



EMERGENCY PREPAREDNESS PLAN



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**Emergency Preparedness Plan
Cub Scouts Pack # 3947 - Doha, Qatar**

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Emergency Contacts

Hospitals

American Hospital:	442-1999	Doha Clinic:	432-7300
Hamad General Hospital:	439-2222	Qatar Medical Centre:	444-0606
Dukhan Hospital:	471-1334	Messaieed Hospital:	477-0701

Emergency Services

Fire Department:	999	Police Department:	999
Ambulance	999		

Embassies

Britain / UK:	442-1991	Germany:	487-6959
India:	467-2021	Jordan:	483-2202
United States:	488-4101		

Miscellaneous

BSA Direct Service Council 972-580-2406



Class I Health Information

The following information of note is contained in the Class I Personal Health History:

Allergies

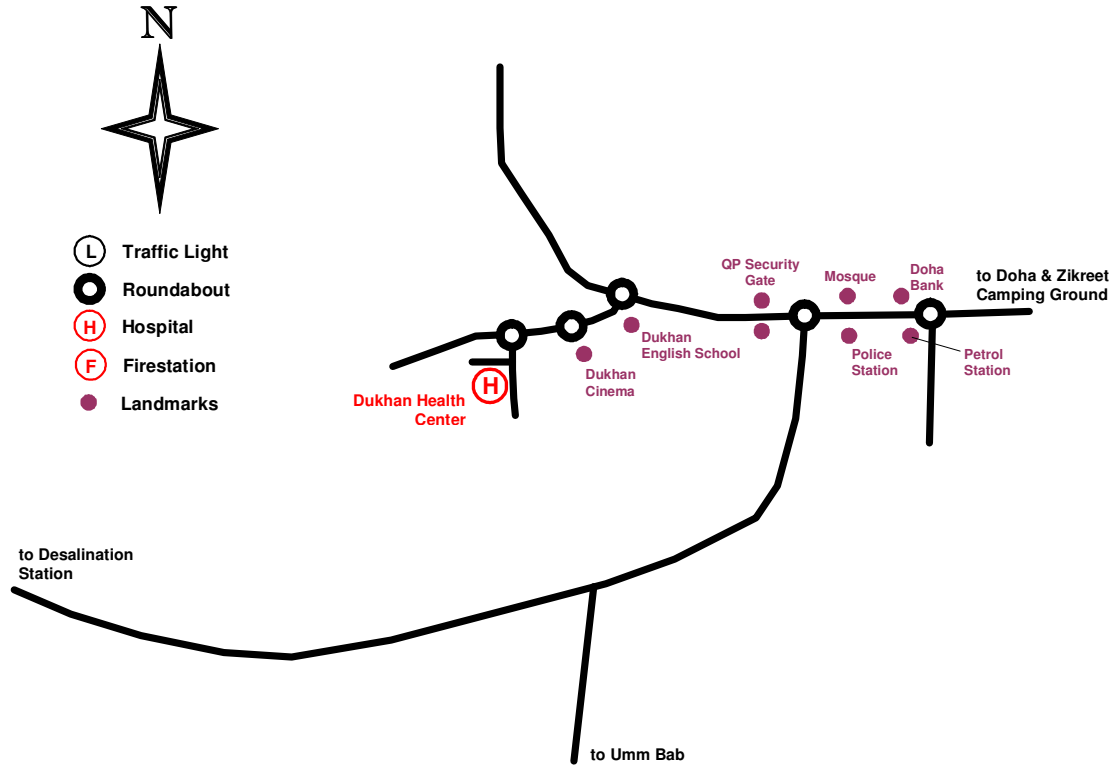
Name	Den	Allergic to:
Patrick	Tigers 2	Mosquitos
Aaron	Wolf Den 1	Amoxicillin, penicillin
Joel	Wolf Den 1	Augmentin (medicine)
Kobi	Bear Den 4	Peanuts, peanut butter, milk
Christos	Web I	Amoxcil / suprax, wheat / gluten, milk
Christopher	Web I	GGPD (sulfa, aspirin)
Nasser	Web II Dragon	Penicillin
Evan	Web II Dragon	Penicillin
Tanner	Web II Cobra	Milk (former, seems to have cleared up)

General Info

Name	Den	Description
Sam	Tigers 2	BEGINNING swimmer, hesitant to enter water over his head
Aaron	Wolf Den 1	Asthma
Dalton	Bear Den 3	Asthma
Kobi	Bear Den 4	Asthma
Shannon	Web I	Convulsion / Seizure (once, 6 yrs ago)
Majed	Web II Cobra	Slight tendency for nosebleed in dry environment or high altitude



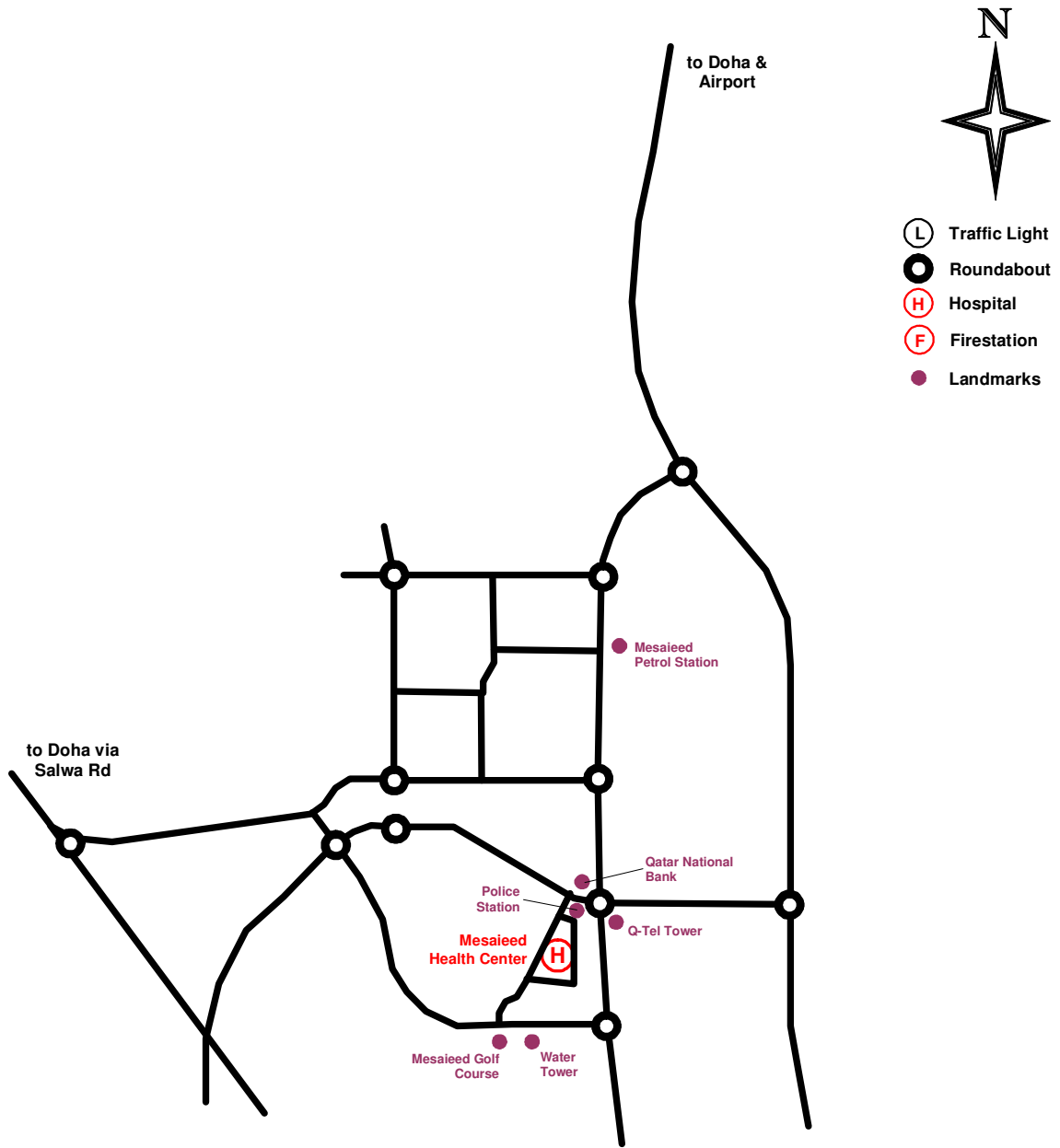
City Map - Dukhan



Note: The Dukhan Health Center & Emergency Room is inside a QP security compound. If you are need to take a person to the Dukhan Emergency Room, contact the Dukhan Health Center (471-1334, 471-6604, or 471-1611) to inform them of the nature of the emergency and ask them to arrange to allow you to pass through security.



