's Material

Health

Unit 3: Unintentional Injury Prevention, Safety, and First Aid

This instructional material was collaboratively developed and reviewed by educators from public and private schools, colleges, and/or universities. We encourage teachers and other education stakeholders to email their feedback, comments, and recommendations to the Department of Education at action@deped.gov.ph.

We value your feedback and recommendations.

Physical Education and Health – Grade 9

Learner's Material

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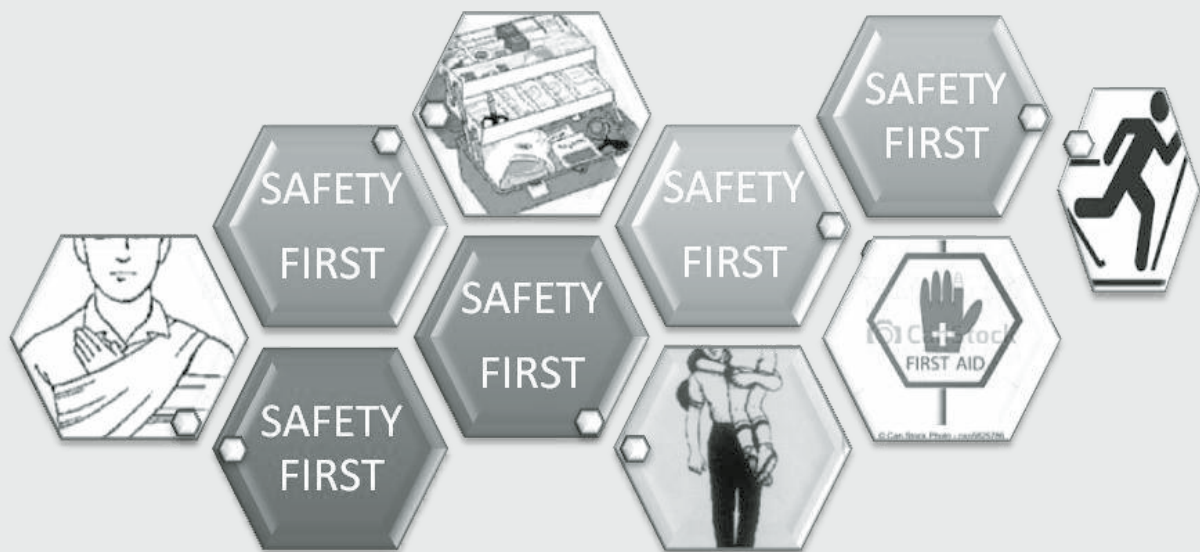
HEALTH

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Unintentional Injury, Prevention, Safety and First Aid



UNIT 2

UNINTENTIONAL INJURY PREVENTION, SAFETY AND FIRST AID

INTRODUCTION

“Prevention is better than cure.” Practicing this principle advocates safety awareness which is essential in achieving quality of life. But our immediate environment poses danger to everyone. No place is considered safe not even in the comfort of our homes. Accidents may happen to anybody at any place, at anytime. Thus, taking the right safety measures greatly helps prevent accidents and injuries. Nevertheless, when accidents happen, it is important to have the knowledge and skills to deal with them. Having knowledge and skills on safety education and injury prevention could help you, your loved ones and other people in your community during emergency situations.

This learner’s material offers you a wide array of information that can start you on the road to injury prevention. It focuses on the common unintentional injuries that may happen at home, in your school, at work and even in recreational areas, and analyzes why such injuries occur. In order to prevent or reduce the risks of these serious injuries, you will learn the concepts and principles of safety education, practice the habits of observing appropriate personal safety measures; and take responsibility for your safety and that of others by performing appropriate skills and knowledge in first aid procedure.

To facilitate learning and make it more interesting and enjoyable, various learning aids and strategies are especially crafted just for you to expand and reinforce your knowledge and skills about safety education.

Keep in mind that accidents and injuries can be a result of a situation, an unsafe action or unsafe environment. You can do a lot to prevent injuries by understanding the situation, being cautious and being aware of safety hazards in your immediate environment.

The processes of developing awareness of immediate hazards and dangers, equipping you with appropriate accident prevention skills to overcome these hazards, and keeping everyone alive are components of safety education. Safety education is important because living is more enjoyable when we are safe. Therefore, make safety a vital part of life.

Always remember that if you want to live happily, you have to:

- do things safely
- reduce the risk of accidents
- reduce unnecessary risk taking
- develop safety consciousness at all times

Once you internalize safety awareness in your system, this influences you to think and act with due regard for your safety and that of others as well.

LEARNING COMPETENCIES

At the end of this module, you are expected to:

- Discuss the basics of first aid (principles, roles, responsibilities and characteristics of a good first aider);
- Identify common unintentional injuries in the school setting;
- Assess emergency situations for unintentional injuries;
- Demonstrate the proper procedure in conducting basic life support (primary and secondary survey of the victims);
- Demonstrate proper first aid procedure for common unintentional injuries;
- Discuss the importance of dressing and bandages;
- Show the different types of dressing and bandaging;
- Demonstrate appropriate bandaging techniques for unintentional injuries; and
- Demonstrate proper techniques in carrying and transporting victims of unintentional injuries;

Good luck and have a “safe” journey ahead!

DIAGNOSTIC ASSESSMENT

Before you start, let us first check what you know about safety education and first aid. Write your answers on your work/activity sheet.

Test I. Multiple Choice. Choose the letter of the correct answer.

1. What do you call the immediate care given to an injured person before the arrival of a physician?

A. First Aid	B. Intensive Care
C. Chest Compression	D. Cardiopulmonary Resuscitation

2. Which is an objective of first aid?
 - A. To prolong life
 - B. To intensify suffering
 - C. To end the services of a physician
 - D. To bridge the gap between the victim and the physician
3. When a first aider does not alarm a victim, what characteristic does s/he show?
 - A. gentleness
 - B. being observant
 - C. resourcefulness
 - D. tactfulness
4. What is the first thing to do in assessing an emergency situation?
 - A. Call for help
 - B. Survey if the scene is safe
 - C. Do a head-to-toe examination
 - D. Check the vital signs of the victim
5. When is primary survey of the victim done?
 - A. When the victim is conscious
 - B. During the survey of the scene
 - C. When the victim is unconscious
 - D. After the victim has regained consciousness
6. What sterile cloth is used to cover a wound?
 - A. bandage
 - B. cold compress
 - C. dressing
 - D. hot compress
7. What is used to stop bleeding and provide support for immobilization of a fracture?
 - A. bandage
 - B. cold compress
 - C. dressing
 - D. hot compress
8. Which is a break in the continuity of the tissue in the body?
 - A. fracture
 - B. laceration
 - C. sprain
 - D. wound
9. What open wound is caused by nails, needles and other pointed objects?
 - A. avulsion
 - B. incision
 - C. laceration
 - D. puncture

10. Which is used to transport an unconscious victim who should not be lifted due to serious injuries?

- A. blanket drag C. hammock carry
B. chair drag D. lover's carry

Test II. Write TRUE if the statement is correct and FALSE if it is incorrect.

1. It is good to give food to an unconscious victim.
2. First aid takes the place of the services of a physician.
3. The victim is experiencing shock if his eyes are dilated.
4. The RICE method is used in treating sprains and strains.
5. Apply direct pressure to stop severe bleeding of a wound.
6. A good first aider informs the victim of the severity of the injury.
7. Immobilize the fractured part before taking a victim to the hospital.
8. Primary and secondary surveys of the victim are performed if the scene is not safe.
9. The first consideration in transporting a victim is to identify the place where the victim will be transferred.
10. Checking if something is blocking the airway of the victim is the last step in doing primary survey of the victim.

The teacher shall facilitate the checking of answers.

How are your scores? Do they show that you are knowledgeable about safety education and first aid? Or do they tell you otherwise? Refer to the interpretation below.

	Description	Interpretation
20	Advanced	You have adept knowledge and skills and may independently study and perform the activities in this module.
16-19	Proficient	You have adept knowledge and skills and may study and perform the activities in this module with a little guidance from the teacher.
11-15	Approaching Proficiency	You have the fundamental knowledge and skills and may study and perform the activities in this module with a little guidance from the teacher.
6-10	Developing	You have the minimum knowledge and skills about safety education and still need guidance and help from the teacher.
0-5	Beginning	You are still struggling with the basic knowledge and skills about safety education and greatly need the guidance of the teacher.

