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While these basic first aid tips can be useful, they are not a substitute for a hands-on class. To arrange a class for your group, call 973-376-2040 or e-mail Training@SpringfieldFAS.org

In an emergency, Call 9-1-1. This will get additional help coming as soon as possible.

Do not enter a dangerous environment and become injured yourself.

Burns

Minor burns appear red and swollen. Unless they involve a large portion of the body, you can treat these at home by first flushing the area with cool water for several minutes, covering the area with a sterile bandage or cloth and using an over-the-counter pain reliever.

Moderate burns are intensely red in color and will begin to blister. Follow the same first aid procedures as for minor burns and seek medical attention.

Severe burns may be charred black or dried white. Nerve damage may result in no pain in the most severly affected areas. Remove the patient from the source of the burning without endangering yourself and Call 9-1-1 immediately. Remove any smoldering clothing and jewelry which may still be hot or may cut off circulation when hands and feet swell. Cover the burned area with a cool/moist sterile bandage or cloth. Do not apply any creams, ointments or ice, and do not break blisters. Be careful - you want to cool the burning but not the patient. Burnt skin will prevent the body from properly controlling its temperature and the patient can become hypothermic even during the summer.

Cold Emergencies

When exposed to very cold temperatures, the skin and underlaying tissues may freeze. Frostbite is most common in the extremeties - hands, feet, nose & ears. First, get the patient indoors or otherwise out of the cold. Then, places hands under the armpits to warm them slowly. Cover nose or ears with a clean, dry, gloved hand. Do not rub the areas. If they remain numb, seak medical attention. If you are unable to get immediate help, use warm (not hot) water to help rewarm the affected areas.

Choking

If the person's airway is only partially obstructed, they will still be able to speak short sentences and cough. Encourage them to continue but do nothing else. However, if the airway becomes completely blocked the person will not be able to speak or cough and will need your help. Stand behind the choking person and wrap your hands around their abdomen. Make a fist with one hand and place it just above their navel. With your other hand, grasp your fist and press in and up with a quick, forceful thrust until the obstruction is relieved. Call 9-1-1 if the patient looses conciousness.

Diabetes

If a person's blood sugar level drops too low, they will start to become confused, weak and eventually unconscious. As long as they are still concious, able to sit upright and swallow, give them sugar cubes, chocolate, a non-diet soda or fruit juice, milk or a peanut butter and jelly sandwich. If the patient becomes to weak to sit or swallow, or becomes unconcious, do not place anything in their mouth. Instead, place them on their side and Call 9-1-1.

Electrocution

Even small amounts of electricity can be deadly and even just a small mark on the skin could hide a serious internal injury. If possible, turn off the source of the electricity. If that is not possible, separate the patient from the electricity using a non-conductive material such as a plastic or wooden stick. Call 9-1-1 and treat any burns, shock or cardiac/respiratory arrest.

Eye Injuries

• Impaled objects - Do not attempt to remove the object. Instead, surround the object with large bulky dressings so that the object does not move. Also,

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cover both eyes. Even if just one eye is injured, the two eyes move together and can cause further injury.

• Foreign debris - Debris such as dirt, sand, and sawdust can cause blinking and tearing which will help flush the substance from the eyes. If the object remains, turn the head to the side and flush with water from the bridge of the nose letting the water run off of the opposite cheek.

Heat Emergencies

Heat exhaustion is characterized by weakness, a rapid heart beat, low blood pressure, nausea and cool, clammy skin. Loosen or remove clothing and the patient drink cool (not cold) water or a sports drink. Avoid carbonated beverages.. Afterwards, have the patient lay down and elevate their feet.

Heat shock is characterized by hot, dry skin, a rapid heart beat, rapid, swallow breathing and confusion or unconciousness. Get the patient into a cool area. Call 9-1-1 then cover with damp sheets and fan air over the patient to help cool the body.

Poisoning

Poisoning can be accidental or intentional, and can be through contact (ingesting, inhaling, injecting or touching) with a dangerous substance or simply having too much of something that is normally safe. If you know what poisoned the patient, follow the instructions on the container. If you do not know what poisoned the patient, Call 9-1-1.

Do not induce vomitting unless instructed to do so. Remove the patient's clothing if it has been exposed to the poison. Try to remove the poison by brushing it off of the patient's skin. Do not use water unless instructed as some poisons will react with the water to create something even more dangerous. If you are told to seek further medical attention, take the container that held the poison with you so the substance can be positively identified.

Nosebleed

Sit upright or lean slightly forward. Use your thumb

and forefinger to pinch your nose. Do not release the pressure for at least 10 minutes. Breathe through your mouth during this time. Call 9-1-1 if the bleeding continues or your feel lightheaded, dizzy or have a severe headache.

Minor Cuts and Scrapes

Stop the bleeding by pressing a gauze pad or clean cloth against the wound. Once bleeding stops, clean the area with mild soap and water, dry gently with a clean cloth (do not remove the dried blood) and cover with a protective bandage. If the bleeding does not stop after several minutes of applying pressure, Call 9-1-1.

<u>Seizures</u>

Try to keep the area around the patient clear of any objects that could injure further. If possible, loosen tight clothing. Once the seizure ends, try to have the patient lay on his or her side and reassure him or her. Do not put anything in the patient's mouth, whether to protect the tongue or food or drink. Do not restrain the patient.

If the patient has only one seizure and has a history of seizures, he or she may not want any further medical care. However, a first-time seizure, one seizure lasting more than five minutes and multiple seizures all require medical attention. Call 9-1-1 immediately.

Severe Bleeding

Call 9-1-1 immediately. Lay the patient down. If possible, the head should be slightly lower than the rest of the body and the area that is bleeding should be elevated above the heart. Apply steady, firm, direct pressure to the wound with sterile gauze or a clean cloth. If the first piece of gauze or cloth is soaked through, add another on top of the first but do not remove the previous layer. Once bleeding stops, keep the patient still until help arrives.

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