City Map - Messaieed





First Aid Kit

A first aid kit stocked with the basic essentials is indispensable. Choose one sturdy and lightweight, yet large enough to hold the contents so that they are readily visible and so that any one item may be removed without unpacking the entire kit. Keep a list of contents readily available for refilling. Keep the kit in a convenient location. Make one person responsible for keeping the kit filled and available when needed. Quantities of suggested items for your first aid kit depend on the size of your group and local conditions.

Suggested First Aid Kit Contents¹

- | | |
|--|--|
| <input type="checkbox"/> Bar soap | <input type="checkbox"/> Lip balm |
| <input type="checkbox"/> 2" roller bandage | <input type="checkbox"/> Poison ivy lotion |
| <input type="checkbox"/> 1" roller bandage | <input type="checkbox"/> Small flashlight |
| <input type="checkbox"/> 3" x 3" sterile pads | <input type="checkbox"/> Absorbent cotton |
| <input type="checkbox"/> Triangular bandage | <input type="checkbox"/> Water purification tablets (iodine) |
| <input type="checkbox"/> Assorted gauze pads | <input type="checkbox"/> Safety pins |
| <input type="checkbox"/> Adhesive strips / Band-Aids | <input type="checkbox"/> Needles |
| <input type="checkbox"/> Clinical oral thermometer | <input type="checkbox"/> Paper Cups |
| <input type="checkbox"/> Scissors | <input type="checkbox"/> Foot powder |
| <input type="checkbox"/> Tweezers | <input type="checkbox"/> Instant ice packs |
| <input type="checkbox"/> Sunburn lotion | <input type="checkbox"/> Rehydration salts |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

Because of the possibility of exposure to communicable diseases, first aid kits should also include latex or vinyl gloves, plastic goggles or other eye protection, and antiseptic to be used when giving first aid to bleeding victims, as protection against possible exposure. Mouth barrier devices should be available for use during CPR.

¹ Source: Basic Adult Leader Outdoor Orientation (BALOO), 2000, Boy Scouts of America



First Aid Situations

Animal Bite

Cross-Reference:	Insect Bite	40
	Shock.....	44
	Snake Bite (Non-Poisonous).....	47
	Snake Bite (Poisonous).....	48
	Spider Bite	49

Symptoms: N/A

- First Aid:
1. Wash the bite area immediately with soap and warm water for 5 minutes to remove saliva and other debris.
 2. If the bite is deep, flush the wound with water for ten minutes to protect against infection.
 3. Dry the wound with a clean towel.
 4. If the wound is swollen, apply ice wrapped in a towel for ten minutes.
 5. Check medical records or call your doctor or health department to see the date of the last tetanus shot. Have the victim get a tetanus shot if not up-to-date.
 6. If the bite hurts, take acetaminophen, aspirin, ibuprofen, or naproxen sodium to relieve the pain.
 7. Observe the wound for a few days, checking it for infection.
 8. Report the incident to the animal control department. If you know the pet's owner, find out the date of the pet's last rabies vaccination. It should be given yearly. If the animal's immunizations are not current, arrange with the animal control department for the pet to be observed for the next 10 days to be sure it does not develop rabies.

Precautions: N/A

- Prevention:
1. Never leave a small child alone with a dog or cat, even if it's a puppy or kitten. Teething as well as excited pets have been known to bite.
 2. Teach children not to tease an animal. Tell them not to wave sticks, throw stones or pull a tail.
 3. Do not move suddenly or scream around an animal. Don't rush up to a dog until you know for sure that it is friendly. Sudden movements and loud noises can scare animals and cause them to attack.
 4. Leave pet dogs and cats alone while they are eating or sleeping.
 5. Do not feed wild animals with your hands.
 6. Do not pick up a sick or injured animal.
 7. Do not run from a strange dog.
 8. Do not keep wild animals as pets.
 9. Wear heavy boots when walking in areas snakes live.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Broken Bones (Compound)

Cross-Reference:	CPR.....	21
	Shock.....	44

Symptoms: A bone may separate partially or completely from the other half and a skin wound is also present. The bone can protrude through the skin or the skin has been cut due to the injury.

- First Aid:
1. Monitor for shock (see "Shock"), breathing, and pulse (see "CPR").
 2. Have the victim lie flat.
 3. Elevate the victim's feet 8 to 12 inches.
 4. Cover the victim with a blanket or other item to keep him or her warm.
 5. Remove clothing covering the wound. Cut clothing away or rip at seams, if necessary.
 6. To protect yourself against possible disease:
 - If available, put on disposable latex gloves. If not available, use a plastic bag, plastic wrap or many layers of gauze pads to apply direct pressure to the wound to stop the bleeding. Try not to push on the injured bone.
 7. Cover the wounded area with a clean cloth or dressing.
 8. Continue to apply pressure as long as the wound bleeds. Add new dressings over existing ones.
 9. Immobilize the injured area. A splint is a good way to immobilize the affected area, reduce pain, and prevent shock.
 - Effective splints can be made from rolled-up newspapers and magazines, an umbrella, a stick, a cane, or rolled up blankets. Place this type of item around the injury and gently hold it in place with a necktie, strip of cloth, or belt. The general rule is to splint a joint above and below the fracture.
 - Or, lightly tape or tie an injured leg to the uninjured one, putting padding between the legs, if possible.
 - Or, tape an injured arm to the chest, if the elbow is bent, or to the side if the elbow is straight, placing padding between the body and the arm.
 10. For a broken arm, make a sling out of a triangular piece of cloth. Place the forearm in it and tie the ends around the neck so the arm is resting at a 90 degree angle.
 11. Check the pulse in the limb with the splint. If you cannot find it, the splint is too tight and must be loosened at once.
 12. Check for swelling, numbness, tingling, or a blue tinge to the skin. Any of these signs indicate the splint is too tight and must be loosened right away to prevent permanent injury.

- Precautions:
1. Do not try to set a broken bone yourself.
 2. Do not try to push a protruding bone back under the skin.
 3. Take care not to push on the injured bone.

- Prevention:
1. Wear the right protective gear for the activity. Items to wear include a helmet, shoulder, knee and wrist pads, and a mouth guard.
 2. Wear a seatbelt. Don't start the engine until everyone has buckled up.
 3. Exercise. Moderate, weight-bearing exercise such as walking, aerobics, and dancing increases bone mass.



4. Get enough calcium. One thousand to 1,500 mg of calcium is recommended per day. You can get this amount of calcium through good food sources such as:
 - Non-fat or low-fat milk products
 - Sardines
 - Spinach, broccoli, or other dark leafy green vegetables
 - Calcium-fortified foods such as some orange juices, apple juices, breads, and cereals

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Broken Bones (Simple)

Cross-Reference: Broken Bones (Compound)..... 11
Shock..... 44

Symptoms: N/A

First Aid:

1. Immobilize the injured area. A splint is a good way to immobilize the affected area, reduce pain, and prevent shock.
 - Effective splints can be made from rolled-up newspapers and magazines, an umbrella, a stick, a cane, or rolled up blankets. Place this type of item around the injury and gently hold it in place with a necktie, strip of cloth, or belt. The general rule is to splint a joint above and below the fracture.
 - Or, lightly tape or tie an injured leg to the uninjured one, putting padding between the legs, if possible.
 - Or, tape an injured arm to the chest, if the elbow is bent, or to the side if the elbow is straight, placing padding between the body and the arm.
2. Elevate the injured body part, if possible.
3. Keep the person quiet to avoid moving the injured area.
4. Apply ice to the injured area to help reduce swelling and inflammation, unless there is an open wound.
5. Take aspirin, ibuprofen, or naproxen sodium to reduce pain and swelling. Acetaminophen will help the pain, but not the swelling.