You may now proceed to the next activity.

LESSON 1

THE BASICS OF FIRST AID

Welcome to your first safety adventure! Today, you will learn about the basics of First Aid, its meaning and importance. At the end of this lesson, you are expected to be able to discuss the characteristics of a good first aider, and the roles, responsibilities, and principles of first aid. Start your adventure now!

WHAT TO KNOW

OBJECTIVES

1. Explain the meaning and importance of first aid
2. Develop the sense of responsibility to help others through the knowledge and application of first aid

Activity 1 – “Emergency! Emergency! What will I do?”

The class will be divided into groups with 4-5 members. Each group will pick a situation and do the necessary, immediate and appropriate action. If done individually, you may also write down your immediate action to the following situations:

Situation	Immediate Action to be Taken
1. Your younger sister cuts her finger with a knife.	
2. Your friend falls down the stairs from the 2 nd floor and can hardly stand.	
3. A man in the street is bumped by a car.	
4. Your mother accidentally touches a hot pan.	
5. Your classmate has drunk poison.	
6. Your teacher suffers a heart attack.	
7. Your neighbor experiences stroke.	
8. Your grandfather slips in the comfort room and cannot move his right arm anymore.	

9. Your cousin who does not know how to swim falls into a deep river.	
10. Your baby brother accidentally swallows a small part of a car toy and it gets stuck in his throat.	

Process Questions:

1. Who are victims of accidents? Where do accidents happen? Why do they happen?
2. Are these situations preventable? How?
3. What will you do if these happen?
4. Why do we need to give immediate action to an emergency situation?

Do you think you did the right action for each situation? Do not worry. As you go on with this module, you will discover the proper ways of addressing those situations.

Here is what you need to know...

First Aid is an immediate and temporary care given to a person who suddenly gets ill or injured. It includes self-help and home care if medical assistance is not available or delayed. It can mean the difference between life and death in extreme cases. However, we must know the limits of the first aid we can give because improper first aid can actually do more harm than good in some instances. Anyone who gives first aid is a first aider.

Roles of First Aid

1. It is a bridge that fills the gap between the victim and the physician.
2. It is not intended to compete with or to take the place of the services of the physician.
3. It ends when the services of the physician begins.

Objectives of First Aid

1. To save lives
2. To prolong life
3. To alleviate suffering
4. To prevent further injury

Characteristics of a Good First Aider

1. Gentle-does not cause pain and panic
2. Observant-notices all signs
3. Resourceful-makes the best use of things at hand
4. Tactful- does not frighten the victim
5. Sympathetic- comforts and reassures the victim

Principles of First Aid

(Dos in Giving First Aid)

1. DO stay calm.
2. DO reassure and comfort the victim.
3. DO check for a medical bracelet indicating a condition, such as epilepsy or diabetes.
4. DO loosen any tight clothing.
5. DO keep the victim covered to reduce shock

(Don'ts in Giving First Aid)

1. DON'T give food and drink to an unconscious person.
2. DON'T move an injured person unless you need to place him/her in the recovery position.

WHAT TO PROCESS

Activity 2 – Organize Your Thoughts

The class will be divided into five groups and each group will be given an information card. The task is to present the information through a creative graphical organizer. You may follow the example below.



Process Questions:

1. What should we remember when giving first aid?
2. Why is it important to understand and follow the basics of first aid?
3. What is the ultimate goal in giving first aid?

Activity 3 – Figures of Speech

Choose one from the following words and compare it to anything, then defend your answer.

Example: Injury is like a thief because it comes anytime.

- | | |
|--------------------|-------------------------|
| • First aid | • Being gentle |
| • First aider | • Being observant |
| • To save life | • A physician |
| • Giving first aid | • Safety and prevention |
| • Staying calm | • Having a quality life |

Process Questions:

1. If injuries happen at any time, at any place, to anybody, then what should we do to prevent them?
2. If injuries happen at any time, at any place to anybody, then what should we do if these happen?
3. What are the roles of a first aider during an emergency situation?

Activity 4– “Is He a Good First Aider?”

Analyze the situations and answer the process questions that follow.

- Student A is very relaxed in controlling the bleeding on her classmate’s finger.
- Student B is insisting that her unconscious sister drink water.
- Student C immediately brings her friend, who fell down the stairs, to the clinic.
- Student D makes use of his clean handkerchief to tie his best friend’s bleeding arm.
- Student E speaks comforting words to her cousin who sprained his ankle while playing basketball.

Process Questions:

1. Who among the students are good first aiders? Why?
2. Who among them are not good first aiders? Why?
3. What characteristics should a good first aider possess?
4. If you were a first aider, what would be your ultimate goal?

WHAT TO REFLECT ON AND UNDERSTAND

Activity 5 – Complete Me

Complete the unfinished statements individually.

I can be a first aider because _____.

I will be a first aider because _____.

As a first aider, I will _____.

Process Questions:

1. Why is first aid important?
2. Can we help others through our knowledge and skills in first aid? How?

Activity 6 – First Aider on the Go...

The person in the illustration is a first aider. Interpret it emphasizing the importance of first aid to oneself and others.



Process Questions:

1. Why is having knowledge and skills in first aid important?
2. Can we help others through our knowledge and skills in first aid? How?

WHAT TO TRANSFER

Activity 7–Act it Out!

The class will be divided into groups. Create a 2-3 minute pantomime showing a good first aider helping in certain emergency situations at home, in school, on the road, at an office or park.

Criteria for scoring: Quality, Realistic, Stage Performance and Teamwork

LESSON 2

SURVEY OF THE SCENE AND THE VICTIMS

Welcome to your second safety adventure! This will be a very exciting safety adventure because you will know the proper procedures in assessing emergency situations for unintentional injuries and in doing the primary and secondary surveys of the victims. It is expected that at the end of this lesson, you can confidently and properly demonstrate these procedures, applying the principles of first aid and displaying characteristics of a first aider which you have learned in the previous lesson.

WHAT TO KNOW

Study carefully Figure 1. It shows the procedure in assessing emergency situations.

OBJECTIVES:

1. Demonstrate properly the procedures in assessing emergency situations
2. Demonstrate properly the procedures in doing primary and secondary survey of victims

