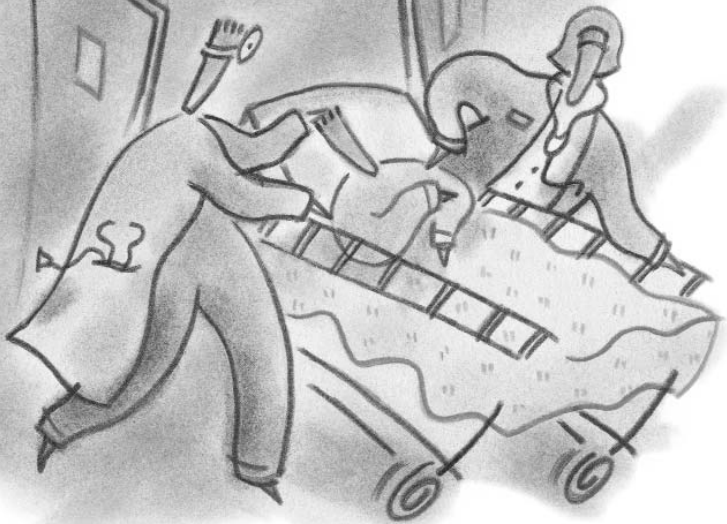


Your **first**
call for **HELP**
should always be . . .

911



Procedures For Emergency Care



EMERGENCY STEPS

Your first step in providing care is calling 9-1-1.

Be prepared to give information to the dispatcher, such as:

- Address of the emergency
- Telephone number
- Description of the problem
- Number of people injured
- Conditions of victims
- Care being provided

Do not hang up. Stay on the line with the dispatcher.

Once an emergency has been recognized, be calm and follow these steps:

Check: The scene for safety and the victim for consciousness

Call: 9-1-1

Care: For life-threatening conditions

Ensure: Your own safety before assisting others

SEIZURE

- Remove any nearby objects that may cause injury
- Loosen any tight clothing
- Once seizures stop, turn victim on side
- Call 9-1-1 if prolonged seizures or no history of seizures
- Monitor airway and breathing
- Do not give the victim anything to eat or drink
- Do not try to hold the person down
- Make sure the victim is somewhere they won't fall

DIABETIC EMERGENCY

Signs/Symptoms:

- Confusion, dizziness or disorientation
- Sweating/shakiness
- Abnormal pulse or palpitations
- Trouble breathing

Care:

- If conscious, give the victim some form of sugar (milk, juice, soda - juice is best)
- Call 9-1-1 if unconscious
- Monitor airway and breathing
- Keep the victim comfortable

POISONING & ALLERGIC REACTION

Poisoning:

- Call Poison Control 1-800-222-1222
- Follow poison control directions
- Do not induce vomiting unless directed to do so
- Monitor airway and breathing
- Keep the victim comfortable

Allergic Reaction:

- If difficulty breathing, call 9-1-1
- Ask the victim if he/she carries medication, if so, assist in administration
- Monitor airway and breathing
- Keep the victim resting quietly

STROKE

Signs/Symptoms:

- Confusion, dizziness, or disorientation
- Paralysis or weakness to the face, arm or leg; usually on one side
- Difficulty with speech, vision or walking
- Severe headache

Care:

- Call 9-1-1
- Know the time of onset of symptoms
- Consider low blood sugar if diabetic, treat if low
- Do not give the victim anything to eat or drink
- Monitor airway and breathing
- Keep the victim comfortable

HEAT & COLD RELATED EMERGENCY

Heat Emergency:

- Move the victim to a cool place
- Loosen or remove clothing
- Wet the skin and fan the victim
- Give small amounts of water if the victim is conscious
- Call 9-1-1 if the victim's condition does not improve

Cold Emergency:

- Move the victim to a warm place
- Remove wet clothing and cover with blankets
- Warm the victim
- Give small amounts of warm fluid, non-caffeinated
- Call 9-1-1 if the victim's condition does not improve

BONE & JOINT INJURY

Head/Neck/Back:

■ **Minimize movement!**

- Place your hands on both sides of the victim's head
- Tell the victim to respond verbally to questions and avoid nodding/shaking head
- Have the victim remain in the position found
- Maintain an open airway and continue to check for breathing
- Do not remove headgear

Extremities:

- Support the injured area above and below the injury site
- Do not move the injured part
- Splint an injury only if the victim must be moved
- Splint an injured limb in the position you find it