Precautions:

1. Do not apply ice to an open wound. See “Broken Bones (Compound)”.
2. Do not try to set a broken bone yourself.
3. Take care not to push on the injured bone.

Prevention:

1. Wear the right protective gear for the activity. Items to wear include a helmet, shoulder, knee and wrist pads, and a mouth guard.
2. Wear a seatbelt. Don't start the engine until everyone has buckled up.
3. Exercise. Moderate, weight-bearing exercise such as walking, aerobics, and dancing increases bone mass.
4. Get enough calcium. One thousand to 1,500 mg of calcium is recommended per day. You can get this amount of calcium through good food sources such as:
 - Non-fat or low-fat milk products
 - Sardines
 - Spinach, broccoli, or other dark leafy green vegetables
 - Calcium-fortified foods such as some orange juices, apple juices, breads, and cereals

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Broken Tooth

Cross-Reference: N/A

Symptoms: N/A

First Aid: If the tooth is broken:

1. Apply a cold compress to the area to reduce swelling.
2. Save any broken tooth fragments. Put them in a jar with milk or wrap them in a wet cloth.
3. See a dentist as soon as possible.

If a tooth is knocked out:

1. Rinse the tooth with clear water.
2. If possible (and if the victim is alert), gently put it back in the socket or hold it under your tongue. Otherwise, put the tooth in a jar with milk or wrap in a wet cloth.
3. If the gum is bleeding, hold a gauze pad, a clear handkerchief, or a tissue tightly in place over the wound.
4. Try to get to a dentist within 30 minutes of the accident.

Precautions: N/A

- Prevention:
1. Brush with a fluoride toothpaste twice a day.
 2. Floss daily.
 3. See a dentist for regular dental cleanings and check-ups.
 4. Don't chew ice, pens, or pencils.
 5. Don't use teeth to open paper clips or function as tools.
 6. If you grind your teeth at night, ask your dentist if you should be fitted for a bite plate to prevent tooth grinding.
 7. If you play contact sports like football or hockey, wear a protective mouth guard.
 8. Always wear a seat belt when riding in a car.
 9. Avoid sucking on lemons or chewing aspirin or vitamin C tablets. The acid wears away tooth enamel.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Burns (1st Degree)

Cross-Reference: N/A

Symptoms: First degree burns affect only the outer skin layer.
The area appears dry, red, and mildly swollen.
A first degree burn is painful and sensitive to touch.

First Aid:

1. If the affected area is dirty, gently wash it with soapy water.
2. Cool the area right away. Place the affected area in a container of cold water or under cold running water for at least 5 - 10 minutes or until the pain is relieved. This will also reduce the amount of skin damage.
3. Keep the area uncovered and elevated, if possible. Apply a dry dressing, if necessary.
4. Take aspirin, acetaminophen, or ibuprofen, or naproxen sodium to relieve pain.
5. Call a doctor if after 2 days you show signs of infection (fever of 101° F or higher, chills, increased redness, swelling, or pus in the infected area) or if the affected area is still painful.

Precautions:

1. Do not apply ice or cold water for too long a time. This may result in complete numbness leading to frostbite.
2. Do not use butter or other ointments (such as Vaseline).
3. Avoid using local anesthetic sprays and creams. They can slow healing and may lead to allergic reactions in some people.

Prevention: N/A

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Burns (2nd Degree)

Cross-Reference: N/A

Symptoms:

1. Second degree burns affect the skin's lower layers as well as the outer.
2. They are painful, swollen, and show redness and blisters.
3. The skin also develops a weepy, watery surface.

First Aid:

1. Immerse the affected area in cold (not ice) water until the pain subsides.
2. Dip clean cloths in cold water, wring them out, and apply them over and over again to the burned area for as long as an hour. Blot the area dry. Do not rub.
3. Avoid applying antiseptic sprays, ointments, and creams.
4. Once dried, dress the area with a single layer of loose gauze that does not stick to the skin. Hold in place with bandage tape that is placed well away from the burned area.
5. Change the dressing the next day and every two days after that.
6. Prop the burnt area higher than the rest of the body, if possible.
7. Call a doctor if there are signs of infection (fever of 101° F or higher, chills, increased redness and swelling, and pus) or if the burn shows no sign of improvement after 2 days.

Precautions:

1. Take care not to break any blisters that have formed.
2. Do not apply any type of ointment, cream, butter, or antiseptic sprays on the burn.

Prevention: N/A

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>
Boy Scout Handbook, Boy Scouts of America, 1998



Burns (3rd Degree)

Cross-Reference: CPR21
Shock.....44

Symptoms:

1. Third degree burns affect the outer and deeper skin layers as well as any underlying tissue and organs.
2. They appear black and white and charred.
3. The skin is swollen and underlying tissue is often exposed.
4. The pain felt with third degree burns may be less than with first or second degree burns. There can also be no pain at all when nerve endings are destroyed.
5. Pain may be felt around the margin of the affected area.

First Aid:

1. Stop the burn source. For example, turn off electric current, "stop, drop, and roll" on the floor or ground, or douse with cold water or wrap the victim in a cotton blanket or rug to put out flames.
2. Monitor for breathing and pulse (see "CPR") and shock (see "Shock".)
3. Remove clothing, but only if it doesn't stick to burned area. Cut unstuck clothing away. Don't pull it off.
4. Remove jewelry, if possible.
5. If the arm(s) or leg(s) are burned, elevate them above heart level. If the burn is on the face, sit up or have the victim sit up.
6. Cool the burned skin with cool water, not ice. Don't use cold water on large, third degree burns. Don't immerse in ice water. Use cold cloth compresses on burns of the hands, feet, and face, but don't leave on longer than 15 - 20 minutes.
7. Cover the burned area with a clean cloth or sterile dressing. Don't use plastic.
8. Calm the victim.

Precautions:

1. Do not use cold water on large 3rd degree burns.
2. Do not immerse in ice water.
3. Do not apply any type of ointment, cream, butter, or antiseptic sprays on the burn.
4. Do not give the victim anything to drink or eat.

Prevention: N/A

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>
Boy Scout Handbook, Boy Scouts of America, 1998



Choking

Cross-Reference: Heimlich Maneuver38
Rescue Breathing44

Symptoms: Choking is indicated by the *Universal Distress Signal* (hands clutching the throat). A choking victim will typically do this by reflex, even if they do not know it is the Universal Distress Signal.

First Aid: Adult, Conscious:

1. DO NOT INTERFERE if the victim is able to speak, cough, or breathe.
2. If the victim cannot speak, cough or breathe, give abdominal thrusts (the *Heimlich Maneuver*).
 - Reach around the victim's waist. Position one clenched fist above the navel and below the rib cage. Grasp the fist with the other hand. Pull the clenched fist sharply and directly backward and upward under the rib cage 6 to 10 times quickly.
 - In case of extreme obesity or late pregnancy, give chest thrusts.
 - Stand behind the victim. Place the thumb of the left fist against the middle of the breastbone, not below it. Grab the fist with right hand. Squeeze chest 4 times quickly.
3. Continue uninterrupted until the obstruction is relieved or advanced life support is available. In either case, the victim should be examined by a physician as soon as possible.

Adult, Unconscious:

1. Position victim on back, arms by side.
2. Perform finger sweep to try to remove the foreign body.
3. Perform rescue breathing. If unsuccessful, give 6 - 10 abdominal thrusts (the *Heimlich Maneuver*).
4. Repeat sequence: perform finger sweep, attempt rescue breathing, perform abdominal thrusts, until successful.
5. Continue uninterrupted until obstruction is removed or advanced life support is available. When successful, have the victim examined by a physician as soon as possible.
6. After obstruction is removed, begin CPR, if necessary.