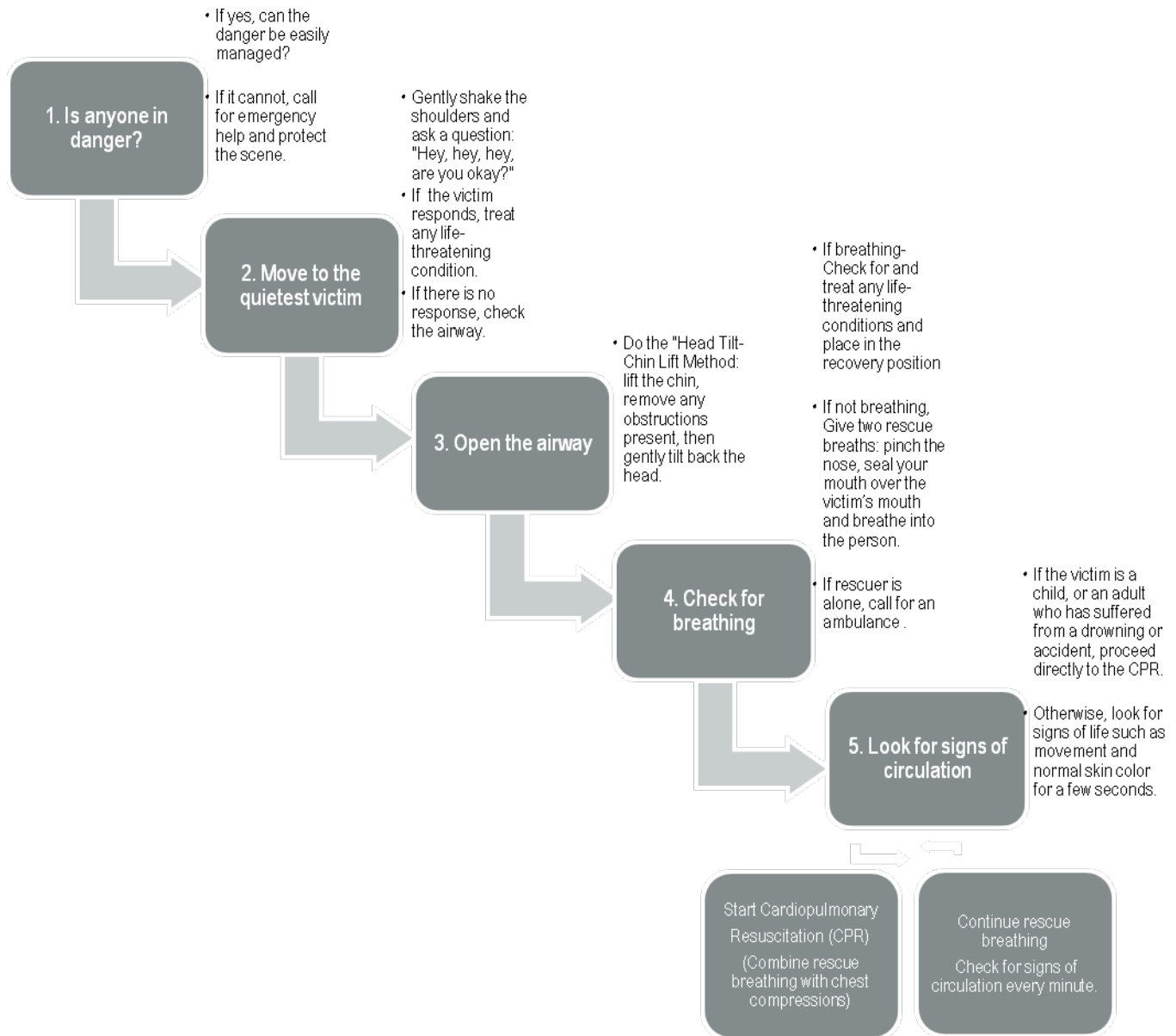


Figure 1. Steps in Assessing Emergency Situations

(Source: The Health Curriculum in Philippine Basic Education, Vol. 2)

Activity 8 – Express your Queries

Do you understand the flow chart? If yes, congratulations! You have an in depth background knowledge and skills in first aid. If you don't, then list down on the table below all the words and phrases that you do not understand or are confused about.

I don't know anything about....	I am confused about...

Present your queries to the teacher. You may also ask a bonafide Red Cross member, a para-medical practitioner like a nurse, a first aider, rescuer, health professional, life guard or a physician in your school or community to discuss and demonstrate the principles.

Listen attentively to the teacher or any invited person as he/she discusses and demonstrates the proper procedures in assessing emergency situations and in doing basic life support (primary and secondary surveys of the victims).

Here is what you need to know...

Vital signs are measures of various physiological statistics taken in order to assess the most basic body functions. The act of taking vital signs normally entails recording body temperature, pulse rate or heart rate, blood pressure, and respiratory rate.

Before, Airway, Breathing and Circulation (ABC) are mnemonics for essential steps used by both medical professionals and lay persons such as first aiders when dealing with a patient.

In 2010, the American Heart Association is rearranged the ABCs of cardiopulmonary resuscitation (CPR) in its American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care, published in *Circulation: Journal of the American Heart Association*.

“For more than 40 years, CPR training has emphasized the ABCs of CPR, which instructed people to open a victim’s airway by tilting their head back, pinching the nose and breathing into the victim’s mouth, and only then giving chest compressions,” said Michael Sayre, M.D., co-author of the guidelines and chairman of the American Heart Association’s Emergency Cardiovascular Care (ECC) Committee. “This approach was causing significant delays in starting chest compressions, which are essential for keeping oxygen-rich blood circulating through the body. Changing the sequence from A-B-C to C-A-B for adults and children allows all rescuers to begin chest compressions right away.”

Difference between signs and symptoms

Signs are details discovered by applying your senses – sight, touch, hearing and smell during the course of the examination.

Example:

- Bleeding
- Swelling
- Deformities

Symptoms are sensations that the victim feels or experiences and may be able to describe.

Example:

- Nausea
- Vomiting
- Heat
- Impaired sensations

There are two ways to conduct physical examination when giving first aid:

1. Primary Survey

Primary survey of the victim is used when the victim is unconscious and to find out and immediately treat life-threatening conditions.

a. Check for Consciousness

1. Ask the victim: “Hey, hey, are you okay?” while carefully shaking the victim’s shoulder.
2. When there is no response, not even mumbles or groans, the victim is unconscious and in need of immediate medical help.

b. Open the Airway

1. The victim’s unconsciousness maybe due to an obstruction in his/her airway. It may also be caused by a narrowed airway making breathing impossible.
2. Find out if there is loss of muscular control in the throat area which allows the tongue to slip back and block the throat.
3. Lift the chin and tilt the head of the victim (if the victim is an adult). This way you will be able to lift the tongue from the back of the throat, leaving the airway clear.

c. Check for Breathing

1. Put your face near the victim's mouth and look, listen, and feel for breathing. You should observe for:
 - Chest movement, sound of breathing, or feel of breath on your cheek

d. Check for Circulation

1. Locate pulse using your middle and index finger. Pulse indicates blood circulation, which is essential for the heart and brain to function.
2. Poor blood circulation may be reflected on the pale color of the skin. This is fatal.
3. To revive circulation, perform CPR immediately.

2. Secondary Survey

Secondary survey is used when the victim is conscious or has revived. It aims to detect everything about the patient's condition.

a. History Taking

SAMPLE PAIN is the mnemonic in order to perform the steps more easily.

S-ymptoms (the chief complaint of the patient)

A-llergy (find out if the victim is allergic to anything)

M-edication (what are the medicines s/he is currently taking)

P-revious illness (that may be related to the problem)

L-last meal (only for those subject for operation)

E-vents prior to what happened

P-eriod of pain (How long? What started it?)

A-rea (Where is the pain coming from?)

I-ntensity

N-ullify (What stopped it?)

b. Checking for Vital Signs

A. **Pulse rate**

Steps in checking the pulse:

- Use your fingertips in getting the pulse. Follow the following procedure:
 1. Place the finger tip over an artery where it either crosses a bone or lies close to the skin.

2. Feel the pulsations as the pressure wave of blood causes the vessel wall to expand – that is the pulse.
- The pulse rate may be taken in different points in the body like:
 1. Brachial
 2. Carotid
 3. Wrist
 4. Temporal
 5. Subclavian
 6. Axillary
 7. Femoral
 - **NO-NO in Getting Pulse Rate**
 - Never use your thumb; it has its own pulse.
 - Do not palpate both the carotid arteries at the same time.
 - Do not take the pulse when the victim is in sitting position. Pulsations disappear as the victim is elevated to a sitting position.
 - Never put too much pressure or massage the carotid. You may disturb the heart's electrical conduction system.

Normal Pulse Rate	
60-70	Men
70-80	Women
80-90	Children over 7 years old
80-120	Children over 1-7 years old
110-130	Infants

B. **Temperature**

Guidelines in checking temperature:

- It is being important to monitor temperature in the case of stroke and high fever.
- Body temperature is measured by using a thermometer within the:
 1. Rectum (rectal)
 2. Oral (mouth)
 3. Axillary (armpit)

C. **Respiration**

Guidelines in checking respiration:

- Count the number of breaths per minute.

- A whistle sound or wheeze and difficulty in breathing may mean an asthma attack.
- A gurgling or snoring noise and difficulty in breathing may mean that the tongue, mucous or something else is stuck in the throat and does not let enough air to get through.

*Between 12-20 breaths per minute are normal for adults and older children; 40 breaths per minute are normal for babies.

D. **Skin color**

Guidelines in checking skin color:

- Skin color reflects the circulation of blood and the saturation of oxygen in the blood.
- The presence of mucous around the mouth, inner eyelids, and nail beds is a sign of poor blood circulation.
- A healthy skin is warm and pink because blood flows normally in the blood vessels.

c. Head to Toe Examination

1. Head and neck

- Are there any lacerations or contusions in the area?
- Is there a presence of blood in the victim's hair? If yes, immediately find out where it is coming from.
- Is there any fluid in the victim's nose, and ears? If so, the victim has a skull fracture.

2. Eyes

- Pay close attention to the pupils.

Pupil Appearance	Assessment
Dilated pupil	State of shock
Very small pupils	Poison or use of prohibited drugs
Different size	Head injury that requires immediate attention
Small and bright	Pupils are reactive
No reaction	DEATH

3. Chest

- Check for cuts, bruises, penetrations, and other impairments.
- If the victim feels pain while you apply pressure onto his/ her chest, there could be a rib fracture.