BURN

Stop: The burning by removing the victim from the heat source

Cool: The burn by flushing with large amounts of cool water for a minimum of 10 minutes (This will provide some comfort to the area)

Cover: The area with a sterile dressing

- Do not break blisters
- Do not apply ointments or creams
- Flush chemical burns for a minimum of 15 minutes

Call 9-1-1 for:

- Burns that cause breathing difficulty or signs of burns around the mouth/nose
- Burns covering more than one body part

- Burns on the head, neck, hands, feet or genitals
- Burns on a child or elderly person
- Burns on victims with medical conditions
- Burns resulting from chemicals, explosions or electricity

BLEEDING & SHOCK

Bleeding:

- Cover the wound with a dressing and apply direct pressure
- Do not remove the dressing. If it soaks through, add more on top
- Elevate the injured area above the level of the heart if you do not suspect broken bones
- Cover snugly with a bandage
- If bleeding does not stop, call 9-1-1 and apply more direct pressure

Shock: May develop from any serious injury or illness.

To help prevent shock:

- Monitor airway and breathing
- Help the victim rest comfortably
- Elevate the legs about 12" if a head/neck/back injury or broken bones are not suspected
- Keep the victim from getting chilled or overheated
- Do not give food or drink

HEART ATTACK

Signs/Symptoms:

- Persistent chest discomfort/pain: Mild to intense pressure, tightness, burning or squeezing in the chest that is not relieved by resting, changing position or taking oral medication
- Radiating pain: Pain spreading to the neck, jaw, shoulders, abdomen or arms
- Breathing difficulty: Shortness of breath, rapid breathing, noisy breathing
- Changes in pulse rate: Faster, slower or irregular
- Skin appearance: Pale, bluish, moist, sweating profusely
- Psychological effects: Anxiety, nervousness, feeling of impending doom

Care:

- Call 9-1-1
- Monitor airway and breathing
- Strongly consider taking 4 chewable baby aspirin if available
- Do not give the victim anything to eat or drink
- Keep the victim comfortable
- Restrict activity by not moving around

LOSS OF BREATHING

Open the airway:

- Tilt the head back with one hand on the forehead and one on the chin
- If you suspect head, neck or back injury

Check breathing:

- Look, listen and feel for breathing for about 5 seconds

No breathing:

- Give 2 breaths by pinching the nose shut and breathing into the victim's mouth until the chest rises
- Release the nose in between breaths

Note: If the chest does not rise, See **CHOKING SECTION**

Check for signs of life:

- Coughing, moaning, movement

Life signs absent:

- Provide CPR

Life signs present:

- Continue breaths 1 every 5 seconds
- Check life signs and breathing once a minute

CHOKING

Conscious:

- If the victim **can** cough, speak or breathe, encourage them to cough
- If the victim **can not** cough, speak or breathe, the airway is blocked:
 - Stand behind the victim
 - Make a fist with one hand and place the thumb side of fist against the middle of the victim's abdomen, just above the belly button
 - Grab the fist with the other hand and give quick, upward thrusts

Unconscious:

- Open the victim's airway and check for breathing for about 5 sec.
- If the victim is not breathing, give 2 rescue breaths
- If the breaths do not go in, reposition the airway and give 2 rescue breaths again.
- If breaths still do not go in, assume the airway is blocked:
 - Give 15 chest compressions
 - Look for a foreign object by opening the victim's mouth
 - Give 2 rescue breaths
 - Continue cycle of chest compressions, foreign object check and rescue breaths

Note: See **CPR SECTION** for chest compression instructions

ADULT CPR

After completing the LOSS OF BREATHING SECTION, begin CPR as follows:

- Find the notch at the lower end of the victim's breastbone
- Place the heel of one hand next to and above this notch, on the center of the breastbone. Place your other hand on top.
- Position your shoulders directly over your hands
- Compress the victim's chest 15 times, about 2" deep
- Give 2 breaths
- Repeat. Recheck for signs of breathing and life signs after about 1 minute:
 - No breathing or life signs: Continue CPR
 - No breathing but life signs present: Continue breaths only

Make your **first**
call **ALWAYS TO . . . 911**

Start your EMS TEAM working for you immediately

WHEN YOU MAKE AN EMERGENCY CALL:

1. Stay calm.
2. Promptly state the nature of the emergency:
Medical, Fire, or Crime
3. Give directions and any important details
4. Stay on the line until the dispatcher has all of
the information.

****This information is not a substitute for
First Aid and CPR training.***

Learn CPR and First Aid!



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