Child, Conscious:

1. DO NOT INTERFERE if the victim is able to speak, cough, or breathe.
2. If the victim cannot speak, cough or breathe, give abdominal thrusts (the *Heimlich Maneuver*).
 - Reach around the victim's waist. Position one clenched fist above the navel and below the rib cage. Grasp the fist with the other hand. Pull the clenched fist sharply and directly backward and upward under the rib cage 6 to 10 times quickly.
 - In case of extreme obesity, give chest thrusts.
 - Stand behind the victim. Place the thumb of the left fist against the middle of the breastbone, not below it. Grab the fist with right



- hand. Squeeze chest 4 times quickly.
3. Continue uninterrupted until the obstruction is relieved or advanced life support is available. In either case, the victim should be examined by a physician as soon as possible.

Child, Unconscious:

1. Position victim on back, arms by side.
2. Perform finger sweep to try to remove the foreign body.
3. Perform rescue breathing. If unsuccessful, give 6 - 10 abdominal thrusts (the *Heimlich Maneuver*).
4. Repeat sequence: perform finger sweep, attempt rescue breathing, perform abdominal thrusts, until successful.
5. Continue uninterrupted until obstruction is removed or advanced life support is available. When successful, have the victim examined by a physician as soon as possible.
6. After obstruction is removed, begin CPR, if necessary.

Infant, Conscious:

1. Support the head and neck with one hand. Straddle the infant face down over your forearm, head lower than trunk, supported on your thigh.
2. Deliver four back blows, forcefully, with the heel of the hand between the infant's shoulder blades.
3. While supporting the head, immediately sandwich the infant between your hands and turn onto its back, head lower than trunk.
4. Using 2 or 3 fingers, deliver four thrusts in the sternal (breastbone) region. Depress the sternum $\frac{1}{2}$ to 1 inch for each thrust. Avoid the tip of the sternum.
5. Repeat both back blows and chest thrusts until foreign body is expelled or the infant becomes unconscious.
6. ALTERNATE METHOD: Lay the infant face down on your lap, head lower than trunk and firmly supported. Perform 4 back blows. Turn infant on its back as a unit and perform 4 chest thrusts.

Infant, Unconscious:

1. Perform tongue-jaw lift. If you see the foreign body, remove it.
2. Attempt rescue breathing.
3. Support the head and neck with one hand. Straddle the infant face down over your forearm, head lower than trunk, supported on your thigh.
4. Deliver four back blows, forcefully, with the heel of the hand between the infant's shoulder blades.
5. While supporting the head, immediately sandwich the infant between your hands and turn onto its back, head lower than trunk.
6. Using 2 or 3 fingers, deliver four thrusts in the sternal (breastbone) region. Depress the sternum $\frac{1}{2}$ to 1 inch for each thrust. Avoid the tip of the sternum.
7. Repeat both back blows and chest thrusts until foreign body is expelled or the infant becomes unconscious. After each sequence of back blows and chest thrusts, look for the foreign body and, if visible,



remove it.

8. Attempt rescue breathing. Repeat steps 4 - 8.
9. If foreign body is removed and victim is not breathing, begin CPR.

Precautions:

1. DO NOT INTERFERE if the victim is able to speak, cough, or breathe.
2. Take care not to be overly forceful in performing the *Heimlich Maneuver* on children.
3. Do not perform a blind finger sweep on infants & children up to 8 years old. Instead, perform a tongue-jaw lift and remove foreign body only if you can see it.
4. Abdominal thrusts are not recommended for infants.

Prevention:

N/A

Source:

Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



CPR (Cardio-Pulmonary Resuscitation)

Cross-Reference: Rescue Breathing44

Symptoms: N/A

First Aid: **CPR SHOULD ONLY BE PERFORMED BY A PROPERLY TRAINED PERSON.**

IF YOU SUSPECT A NECK OR BACK INJURY, DO NOT MOVE THE VICTIM. SEEK EMERGENCY MEDICAL ATTENTION!

CPR techniques include three basic rescue skills, the ABCs of CPR:

- **A**irway, **B**reathing, **C**irculation.

Airway

A key action for successful resuscitation is immediate opening of the airway by positioning the head properly. Remember that the back of the tongue and the epiglottis are the most common causes of airway obstruction in the unconscious victim.

1. Tilt the head back and moving the lower jaw (chin) forward. This lifts the tongue and the epiglottis from the back of the throat and usually opens the airway.

Breathing

When breathing stops, the body has only the oxygen remaining in the lungs and bloodstream. Cardiac arrest and death quickly follow. Mouth-to-mouth rescue breathing is the quickest way to get oxygen into the victim's lungs. There is more than enough oxygen in the air you breathe into the victim to supply the victim's needs.

2. Perform rescue breathing until the victim can breathe on his or her own or until trained professionals take over.

Circulation

Chest compressions can maintain some blood flow to the lungs, brain, coronary arteries, and other major organs. When chest compressions are performed, rescue breathing should also be performed.

3. Perform chest compressions until the victim regains a pulse or until trained professionals take over.

Recovery Position

4. Place the victim in the recovery position once he / she begins breathing and regains a pulse.

Precautions: CPR should only be performed by a properly trained person.

Prevention:

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Cuts / Punctures (Minor)

Cross-Reference: N/A

Symptoms:

1. Cuts slice the skin open. Close a cut so it won't get infected.
2. Scrapes hurt only the top part of your skin. They can hurt more than cuts, but they heal quicker.
3. Punctures stab deep. Leave punctures open so they won't get infected.

First Aid:

For cuts & minor punctures:

1. Press on the cut to help slow down the bleeding. You may have to apply pressure for 10 minutes or more for a bad cut. Contact a doctor for stitches, if necessary.
2. Apply a bandage.
 - Leave the bandage on for 24 hours.
 - Change the bandage every day or two or more often if you need to.
 - Be careful when removing the bandage so as not to make the cut bleed again. If you have used gauze, wet it before you pull it off.
3. Take aspirin, acetaminophen, ibuprofen, or naproxen sodium for pain. Don't take aspirin every day unless your doctor tells you to, because taking it too much can keep the blood from clotting.
4. Call your doctor or local health department if you have not had a tetanus shot in the last 10 years. (5 years for a deep puncture.)

For punctures that cause minor bleeding:

1. Let the wound bleed to clean itself out.
2. Remove the object that caused the puncture using clean tweezers. Hold a lit match to the ends of the tweezers to sterilize them.
3. Wash the wound with warm water and soap, or take a bath or shower to clean it.
4. Leave the wound open. Cover it with a bandage if it is big or still bleeds a little.
5. Soak the wound in warm, soapy water 2 to 3 times a day.

Precautions:

1. Do not pull anything out of a puncture wound if blood gushes from it, or if it has been bleeding badly. Seek emergency care.

Prevention: N/A

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Cuts / Punctures (Severe)

Cross-Reference: N/A

Symptoms: N/A

First Aid:

1. Put on latex gloves from your first aid kit.
2. Using a clean cloth or sterile dressing as a pad, use the palm of your hand to apply firm pressure directly over the wound. If clean material is not available, use a neckerchief, shirt, or whatever else is within reach.
3. While pressing on the wound, raise the injury above the level of the victim's heart.
4. Direct pressure is almost always the treatment of choice. Bleeding can sometimes be further slowed by pressing hard on an arterial pressure point in the victim's armpit or groin. Try using pressure points if direct pressure over broken bones will cause further injury or if the nature of the wound makes direct pressure ineffective.
5. Once bleeding has stopped, hold the pad in place using a cravat bandage, athletic wrap, etc. Bind the pad firmly, but not so tight as to cut off circulation.
6. If the bandage is on an arm or leg, periodically feel for a pulse further out on the limb. No pulse indicates that the bandage is too tight.

Precautions:

1. Do not remove a direct pressure pad that has become soaked with blood. Instead, place a fresh pad over the first one and continue to apply pressure.
2. If you have come into contact with blood or other bodily fluids, wash your skin with soap and water or cleanse with an antiseptic as soon as possible, and change out of clothing that might have come in contact with blood.