4. Abdomen

- Does the victim's abdomen hurt? Where is the pain coming from?
- Is his/ her abdomen tender?
- Did you feel any lumps? If yes, get immediate medical assistance.

5. Back

- Is there movement in the victim's lower extremities?
- Is there sensation in these parts? If the answer is yes, do not move the victim. Immobilize him/ her.

Top Ten things to do in case of emergency

1. Shout for HELP!
2. Survey the scene and assess the situation.
3. Determine if the accident warrants a visit to the nearest hospital or if simple cleansing and band aid will do.
4. If you are certified in CPR and a victim needs it, begin CPR right away.
5. Stop the bleeding, if there is any.
6. Treat any symptoms of shock.
7. Look for the medical alert tag in every victim.
8. Seek trained medical assistance.
9. Never give anything by mouth to an unconscious victim.
10. Wait for medical professionals to arrive.

***ALWAYS LOOK FOR A MEDICAL ALERT TAG IN EVERY VICTIM.**

EMERGENCY ACTION PRINCIPLES

Source: Red Cross Manual

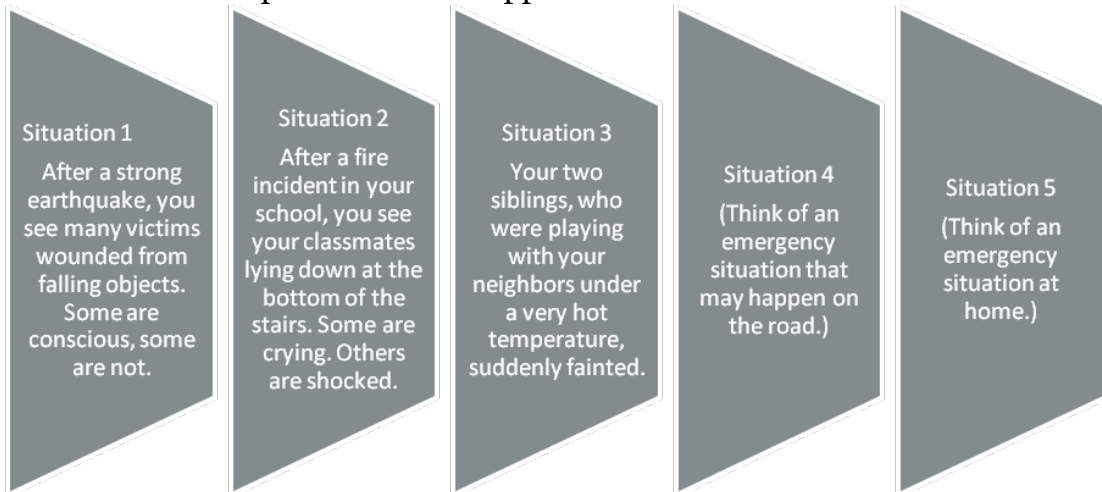
Step 1	• Is the scene safe? If yes, proceed to the next steps. If no, do not attempt to go to the accident. Call Emergency Medical Services instead.
Step 2	• Make sure the victim is lying on his back. If not, roll the victim.
Step 3	• Check for responsiveness by gently tapping the shoulder of the victim saying: • "Hey, hey, hey are you okay?"
Step 4	• If there is no response, call for help immediately.
Step 5	<ul style="list-style-type: none"> • Do the primary survey of the victim. • Airway - check if there is blockage in the airway (if yes, take it out using your pinky finger in a scooping motion. • Breathing - use the maximum head-tilt-chin-lift method and look-listen-feel (if negative, perform rescue breathing) • Circulation - Use carotid pulse (if negative, go to Step 6)
Step 6	• While applying maximum head-tilt-chin-lift method, pinch the nose and give 2 initial full breaths to the victims.
Step 7	• Take off the clothes of the victim that can block the compression area.
Step 8	<ul style="list-style-type: none"> • Perform CPR on the victim. • Do 5 cycles of 30 compressions and 2 breaths.
Step 9	• If the victim is revived, do the secondary survey of the victim. If not, continue performing CPR while waiting for the rescue team.
Step 10	<ul style="list-style-type: none"> • Do the secondary survey. Record all the data and surrender to the rescue team. • Interview : <ul style="list-style-type: none"> • S - ymptoms • A - llergy • M - edication • P - ast medical history • L - ast oral intake • E - vents prior to the accident • Vital Signs - Carefully check the following vital signs <ul style="list-style-type: none"> • eyes : dilated - shock; constricted - stroke or drug abuse; pupils are unequal - stroke or head injuries • nose - watery - fracture or skulls injury; • bluish skin color - lacking oxygen (cyanosis) • body temperature <ul style="list-style-type: none"> • blood pressure • Head-to-Toe Examination- Check for the following <ul style="list-style-type: none"> • D - eformity • C - ontusions • A - brasions • P - unctures • B - ums • T - enderness • L - acerations • S - welling

After listening attentively and reading the information above, I am very sure that you are now ready to demonstrate the procedure in assessing emergency situations and in doing primary and secondary surveys of the victim.

WHAT TO PROCESS

Activity 9 - Let's try this!

Go to your group and practice the procedures. Be ready to apply the proper procedure to the situation that the teacher will give. Be sure to apply the previous lessons. Your performance will be graded according to the following criteria: correctness of the procedures and application of basics of first aid.



Process questions:

1. Why is it important to assess the situation first before proceeding to the primary and secondary survey of the victim?
2. When should a primary survey of the victim be used?
3. When should a secondary survey of the victim be used?

How was your performance? I am sure it was great.

If the teacher gave you an unsatisfactory score, do not worry. You still have the chance to do better in your next activities. Review the procedures above and try to check which steps you are not very good at yet.

Activity 10– Share Your Heroism

Share with the class a real experience where you were able to help other people in an emergency situation.

1. Have you experienced helping a person in an emergency situation?
2. How was it?
3. What did you do? Is it the same with what has been discussed?
4. How did you feel during and after helping the victim?

WHAT TO REFLECT ON AND UNDERSTAND

Activity 11 – Rate Yourself

How well did you perform and participate in assessing emergency situations and in doing primary and secondary surveys of the victims? Write your name and reason at the right side of your chosen self-rating.

Advanced	
Proficient	
Approaching Proficiency	
Developing	
Beginning	

1. Why is it important to follow the proper procedures in assessing emergency situations and in doing basic life support (primary and secondary survey of the victim)?

Activity 12– Learning Outside

Interview a bonafide Red Cross member, a para-medical practitioner like a nurse, first aider, rescuer, health professional, life guard or a physician. Gather information with the use of the guide questions below. Present a summary of facts through a pamphlet, editorial, newsletter, etc.

1. What is the first thing that they do in case of an emergency?
2. How do they prepare themselves for an emergency?
3. What do they consider in addressing emergency situations?
4. What trainings did they undergo?
5. Why did they choose their profession?

WHAT TO TRANSFER

Activity 13 – Music is Good for Health

Compose a 4-line jazz chant in English, Filipino or your own dialect describing the importance of having first aid and safety awareness.

Criteria: Relevance and Stage Performance

Example : First Aid ay kailangan
 Upang emergency ay ating matugunan
 Ngunit mas makakabuting, mag- ingat- ingat lang
 Iwasan ang sakuna, katawan ay protektahan.

LESSON 3

DRESSING AND BANDAGES

Welcome to your third safety adventure. This will be another and new exciting trip where you will learn the different dressing and bandages used on wounds and burns. It is expected that at the end of this lesson, you can explain and properly demonstrates the bandaging techniques for some unintentional injuries. Good luck again and have a “safety” journey!

WHAT TO KNOW

OBJECTIVES

1. Explain the purpose of dressing and bandages
2. Demonstrate the appropriate bandaging techniques for common unintentional injuries

Activity 14–Bonding with Dressing and Bandages

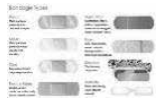
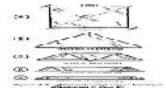










Examine the pictures.

1. Have you seen or used any of them? When?
2. Where?
3. What do you call them?
4. When do you use them?

Activity 15 – Twist and Double Match

Arrange the scrambled letters in Column A to form words related to first aid. Connect them to their correct definition or purpose in Column B, and to their pictures in Column C.

Column A	Column B	Column C
1. SINGDERS	A. a sterile cloth used to cover wounds	a. 
2. CLOD PRESSCOM	B. used to reduce swelling	b. 
3. OLDC DAP	C. can be used as cold compress	c. 
4. NABGADES	D. used to apply pressure to stop bleeding	d. 
5. DOUNW	E. the end of the bone is displaced	e. 
6. BRUN	F. a broken bone	f. 
7. SPARINS	G. ligaments are torn	g. 
8. TRINSAS	H. muscles are overstretched	h. 
9. FARCTERU	I. caused by heat	i. 
10. LISDOCATION	J. a cut in the skin	j. 

Here is what you need to know...

- A dressing is a piece of sterile cloth that covers a wound to prevent infection and/or to stop bleeding.

Techniques in Applying a Dressing

1. Wash hands and wear gloves, if possible.
2. Unwrap the dressing as close to the wound as possible. Be sure not to touch the wound.
3. Skin is not sterile. If the dressing slips over the victim's skin while you are trying to position it, discard and use a fresh one.
4. Place the dressing over the wound.
5. Use a dressing that is large enough to extend at least 1 inch beyond the edges of the wound.
6. If body tissue or organs are exposed, cover the wound with a dressing that will stick.
7. Then secure the dressing with a bandage or adhesive tape.
 - Cold compress is used to reduce swelling and relieve pain, especially used for sprains and strains. Cold packs can be used as cold compress. Hot compress is also used to allow normal blood circulation. Cold and hot compress are applied alternately for closed wounds or contusions.
 - Bandages are used to apply pressure to bleeding; for covering wounds and burns; and providing support for immobilization for broken bones, sprains and strains. There are three main types of bandages namely: triangular, ace and tubular. Triangular bandage is made from cloth and can be used as cold compress, padding, support for pressure, or support sling. Ace bandage secures dressings in place. Tubular bandage is used to support joints or hold dressings in place. Smaller tubular bandage is used for finger injuries.

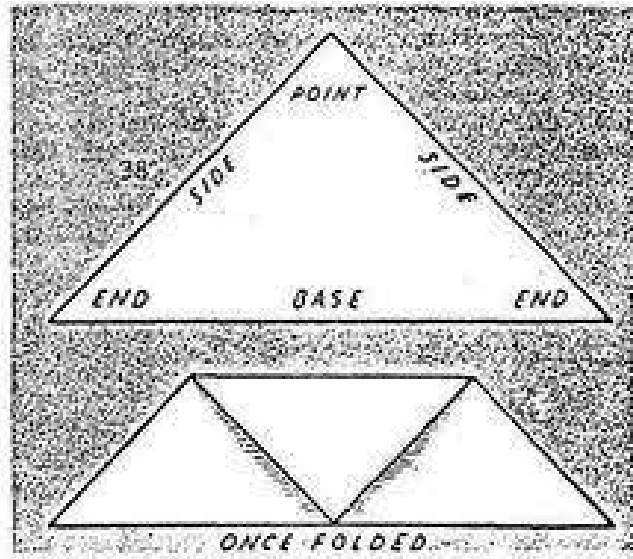


Figure 2 shows the parts of a triangular bandage.

Two Phases of Bandaging

- A. An open phase bandaging is used for wounds on top and back of the head, chest, back, hand, and foot, and as arm sling.
- B. A cravat phase bandaging is used for wounds that need extra support like wound on the eye, forehead, ear, cheek, jaw, shoulder, hip, arm, leg, elbow, knee, and palm and for a sprained ankle. The narrower the cravat is, the greater pressure it will give.

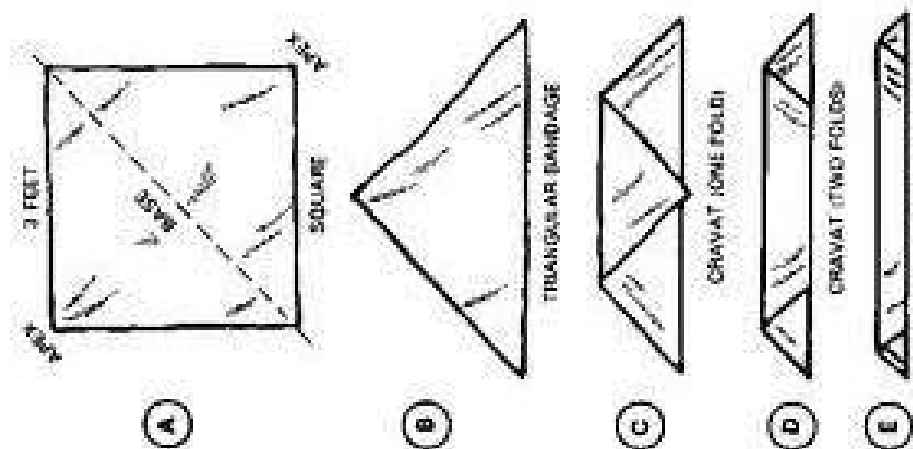


Figure 3. Phases of Bandaging

Techniques in Bandaging

1. Keep in mind the following:
 - a. Always use a square knot.
 - b. Keep the cloth sterile to avoid infection.
 - c. Always keep the ends.
2. Bandaging technique depends upon the size and location of the wound, your first aid skills, and materials at hand.
3. Bandage firmly over bleeding and securely over the broken bone, not so tight so as not to cut off blood circulation.
4. When wrapping bandages around the body, such as knees, ankles, neck, and small back , use its natural hollows to slide the bandage gently into place.
5. Since most injuries swell, check regularly to ensure that the bandage is still comfortable and that it remains firmly secured.
6. Secure the bandage with a tape, clips or a bow or square knot. Ensure that the bandages, especially the knots, do not touch the skin.

How to do a square knot

- Right over left and left over right (Figure 4)

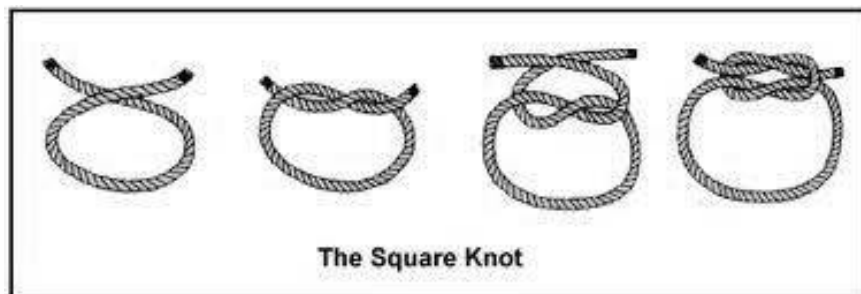
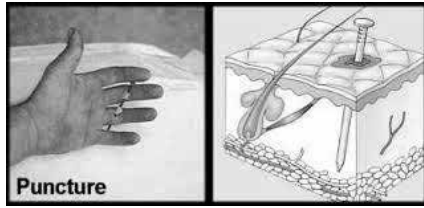


Figure 4. Making A Square Knot

Wounds

A wound is a break in the continuity of a tissue in the body. It may be closed in which there is no break or damage in the skin. It is also called hematoma or contusions. A wound may also be an open wound in which there is a break in the skin.

Kinds of Open Wounds



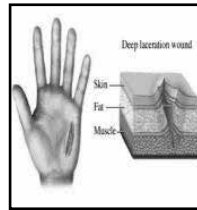
Puncture



Abrasion



Incision



Laceration



Avulsion

1. Puncture is a piercing wound caused by nails, needles and other pointed objects
2. Abrasion is caused by rubbing or scraping the skin against a rough surface.
3. Incision is a cut caused by knife, broken glass or any sharp object.
4. Laceration is a blunt breaking or tearing of soft tissues usually resulting from mishandling tools and other accidents.
5. Avulsion is a forcible tearing or partial tearing away of tissues.