Prevention: N/A

Source: Boy Scout Handbook, Boy Scouts of America, 1998



Dislocation

Cross-Reference: Shock.....44

Symptoms:

1. A dislocation is a separation of the end of a bone and the joint it meets. Bones that touch in the joints sometimes separate when they are overstressed. A dislocated joint will be:
 - Misshapen
 - Painful
 - Swollen
 - Discolored

First Aid:

1. It is very difficult to tell a dislocation from a broken bone. Seek medical attention if you suspect a dislocation.
2. Monitor for signs of shock & treat accordingly.
3. Without moving the injured area, remove clothing and jewelry (if any) that covers the injured area. You may have to cut clothing off.
4. Check for internal problems to blood flow and nerves. [Note: Be prepared to report these signs to emergency personnel.]
 - a. Feel for a pulse: at the wrist for an injury to the arm; just above the inside ankle bone for an injury to the leg.
 - b. Lightly touch the victim's fingers or toes and ask if the victim feels your touch.
 - c. Ask if the victim can move or wiggle his or her fingers or toes.
5. Keep the injured body part from moving:
 - Apply a splint in the position in which the injury was found. Try not to move the injured area as you splint.
 - If objects for supports are not available, tie the injured body part to an uninjured area of the body to immobilize the injury. Keep the injured body part in the same position you found it.
 - Put a dislocated arm or shoulder in a sling.

Precautions:

1. Do not try to straighten a misshapen bone or joint.
2. Do not try to put a dislocated bone back into its socket.
3. Do not give the injured person anything to eat or drink until after he or she has been treated. If the dislocated joint has to be repositioned, the person may have to be given anesthesia.

Prevention:

1. Protect a previously injured joint by wrapping it with an elastic bandage or tape.
2. Wear protective pads (shoulder, wrist, knee, etc.) when taking part in contact sports or in other activities in which you may fall or otherwise get injured.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Drowning

Cross-Reference: CPR21
Rescue Breathing44

Symptoms: N/A

First Aid:

1. First try to reach the person with a pole or extended hand. If you can't reach him or her, use a life preserver or rope.
2. If the person is further than you can reach and you decide to enter the water, approach the person carefully and from behind. Talk to the person, trying to calm him or her as you slowly move closer. Get the person to talk. Ask if everything is all right and tell him or her to do as you instruct.
3. Grab a piece of clothing or cup one hand under the person's chin and pull the person on his or her back to shore.
4. Tell the person to extend his or her arms away from you. Continue talking to the person to reassure him or her.
5. Monitor for breathing and pulse.
6. If no breathing and no pulse, do CPR.
7. If no breathing, but there is a pulse, do rescue breathing.
8. If victim is breathing and has a pulse, put him or her in the recovery position. This position keeps the airway clear and allows swallowed water or vomit to drain.
9. Take cold, wet clothes off the victim and cover him or her with something warm to prevent hypothermia.

Precautions: N/A

Prevention: For Children:

1. Never leave a child alone near water, swimming pools. or any large container of water.
2. Never turn away from an infant in a baby bathtub or one sitting in a bathtub "supporting ring". A child can drown in mere seconds.
3. Teach your child to swim. Classes for children as young as six months teach them how to kick so if they fall in the water, they can break through the water surface.
4. Tell your children never to swim alone and never to swim too far from shore without the company of an experienced adult swimmer.
5. Warn your children to always check the water depth before diving in.
6. Build a secure fence around swimming pools and install self-closing and self-latching gates. Keep the gates are locked.
7. Make sure neighbors have high fences with locked gates around their pools.
8. Consider a cordless phone for outdoor use so you can call 999 right away in the event of emergency.
9. Keep young children out of the bathroom unless supervised by an adult. Put child-proof handles on door knobs, if necessary.
10. Take CPR and water safety courses.



For Adults:

1. Swim, when possible, in sight of a lifeguard.
2. Use the “buddy system”. Never swim alone at the beach or in a swimming pool. Someone should be nearby in case you suffer a leg cramp or other potential emergency.
3. Never swim alone in unknown waters.
4. Never sit alone in a hot tub.
5. Do not immerse yourself in a hot tub if you've had any alcoholic drinks. You could fall asleep in the warm, relaxing water, slip under the surface and drown.
6. Learn to swim.
7. If you can't swim, always wear a personal flotation device when you enter a lake, a pool, or ride in a boat.
8. Always check the depth of the water before diving. It should be at least 9 feet deep.
9. Take a CPR and water safety course.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Drug Overdose

Cross-Reference: CPR21
Rescue Breathing44

Symptoms:

1. Abnormal breathing	7. Reddish face
2. Slurred speech	8. Heavy sweating
3. Lack of coordination	9. Drowsiness
4. Slow or rapid pulse	10. Delusions and/or hallucinations
5. Low or elevated body temp	11. Unconsciousness which may lead to coma
6. Enlarged or small eye pupils	

First Aid:

1. If the victim is not breathing and has no pulse, perform CPR.
2. If the victim is not breathing but has a pulse, perform rescue breathing.
3. Get emergency care and call Poison Control Center. Be prepared to tell the PCC:
 - a. The name of the medication or drug, if known.
 - b. The amount of the drug taken, if known (number of pills, or amount of liquid you suspect was swallowed, etc.)
 - c. When the medication or drug was taken
 - d. The person's age, gender and weight
 - e. How the person is feeling and reacting
 - f. Any medical problems the person has
4. Follow the Poison Control Center's instructions.

If instructed to induce vomiting:

1. Approach the victim calmly and carefully.
2. Give the person syrup of ipecac as instructed. General guidelines are:
 - One tablespoon to children 1 - 6 years and two tablespoons to those older than 6 years followed by a large glass of water or milk.
3. Walk the person around to help the ipecac work faster and to keep him or her awake.
4. Give syrup of ipecac again in 20 minutes if the person has not yet vomited.
5. If syrup of ipecac is not available, touch the back of the person's throat with a finger or spoon.
6. After vomiting begins, continue giving clear fluids until the vomited material is clear.
7. When the vomiting has stopped, give nothing by mouth for 2 hours to allow the stomach to rest.

Precautions: N/A

Prevention: Medication Overdose:

1. Never take a medicine prescribed for someone else.
2. Never give or take medication in the dark. Before each dose, always read the label on the bottle to be certain it is the correct medication.
3. Always tell the doctor of any previous side effects or adverse reactions to medication as well as new and unusual symptoms that occur after



- taking the medicine.
4. Always store medications in bottles with child-proof lids and place those bottles on high shelves, out of a child's reach, or in locked cabinets.
 5. Take the prescribed dose, not more.
 6. Keep medications in their original containers.

Illicit Drug Overdose:

1. Set a good example for your children by not using drugs yourself.
2. Teach your child to say "NO" to drugs and alcohol. Explain the dangers of drug use, including the risk of AIDS.
3. Get to know your children's friends and their parents.
4. Know where your children are and who they are with.
5. Listen to your children and help them to express their feelings and fears.
6. Encourage your children to engage in healthy activities - sports, scouting, community-based youth programs, and volunteer work.
7. Learn to recognize the signs of drug and alcohol abuse.

Source:

Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Eye Injury

Cross-Reference: N/A

Symptoms: N/A

First Aid:

Foreign Object in Eye:

1. Do not try to remove object.
2. Do not press on, touch, or rub eye(s).
3. Wash hands with soap and water.
4. Cover the affected eye with a paper cup or other clean object that will not touch the eye or the foreign object. Hold the paper cup in place with tape without putting pressure on the eye or the foreign object.
5. Gently cover unaffected eye as well with a clean bandage and tape. This will help to keep the affected eye from moving. [Note: If you are alone, do not cover the unaffected eye, but try to keep it from moving side to side or up and down. Call for help.]

Severe Blow to Eye:

1. Close the eye.
2. Put a cold compress over the injured area, not directly on, the eye. You can use ice in a plastic bag or wrapped in a cloth or a bag of frozen vegetables.
3. Do not use firm pressure.
4. Keep the victim lying down with eyes closed, if possible.

Chemicals in Eye:

1. Flush the eye with water immediately.
2. Have the victim lie down and turn his or her head to the side with the affected eye lower than the other eye.
3. Hold the affected eye open with your thumb and forefinger.
4. Pour large quantities of warm (not hot) water, from a pitcher or other clean container, over the entire eye starting at the inside corner and downward to the outside corner. This lets the water drain away from the body and keeps it from getting in the other eye. Continue for at least 10 minutes, 30 minutes is better.
5. Loosely bandage the eye with sterile cloth and tape.
6. Do not touch the eye.
7. If both eyes are affected, pour water over both eyes at the same time or quickly alternate the above procedure from one eye to another.
8. Or, place the victim's face in a sink or container filled with warm water. Have him or her move his or her eyelids up and down. Do this procedure on yourself if you are the victim and are alone.
9. You can also use industrial eye solutions, if available.

Precautions: N/A

Prevention: 1. Wear protective plastic glasses during sports and other potentially dangerous activities.



2. Be careful when using harsh chemicals. Wear rubber gloves and protective glasses. Don't rub your eyes if you've touched harsh chemicals. Wash your hands. Turn your head away from chemical vapors so as not to let any get into your eyes.
3. Don't allow a child to stick his or her head out of the window of a moving vehicle. Sand, insects, and other flying objects can strike the eye and irritate or damage the cornea.
4. Avoid alcohol, use a humidifier, and limit exposure to smoke, dust, and wind to help prevent dry eyes.
5. Use artificial tear drops with your doctor's okay.
6. Never stare directly at the sun, especially during a solar eclipse.
7. Wear sunglasses that block UV rays anytime you're in the sun.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Head Injury

Cross-Reference: CPR21
Rescue Breathing44

- Symptoms:
1. Loss of consciousness, confusion, drowsiness
 2. Inability to move any part of the body or weakness in an arm or leg
 3. Dent, bruise, cut or blood on the scalp
 4. Severe headache
 5. Stiff neck
 6. Vomiting
 7. Blood or fluid that comes from the mouth, nose or ear
 8. Loss of vision, blurred or double vision, pupils of unequal size
 9. Convulsions

First Aid: **IF YOU SUSPECT A NECK OR BACK INJURY, DO NOT MOVE THE VICTIM. SEEK EMERGENCY MEDICAL ATTENTION!**

1. Check for breathing and pulse. If no breathing and no pulse, do CPR.
2. If no breathing, but there is a pulse, do rescue breathing.
3. If you suspect a neck injury, do not tilt the head back or move the head or neck when you do the "Airway and Breathing" part of CPR. Instead, pull the lower jaw (chin) forward to open the airway.
4. Control bleeding. If bleeding from the scalp:
 - Control bleeding by putting pressure around the edges of the wound, not on the wound.
 - Make a ring pad (shaped like a doughnut) with a narrow bandage or narrow, but long strips of cloth.
 - Start with one end of the narrow bandage and wrap it around all four fingers on one hand until you form a loop.
 - Leave a long strip of the bandage material to weave in and around the loop so it doesn't ravel. Use this ring pad to apply pressure around the edges of the wound.
 - Don't wash the wound or apply an antiseptic or any other fluid to it.
5. If blood or pink-colored fluid is coming from the ear, nose or mouth, let it drain. Do not try to stop its flow.

If victim is unconscious longer than 5 minutes:

1. Immobilize the victim's head and neck in the position in which they were found.
 - Place rolled towels, articles of clothing, etc. on both sides of the head and necktie and wrap in place, but don't interfere with the victim's breathing.
 - If necessary, use your hands, one on each side of the victim's head to keep the head from moving.
 - Roll the victim on his or her side. This position will allow any vomit to drain and keep the airway open.
2. Monitor for breathing and pulse. (See CPR)



3. Keep the victim's head and shoulders slightly elevated if neck or spinal injury is not suspected.
4. Do not give the victim anything to drink or eat.
5. Do not elevate the victim's legs.

If victim is unconscious less than 5 minutes:

1. Lift the victim's head and shoulders if neck and spinal injury are not suspected, but don't elevate the legs.
2. Do not give victim anything to drink or eat.

Precautions:

IF YOU SUSPECT A NECK OR BACK INJURY, YOU MUST KEEP THE NECK AND/OR BACK PERFECTLY STILL UNTIL AN EMERGENCY CREW ARRIVES. DO NOT MOVE SOMEONE WITH A SUSPECTED NECK OR SPINE INJURY UNLESS THE PERSON MUST BE MOVED BECAUSE HE OR SHE IS IN DANGER. ANY MOVEMENT OF THE HEAD, NECK OR BACK COULD RESULT IN PARALYSIS OR DEATH. IMMOBILIZE THE NECK BY HOLDING THE HEAD, NECK AND SHOULDERS PERFECTLY STILL. USE BOTH HANDS, ONE ON EACH SIDE OF THE HEAD.

Prevention:

1. Wear a helmet when biking, roller-blading, horseback riding, riding in an all-terrain vehicle, or boxing.
2. Use child safety seats and/or seatbelts in any car, van, or truck.
3. Teach your child:
 - To stop and look both ways before crossing a street
 - About the dangers of running into the street without first looking
 - Not to run under the garage door as it closes
 - Not to bang his or her head against something hard during a temper tantrum
4. Don't leave a child alone in a shopping cart. When available, use carts with seatbelts or child safety seats.
5. Don't leave a child alone on a high place like a sofa, changing table, or bed.
6. Install window locks or guards on windows on upper floors.
7. Place a sturdy gate at the top of the stairs.
8. Lock the door to the basement.
9. Keep stairs free of clutter.

Source:

Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Heart Attack

Cross-Reference:	CPR	21
	Rescue Breathing	44
	Stroke	52

- Symptoms:
1. Persistent chest pain often radiating from the left arm or shoulder
 2. Uncomfortable pressure, squeezing, fullness, or pain in the center of the chest behind the breastbone.
 3. Unusual sweating...for example, perspiring in a cool room.
 4. Nausea - stomach distress with an urge to vomit.
 5. Shortness of breath
 6. Bluish color of lips and / or fingernails.
 7. Feeling of weakness.

- First Aid:
1. Check for breathing and pulse. If no breathing and no pulse, do CPR.
 2. If no breathing, but there is a pulse, do rescue breathing.
 3. Seek Emergency Medical Attention. Call 999.
 4. If the victim has been taking medication to prevent heart attacks and is conscious, help them take their medication as prescribed.
 5. Keep the victim warm and in a sitting position if possible until help arrives.

Precautions:

Prevention: N/A

Source: First Aid Facts, Certified Safety Mfg., Inc., Kansas City, Missouri
Boy Scout Handbook, Boy Scouts of America, 1998



Heat Exhaustion

Cross-Reference: Heat Stroke.....36

- Symptoms:
- | | |
|----------------------------|---|
| 1. Cool, clammy, pale skin | 7. Nausea, sometimes vomiting |
| 2. Sweating | 8. Muscle cramps |
| 3. Dry mouth | 9. Weak and rapid pulse |
| 4. Fatigue, weakness | 10. Low, normal, or only slightly elevated body temperature |
| 5. Dizziness | 11. Decreased, dark-colored urine |
| 6. Headache | |

- First Aid:
1. Move to a cool place indoors or in the shade.
 2. Loosen clothing.
 3. Take fluids such as cool or cold water. If available, add 1/2 teaspoon of salt to a quart of water and sip it or drink sport drinks such as Gatorade, All Sport, or PowerAde.
 4. Have salty foods such as saltine crackers, if tolerated.
 5. Lie down in a cool, breezy place.