How to Manage Wounds:

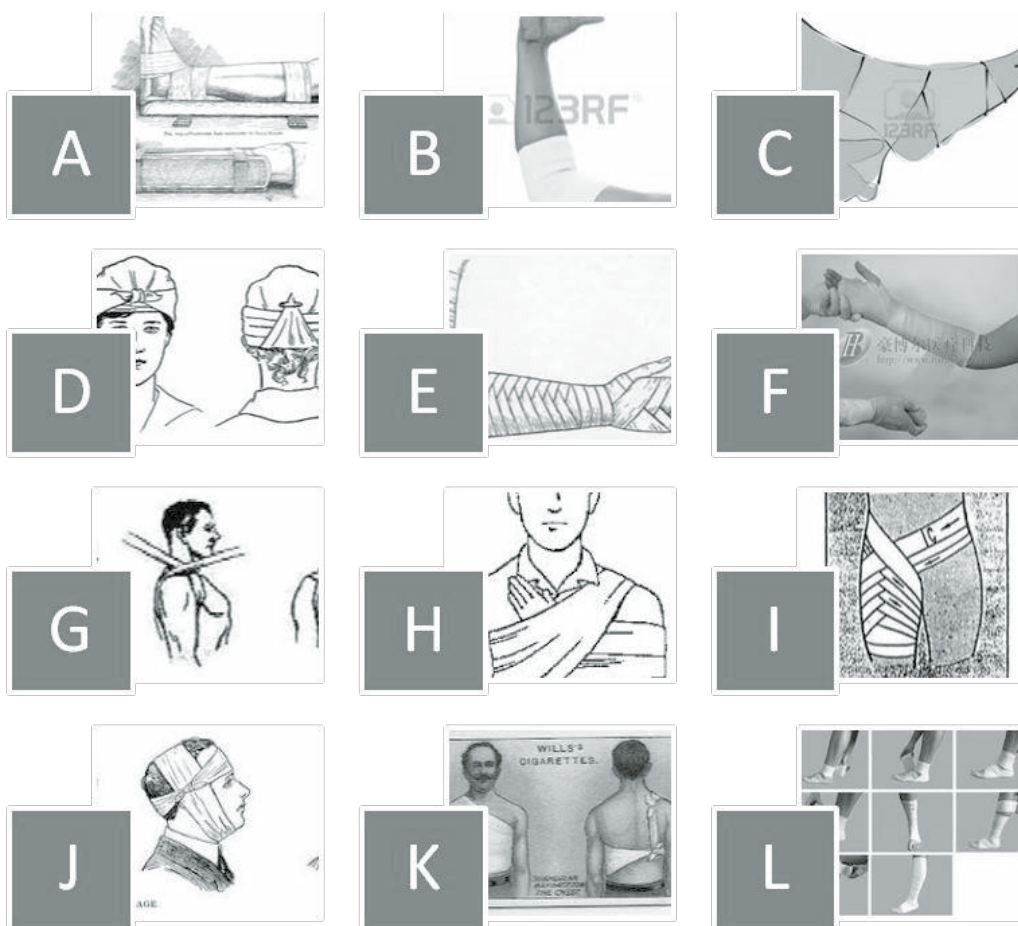
- A. For management of hematoma, we use the mnemonic RICE:
 1. Resting the injured part
 2. Ice application
 3. Compression
 4. Elevation
- B. First Aid for Open Wounds with Severe Bleeding
 1. Wear gloves and remove or cut clothing as necessary to expose wound.
 2. Control bleeding by applying direct pressure.
 3. Elevate the injured part above the heart except for eye injury and wounds with embedded object.

4. Cover wound with sterile dressing and bandage.
5. Care for shock.
6. Consult a physician immediately.

WHAT TO PROCESS

Activity 16 – Wound and Bandage

Choose from the pictures below the correct type of bandaging for the specified injuries.



1. An incision on a chest
2. An abrasion on a cheek
3. A puncture on a foot
4. A laceration on the arms
5. An avulsion on the head

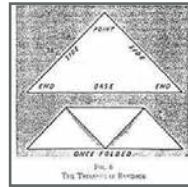
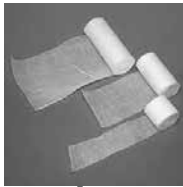
Process questions:

1. Why should we use dressings and bandages on wounds?
2. Can we use any cloth as a dressing or bandage? Why and why not?
3. Aside from wounds, in what other injuries can we use dressings and bandages?
4. Why is it necessary to apply the proper techniques on applying dressings and bandages?

WHAT TO REFLECT AND UNDERSTAND

Activity 17 – Be Grateful and Resourceful

List down some materials at home or in school that can be used as dressings and bandages. Write them in the box. Include their uses or importance.



Why should we use clean dressings and bandages?

WHAT TO TRANSFER

Activity 18 – Bandaging Olympics

Your class will be having a bandaging contest. In this competition, you will be grouped and given several injuries. Your task is to quickly apply the dressing and bandage on the wounds. The group who dress so in shortest time with correct application of dressings and bandages wins the game. Good luck!

LESSON 4

CARRYING AND TRANSPORTING AN INJURED PERSON

Welcome to your fourth safety adventure. At this stage, you will experience different things. You will be challenged to analyze situations and use your muscular strength and endurance to carry and transfer an injured person to a safer place. At the end of this lesson, you are expected to demonstrate the proper techniques in carrying and transporting the victims of unintentional injuries.

WHAT TO KNOW

Activity 19 – “How Will You Bring Me to A Safe Place?”

An injured person needs your help. You are to bring her to a safe place. How are you going to do that? Study the situations and determine the kind of transport that should be used.

OBJECTIVES

1. Identify the different types of carrying and transporting of an injured person
2. Demonstrate proper techniques in carrying and transporting an injured person

Different Kinds of Transport

LOVER'S CARRY



SHOULDER DRAG



FIREMAN'S CARRY



FIREMAN'S DRAG OR TIED-HANDS CRAWL



BLANKET DRAG



PACK-STRAP CARRY



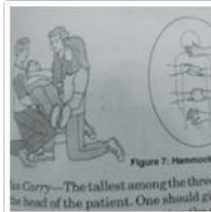
CHAIR CARRY



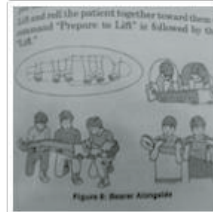
TWO-PERSON ARM CARRY



HAMMOCK CARRY



BEARER ALONGSIDE



Situations...

No. of First Aider	Available Materials	Status of Injured Person	Must Do	Kind of Transport
1	None	Unconscious Has no injury on arm, leg, rib, neck and back		
1	None	Unconscious	Pass underneath a low structure	
1	None	Unconscious	Transport the victim up the stairs	
1	Malong	Experiencing a very serious injury and should not be lifted		

1	None	Unconscious Very small		
1	None	Unconscious Fat		
2	Class-room chairs and tables	Unconscious No injury on neck, back or pelvis	Carry the victim down stairs	
2	None	Unconscious		
3	None	Unconscious	Injured person will be carried on his back or face	
3	None	Unconscious	First Aiders will have to stay on one side of the injured person	

Questions:

1. In what emergency situations can we apply these transporting techniques?

Listen and observe carefully as the teacher discusses and demonstrates the techniques so that you will be ready for the next activity.

Here is what you need to know...

Transporting an injured person to a safer place requires great care. A first aider must undergo proper training. When doing this, a first aider must consider the following factors:

- a. Weight and height of the victim
- b. Status of the victim (conscious or unconscious)
- c. Environment (safe, floor is smooth, narrow or wide)
- d. Special need considerations (injuries of the victims)

One-man Transport



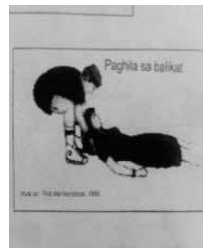
Fireman's Carry



Piggy Back



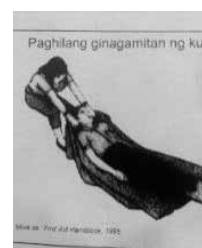
Pack Strap Carry



Shoulder Drag



Fireman's Drag



Blanket Drag

Fireman's Carry – the easiest way to transport a light and smaller victim

Piggy Back – when the victim is conscious

Pack Strap Carry - when the victim is smaller than the first aider

Shoulder Drag – used when the floor is smooth, short distance transport

Fireman's Drag or Tied-hands Crawl – used when first aider and victim must crawl underneath a low structure

Blanket Drag – used when the victim is seriously injured and should not be lifted.