Precautions: N/A

- Prevention:
1. Do not stay in or leave anyone in closed, parked cars during hot weather.
 2. Take caution when in the sun. At the first signs of heat exhaustion, get out of the sun or your body temperature will continue to rise.
 3. Do not exercise vigorously during the hottest times of the day. Instead, run, jog, or exercise closer to sunrise or sunset. If the outside temperature is 82° F or above and the humidity is high, do your activity for a shorter time.
 4. Wear light, loose-fitting clothing (such as cotton) so sweat can evaporate.
 5. Wear a wide-brimmed hat with vents.
 6. Drink lots of liquids, especially if your urine is a dark yellow, to replace the fluids lost from sweating. Thirst is not a reliable sign that the body needs fluids. When exercising, it is better to sip rather than gulp the liquids.
 7. Drink water or water with salt added if you sweat a lot. (Use 1/2 teaspoon salt in 1 quart of water.) Sport drinks such as Gatorade, All Sport and PowerAde are also good.
 8. If you feel very hot, try to cool off. Open a window, use a fan, or turn on an air conditioner.
 9. Limit your stay in hot tubs or heated whirlpools to 15 minutes. Don't use them when alone.
 10. Do not drink alcohol or beverages with caffeine - they speed up fluid loss.
 11. Stay out of the sun if you are taking water pills, mood altering, or antispasmodic medications. Check which ones are safe with your doctor.
 12. Do not bundle a baby in blankets or heavy clothing. Infants don't



- tolerate heat well because their sweat glands are not well-developed.
13. Some people perspire more than others. Those who do should drink as much fluid as they can during hot, humid days.
 14. Know the signs of heat stroke and heat exhaustion and don't ignore them.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Heat Stroke

Cross-Reference:	CPR	21
	Heat Exhaustion.....	34
	Rescue Breathing	44

- Symptoms:
1. Very high temperature (104 °F or higher)
 2. Hot, dry, red skin
 3. No sweating
 4. Deep breathing and fast pulse - then shallow breathing and weak pulse
 5. Dilated pupils
 6. Confusion, delirium, hallucinations
 7. Convulsions
 8. Loss of consciousness

- First Aid:
1. Do CPR if the person is not breathing and has no pulse.
 2. If the person is not breathing, but does have a pulse, do rescue breathing.
 3. Until emergency care arrives, it is important to lower the body temperature. To do this:
 - a. Move the person to a cool place indoors or under a shady tree. Place the feet higher than the head.
 - b. Remove the clothing and either wrap the person in a cold, wet sheet; sponge the person with towels or sheets that are soaked in cold water; or spray the person with cool water. Fan the person.
 - c. Apply ice packs or cold compresses to the neck, under the armpits, and to the groin area.
 - d. Immerse a child in cold water if he or she is unconscious.
 - e. Place the person in the recovery position once his or her temperature reaches 101 ° F.
 4. Seek Emergency Care.

Precautions: N/A

- Prevention:
1. Do not stay in or leave anyone in closed, parked cars during hot weather.
 2. Take caution when in the sun. At the first signs of heat exhaustion, get out of the sun or your body temperature will continue to rise.
 3. Do not exercise vigorously during the hottest times of the day. Instead, run, jog, or exercise closer to sunrise or sunset. If the outside temperature is 82° F or above and the humidity is high, do your activity for a shorter time.
 4. Wear light, loose-fitting clothing (such as cotton) so sweat can evaporate.
 5. Wear a wide-brimmed hat with vents.
 6. Drink lots of liquids, especially if your urine is a dark yellow, to replace the fluids lost from sweating. Thirst is not a reliable sign that the body needs fluids. When exercising, it is better to sip rather than gulp the liquids.



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7. Drink water or water with salt added if you sweat a lot. (Use 1/2 teaspoon salt in 1 quart of water.) Sport drinks such as Gatorade, All Sport and PowerAde are also good.
8. If you feel very hot, try to cool off. Open a window, use a fan, or turn on an air conditioner.
9. Limit your stay in hot tubs or heated whirlpools to 15 minutes. Don't use them when alone.
10. Do not drink alcohol or beverages with caffeine - they speed up fluid loss.
11. Stay out of the sun if you are taking water pills, mood altering, or antispasmodic medications. Check which ones are safe with your doctor.
12. Do not bundle a baby in blankets or heavy clothing. Infants don't tolerate heat well because their sweat glands are not well-developed.
13. Some people perspire more than others. Those who do should drink as much fluid as they can during hot, humid days.
14. Know the signs of heat stroke and heat exhaustion and don't ignore them.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Heimlich Maneuver

Cross-Reference: Choking 18
Rescue Breathing 44

Symptoms: N/A

First Aid: If the choking person is conscious:

1. Ask "Are you choking?". If the victim nods yes and cannot speak, cough, or breathe, perform the *Heimlich Maneuver*.
2. Stand behind the victim. Put your arms around his / her waist and clasp your hands together. The knuckle of one thumb should be just above the navel but below the rib cage.
3. Thrust your clasped hands inward and upward with enough force to pop loose the obstruction.
4. Repeat until the obstruction clears or medical help arrives.

If a choking person is very large or has lost consciousness:

1. Lay the victim on the floor and sit straddling his thighs.
2. Place the heel of one hand on the victim's upper abdomen, slightly above the navel but below the rib cage.
3. Place your other hand on top of the first and press upward with quick thrusts.
4. With your index finger, probe the mouth of an unconscious victim to remove any obstructions. Be prepared to start Rescue Breathing.
5. Repeat this maneuver until the obstruction pops loose or medical help arrives.

Performing the *Heimlich Maneuver* on yourself:

1. Pull your fist into your upper abdomen, or bend over the back of a chair and force it against your belly.

Precautions: 1. Do not interfere with a person who is conscious and can speak, cough, or breathe.

Prevention: N/A

Source: Boy Scout Handbook, Boy Scouts of America, 1998



Hyperventilation

Cross-Reference: N/A

Symptoms:

1. Breathing faster than normal
2. Dizziness, disorientation
3. Visual changes
4. Feeling of impending doom
5. Loss of consciousness

First Aid:

1. Talk quietly to the victim & encourage him / her to calm down and breathe slowly.
2. Loosely cover nose and mouth with a small paper bag.
3. Breathe slowly into the bag and rebreathe the air in the bag about 10 times.
4. Set the bag aside and breathe normally for a couple of minutes.
5. Repeat steps 2 and 3 until the symptoms lessen or go away.
6. Try to breathe slowly. Focus on taking one breath every 5 seconds.

Precautions:

1. Hyperventilation is usually not serious. However, it can be a symptom of asthma or diabetes and dizziness & anxiety and be warning signs of a heart attack. For these reasons, someone who has experienced hyperventilation should be checked by a physician.

Prevention:

1. Learn meditation and practice it every day. Meditation is a form of mental relaxation. It relieves stress as you focus on a single word or visual image.
2. Practice relaxing your muscles.
 - Lie down in a quiet room.
 - Close your eyes and take "deep" breaths.
 - Start with your feet. Tense the muscles in one foot, hold for 10 seconds and relax them. Repeat with the other foot.
 - Next, tense and relax the muscle in your legs, back, stomach, hands, arms, shoulders, neck and face.
3. Talk to friends, family or even a counselor to help relieve anxiety.
4. Keep a journal to help you focus on your problems and find solutions you can live with.
5. Exercise on a regular basis. People in good physical shape are less likely to buckle under stress.
6. Reduce caffeine intake - drink less coffee, tea, and colas and eat less chocolate.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>
Boy Scout Handbook, Boy Scouts of America, 1998



Insect Bite / Sting (Anaphylactic Shock)

Cross-Reference: Spider Bite49

Symptoms:	<u>Without allergic reaction:</u>	<u>With severe allergic reaction:</u>
	1. Quick, sharp pain	1. Severe swelling of the face, tongue, and / or lips
	2. Swelling	2. Weakness, dizziness
	3. Itching	3. Difficulty breathing or swallowing
	4. Redness at the sting site	4. Sometimes death due to airway obstruction or shock

First Aid:

1. If stinger is present, gently scrape it as soon as possible using a credit card or fingernail.
2. Clean the sting area with soapy water.
3. Put a cold compress on the sting. Put ice in a cloth, plastic bag, or plastic wrap. Hold the cold compress on the site for 15 - 20 minutes.
4. Keep the sting area lower than the level of the heart.
5. Apply a paste made of meat tenderizer to the sting area. This will break down the protein in the venom.
6. Take aspirin, acetaminophen, ibuprofen, or naproxen sodium for the pain.
7. Take an over-the-counter antihistamine (such as Benadryl) for the itching and swelling unless you have to avoid this medicine for medical reasons. Look on the label for how much to take.