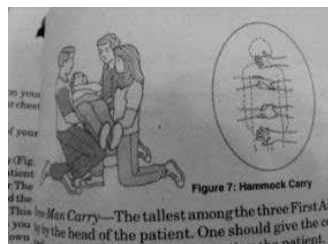
Two-man Carry



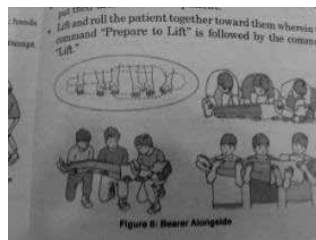
Chair Carry

Chair or Seat Carry – when there are two first aiders and a chair is available

Three or More-Man Transport



Hammock Carry



Bearer Alongside

Hammock Carry – when there are three first aiders

Bearer Alongside Carry – carriers will stay on the uninjured side of the victim

Six Man Lift and Carry – when there are six first aiders

WHAT TO PROCESS

Activity 20 – Pick and Carry

The class will be divided into groups with 3-4 members. One from your group will act as victim. The teacher has prepared strips of paper in which the different types of carrying and transporting the victim are written. You will pick three and demonstrate the proper techniques.

Process questions:

1. Which among the techniques do you find the easiest and the most difficult? Why?
2. What fitness components are needed by a first aider or rescuer in transporting a victim to a safer place?
3. What are the things to consider in transporting a victim?

WHAT TO REFLECT ON AND UNDERSTAND

Activity 21 – Thinking of Others

If you were the SK Chairman of your barangay, will you offer First Aid skills-training to the youth of your community? Why? How will you do this? Present an Action Plan to the class with the following parts:

- a. Goals/Target
- b. Participants
- c. Resource Person/Guest Speakers
- d. Venue
- e. Estimated Budget
- f. Desired Outcomes

WHAT TO TRANSFER

Activity 22 – Campaign for Safety

Create a slogan that will encourage people in the community to join in the First Aid Movement.

Criteria: Relevance and Persuasiveness

LESSON 5

FIRST AID FOR COMMON UNINTENTIONAL INJURIES

Welcome to your last safety adventure! This lesson will culminate your exciting and significant journey as you learn the causes and proper first aid procedures for common unintentional injuries. Your knowledge, skills and understanding on this final stage will completely prepare you to practice safety measures and help yourself, your family, friends and your community during emergencies.

WHAT TO KNOW

Activity 23 – Creative Presentation

The class will be divided into several groups. Each group will be assigned a specific unintentional injury. Your group shall present your assigned topic in a creative way but must address the guide questions given. Listen, observe attentively and participate in the presentation of the other groups.

1. Where does the injury commonly happen?
2. What are the factors that contributed to the occurrence of the injury?
3. What are the proper procedures in giving first aid to the injury?
4. What are the ways to prevent the injury?

Suggested Presentations:

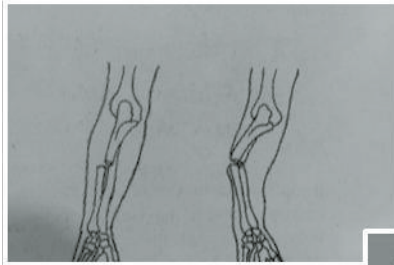
- | | |
|---------------------------|---|
| 1. Gallery Walk | 7. Pantomime |
| 2. Game Show | 8. Newscasting |
| 3. Talk Show | 9. Song Composition |
| 4. Poem | 10. Multimedia and Other Creative Presentations |
| 5. Role Play | |
| 6. Graphical Presentation | |

OBJECTIVES

1. Identify common unintentional injuries in school
2. Demonstrate proper first aid procedures for common unintentional injuries

Here is what you need to know...

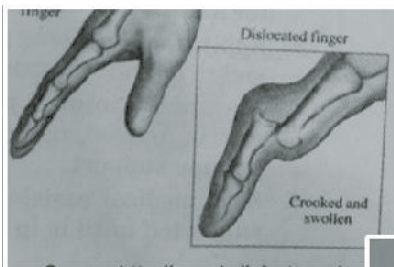
FIRST AID FOR COMMON UNINTENTIONAL INJURIES



FRACTURE is a break or crack in a bone. An open fracture pierces the skin surface while in a closed fracture, the skin above is intact.

First aid:

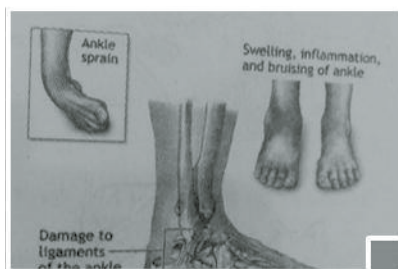
1. Check vital signs.
2. Do not move the injured part.
3. Stop bleeding if there is any.
4. If you have to move the person, immobilize the broken part by splinting.
5. Seek medical help immediately.



DISLOCATION is a partial or complete displacement of the bones.

First Aid:

1. Call for help immediately.
2. Splint the affected part.
3. Do not try to move a dislocated part or force it back into place.
4. Apply ice on the injured part to reduce swelling .

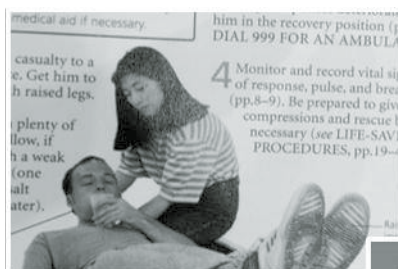


SPRAIN is an injury to the ligaments of a bone due to accidental tearing or overstretching.

STRAIN is an injury to the muscles which is a result of improper use of the muscle.

First Aid:

1. Rest the injured part.
2. Apply ice.
3. Compress the injured part.
4. Elevate the injured part.



HEAT EXHAUSTION is caused by loss of salt and water due to excessively high temperature. This may lead to heatstroke and even death.

First Aid:

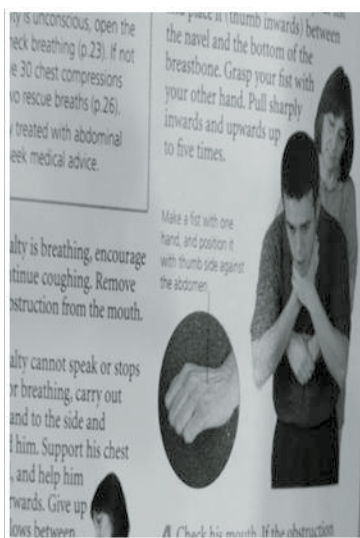
1. Transport a victim to a cool place.
2. Give him/her plenty of water.
3. Check for vital signs.
4. Seek medical help.



FOOD POISONING is caused by consuming food or drink that is contaminated with bacteria or viruses.

First Aid:

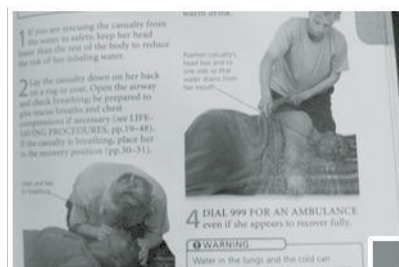
1. Help the person to lie down and rest.
2. Give him plenty of flavorless fluids to drink and a bowl to use if he vomits.
3. Call for medical help if the condition worsens.



CHOKING results when a foreign object blocks the throat.

First Aid:

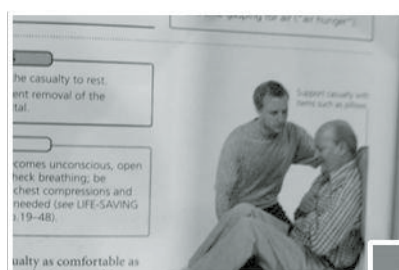
1. Ask the person if he is choking.
2. Encourage him/her to cough.
3. When the person cannot speak or stops coughing, give him five back blows. Stand behind him and help him lean forward. Support his chest with one hand, and give five sharp blows between the shoulder blades with the heel of your hand.
4. If back blows fail, try abdominal thrusts. Stand behind the person and put your arms around the upper part of his abdomen. Clench your fist with thumbs inward. Place it between navel and the bottom of breastbone. Grasp your fist with your other hand. Pull sharply inwards and upwards up to five times.
5. Check his mouth. If obstruction is not cleared, repeat the back blows and abdominal thrust.
6. If obstruction still has not cleared, call for an ambulance. Continue until help arrives.



DROWNING happens when air cannot get into the lungs because of water. It can cause immediate death when taken for granted.

First Aid:

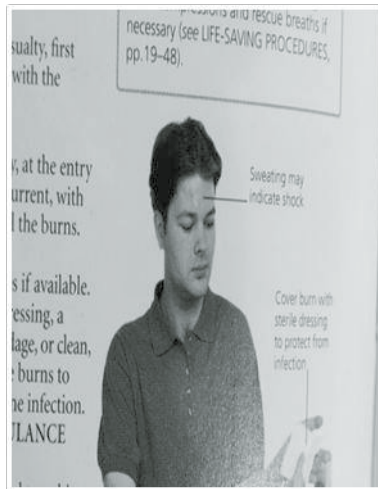
1. Lay the person down on his/her back.
2. Check breathing and open the airway.
3. Give rescue breaths and chest compression if necessary.
4. If the person is breathing, place him/her in the recovery position.
5. Treat for hypothermia by removing wet clothing and covering him/her with a dry blanket.



HEART ATTACK is caused by a sudden obstruction of blood supply to the part of the heart muscles.

First Aid:

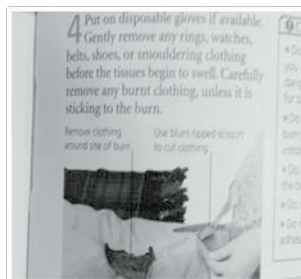
1. Help the person sit or lie down with head elevated.
2. Call for medical help.
3. If the person is conscious, give him/her a full-dose aspirin and advise him/her to chew it slowly.
4. Constantly monitor the vital signs. Be prepared to give rescue breaths and chest compression.



CHEMICAL BURNS may occur when electricity passes through the body.

First Aid:

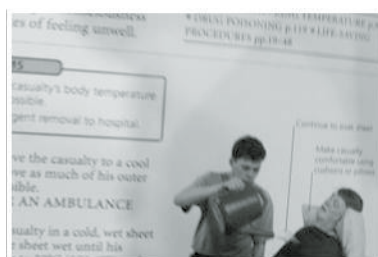
1. Make sure that contact with the electrical source is broken.
2. Flood the sites of injury at the entry and exit points of the current with plenty of cold water.
3. Wear disposable gloves and place a sterile dressing or a bandage over the burn to protect it from airborne infection.
4. Call for medical help.
5. Reassure the victim and treat for shock.



BURNS are often due to domestic incidents such as touching a hot iron, friction (rope burn) or spilling boiling water on the skin.

First Aid:

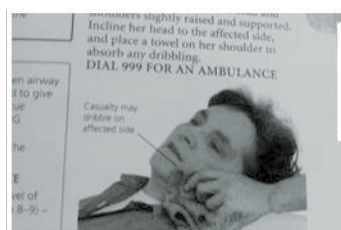
1. For minor burns, flood the injured area with cold water for at least how long to stop burning and relieve pain.
2. Put on gloves and cover the area with sterile non-adhesive dressing or bandage.
3. For severe burns, help the person to lie down and prevent the burnt area from coming into contact with the ground. Douse the burn with plenty of cold liquid.
4. Seek for medical assistance. Do not delay medical help.
5. Wear disposable gloves and gently remove any rings, watches, belts, shoes, or smouldering clothing before the tissues begin to swell.
6. Carefully remove any burnt clothing, unless it is sticking to the skin. Cover the burnt area with non-adhesive dressing or bandage.
7. Continue to monitor vital signs.
8. Reassure casualty and treat for shock.



HEAT STROKE is caused by a failure of the "thermostat" in the brain to regulate body temperature. When this happens, the body becomes seriously heated.

First Aid:

1. Move the person immediately to a cool place.
2. Remove as much of his outer clothing as possible.
3. Call for medical help.
4. Wrap the person in a cold, wet sheet and keep the sheet wet until his temperature drops to 38°C or 37.5°C under the tongue or armpit, respectively.
5. If the person has returned to normal temperature, replace wet sheet with a dry one.
6. Monitor vital signs until help arrives.
7. If temperature rises, repeat the cooling process.



STROKE is a condition in which the blood supply to a part of the brain is suddenly and seriously impaired by a blood clot or ruptured blood vessel.

First Aid:

1. If the person is conscious, help him to lie down with his head and shoulders slightly raised and supported.
2. Incline his head to the affected side and place a towel on his shoulder to absorb any dribbling.
3. Call for help.
4. Loosen any tight clothing.
5. Monitor vital signs and reassure the victim.
6. If the victim is unconscious, give rescue breathing and chest compression.
7. Call for an ambulance or call for help.

WHAT TO PROCESS

Activity 24 – Looking Back

Look at your answers once again in Activity 1 “Emergency! Emergency! What Will I do?”

1. Did you do the proper first aid procedure for each injury?
2. Which injury were you confident in giving first aid? Why do say so?
3. Which injury were you not confident in giving first aid? Why do you say so?

WHAT TO REFLECT ON AND UNDERSTAND

Activity 25 – First Aid Challenge

The class will be divided into five groups and will play “First Aid Challenge”. Each group will go to five stations which contains a specific injury. The group shall perform the proper first aid procedure. Each group will assign a different victim for each station so that everyone will be given the chance to experience being a victim and a first aider. Be sure to master all the first aid procedures and apply the principles of first aid and emergency because you cannot proceed to the next station if your procedure is wrong. The group with the shortest time to finish the challenge will get the highest score. Good luck!!!

1. Did you enjoy the activity?
2. Why did you lose or win in the game?
3. What important thing did you learn in the game?
4. What are the common unintentional injuries that may happen in school?
5. Why is it important to give correct first aid?

Activity 26 – “Can I Be?”

1. Can a grade 9 student be a first aider? Why and how?
2. Can any member of your family be a first aider? Why and how?
3. Can an ordinary citizen in your community be a first aider? Why and how?
4. Can we all be first aiders? Why and how?

WHAT TO TRANSFER

Choose one between the two activities.

Activity 27 – Fully Packed

Draw a cartoon/comic strip showing a person ready to help other people through his/her knowledge and skills in first aid. Write or draw the things, qualities, information, skills that s/he should have in applying first aid.

Criteria: Clarity, Completeness and Creativity

Activity 28 – “Let’s Go and Let’s Do!”

Performance Task through Role Playing, Pantomime or Dramatization

Scenario:

In one household, things are not properly arranged. Knives are put in a place where children can easily reach. Fruit and vegetable peelings are not properly thrown. Detergent bars and other laundry materials have no labels.

A child is playing in the livingroom while the mother is cooking.

1. Present one injury that can possibly happen in the situation.
2. If you were in the situation when the injury happened, how are you going to help the victim?

Criteria: Correctness of Procedures, Sincerity and Observance of Safety

SUMMARY/SYNTHESIS/FEEDBACK

Unintentional injuries cannot be avoided. It happens at any time, at any place to anybody. We must therefore practice safety awareness at all times.

But when injuries happen, appropriate knowledge and skills of the proper application on first aid could greatly help in alleviating pain, preventing further injury, prolonging and even save lives.

GLOSSARY OF TERMS

- Accident** - any unexpected event causing injury
- Airway** - the passage of air in the body
- Bandage** - any sterile cloth used to cover a wound, stop bleeding or immobilize bone injury
- Choking** - an injury in which a certain object is stuck in the throat
- Circulation** - the flow of blood
- Cravat phase** - folded triangular bandage
- Direct pressure** - a way of controlling bleeding in which compress or a bare hand is pressed directly on the wound
- Dislocation** - a condition in which bones are partially or completely pulled out from its position
- Dressing** - any sterile cloth used to cover a wound
- Electrical burn** - a burn occurring from the passage of electricity in the body
- First aid** - an initial treatment given to an injured person before the arrival of a medical practitioner
- First aider** - a person giving first aid
- Fracture** - a break or crack in the bone
- Heart attack** - a sudden obstruction of the blood supply to parts of the heart muscle
- Heat stroke** - failure of the thermostat in the brain
- Physician** - a medical doctor
- Open phase** - unfolded triangular bandage
- Poisoning** - exposure or ingestion of toxic substances

- Severe bleeding** - serious bleeding that can cause blood loss
- Shock** - a life-threatening condition characterized by rapid pulse, paleness, coldness, and sweating
- Sprain** -an injury to the ligaments, tendons and muscles due to overstretching, over wrenching or sudden movement
- Sterile** - clean, germ-free
- Strain** - an injury to the ligaments, tendons and muscles due to overstretching, overwrenching or sudden movement
- Survey** -an act of investigating or examining something
- Thermostat** - body temperature regulator
- Transport** - to move or transfer to another place
- Unintentional injuries** - injuries which are not expected; also known as accidents
- Victim** - the injured person
- Vital signs** -refers to the level of response, pulse, breathing and temperature of the victim
- Wound** - a break in the continuity of the tissue or skin

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