If severe allergic reaction:

1. Give shot of epinephrine from "emergency insect kit". This stops the body-wide reaction.
2. Follow other instructions in the kit.
3. Get Emergency Care as soon as possible.

Precautions:

1. Do not pull a stinger out with your fingers or tweezers. Don't squeeze the stinger. It contains venom - you could "re-sting" yourself.
2. Do not put ice directly on bare skin.

Prevention:

1. Wear snug clothing that covers your arms and legs. Don't go barefoot. Wear long pants tucked into socks when walking through fields and forests, when camping, hiking, etc. Light colored, tightly woven clothing is best. Inspect for ticks after these activities.
2. Keep foods and drink containers tightly covered. (Bees love sweet foods like soft drinks.)
3. Don't wear perfume, colognes, and hair spray when outdoors.
4. Don't wear bright colors - they attract bees. Choose white or neutral colors like tan.
5. Never swat at a bee or other stinging insect - this will cause them to sting. Gently wave at the bee to get it to move.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Nosebleed

Cross-Reference: N/A

Symptoms: N/A

First Aid:

1. Sit with head leaning forward.
2. Pinch the nostrils shut, using thumb and forefinger in such a way that the nasal septum (the nose's midsection) is being gently squeezed.
3. Hold for 15 uninterrupted minutes, breathing through the mouth.
4. At the same time, apply cold compresses (such as ice in a soft cloth) to the area around the nose.
5. For the next 24 hours, make sure the head is elevated above the level of the heart.
6. Wait 24 hours before blowing your nose, lifting heavy objects, or exercising strenuously.

Other tips:

1. Do things to keep the nostrils moist such as:
 - Use a cool-mist vaporizer or humidifier in the bedroom, especially in the winter.
 - Put a dab of petroleum jelly inside the nostril.
2. Don't pick or rub the nose.
3. Don't smoke, take aspirin, or drink very hot or alcoholic beverages for one week.

Precautions: N/A

Prevention: N/A

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Poison

Cross-Reference: CPR21
Rescue Breathing 44
Shock..... 46

Symptoms: N/A

- First Aid: Swallowed:
1. Call the Poison Control Center (PCC) or 999 immediately.
2. Follow the directions of the PCC.
3. Keep suspected poison and / or sample of vomit, if present.
4. Do not give the victim anything by mouth unless instructed to do so by the PCC.

- Inhaled:
1. Move the victim to fresh air. Take caution to avoid fumes yourself.
2. If the victim is not breathing and has no pulse, perform CPR.
3. If the victim is not breathing but has a pulse, perform rescue breathing.
4. Call the Poison Control Center (PCC) or 999.
5. Treat for Shock.

- On Skin:
1. Flush skin with water for at least 10 minutes.
2. Remove all contaminated clothing.
3. Gently wash the affected area thoroughly with water.
4. Call 999 or seek Emergency Medical attention.

Precautions: N/A

- Prevention: 1. Keep potentially toxic items out of the reach of children.
2. Do not eat wild plants or berries unless you are certain they are harmless.

Source: First Aid Facts, Certified Safety Mfg., Inc., Kansas City, Missouri
Boy Scout Handbook, Boy Scouts of America, 1998



Poison Ivy / Oak / Sumac

Cross-Reference: N/A

Symptoms: The skin rash caused by the sap of these plants (urushiol) typically forms a day or two after contact with the poisonous plant. Symptoms include:

- Itching
- Redness
- Burning
- Swelling
- Blisters

First Aid:

1. Keep hands away from eyes, mouth, and face.
2. Do not scratch or rub the rash.
3. Apply any of these to the skin rash:
 - Calamine (not Caladryl) lotion
 - Zinc oxide ointment
 - Paste made with baking soda (3 teaspoons of baking soda with 1 teaspoon of water)
4. Take a bath with lukewarm water and an over-the-counter product called Aveeno colloidal oatmeal.
5. Take an over-the-counter antihistamine (such as Benadryl).
6. Make sure you wash all clothes and shoes with hot water and a strong soap.
7. Bathe pets who have come in contact with poison ivy, oak, or sumac. The sap can stay on pets for many days.

If severe allergic reaction:

1. Use emergency kit with adrenalin, if available.
2. Get Emergency Care as soon as possible.

For weeping blisters:

1. Mix 2 teaspoons of baking soda in 1 quarter (4 cups) of water.
2. Dip squares of gauze in this mixture.
3. Cover the blisters with the wet gauze for 10 minutes, four times a day. (Do not apply this to the eyes.)

Precautions: N/A

Prevention:

1. Know what these plants look like and avoid them:
 - Poison ivy and poison oak both have three leaflets per stem. Remember the saying, "Leaflets of three, let them be."
 - Poison sumac has a row of six to ten leaflets. One leaflet is at the end of the stem. The others are in two rows opposite each other.
2. Wear clothing that covers your arms and legs. Don't go barefoot. Wear long pants tucked into socks when walking through fields and forests, when camping, hiking, etc.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Rescue Breathing

Cross-Reference: CPR21
Shock.....46

Symptoms: N/A

First Aid: Over 8 years old:

1. Lay victim on their back, trying not to move body parts individually to avoid spinal injury.
2. Tilt the victim's head back by gently pushing down on the forehead with one hand, while using two fingers of the other hand, placed under the victim's chin, to lift the jaw and open the airway.
3. Keep the airway open and check for breathing.
4. If breathing, keep the airway open, check for other injuries and treat for Shock.
5. If not breathing, pinch the victim's nose shut, place your mouth over theirs and give 2 full breaths.
6. Watch for the rise and fall of the victim's chest. If the chest does not rise, check for choking.
7. Pause between each breath to take a breath of your own.
8. Keep the airway open and check for a pulse. If there is no pulse, perform CPR.
9. Continue rescue breathing cycles of 1 breath every 5 seconds for 1 minute.
10. Stop and check pulse and breathing.
11. Continue rescue breathing until breathing resumes or help arrives.

Precautions: N/A

Prevention: N/A

Source: First Aid Facts, Certified Safety Mfg., Inc., Kansas City, Missouri



Seizure

Cross-Reference: N/A

Symptoms:

1. Crying out
2. Falling down
3. Losing consciousness
4. Entire body stiffening
5. Uncontrollable jerks and twitches
6. The sufferer's muscles relax after a seizure. He or she may lose bowel and bladder control and may be confused, sleepy, and have a headache.

First Aid:

12. Protect the victim from injury. Cushion the head with a soft object such as pillow, coat, or blanket.
13. Move sharp objects out of the way.
14. Loosen tight clothes around the neck.
15. Place the person on his or her side.
16. Clear the mouth of vomit if there is any. If necessary, roll the victim onto the side to allow vomit and/or saliva to drain from the mouth.
17. Note how many minutes the seizure(s) lasts and observe the symptoms that take place so you can report these to the doctor.
18. Offer to help the victim when the seizure is over. Do not embarrass the victim.

Precautions:

1. Do not try to hold the victim down.
2. Do not put a spoon or anything into the mouth to prevent tongue biting.
3. Do not give anything to eat or drink.
4. Do not give medication.
5. Do not throw water on the victim's face.

Prevention: N/A

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Shock

Cross-Reference: N/A

Symptoms:

1. Weakness, trembling
2. Restlessness, confusion, fear, dizziness
3. Pale or blue-colored lips, skin and/or fingernails
4. Cool and moist skin
5. Weak, but fast pulse
6. Rapid, shallow breathing
7. Nausea, vomiting
8. Enlarged pupils
9. Extreme thirst
10. Loss of consciousness

First Aid:

1. Lay the person down, face up.
2. Elevate the feet about 1 foot with a box or rolled blankets. This causes blood to flow from the legs to the head and vital organs in the body.
3. Loosen tight clothing.
4. Cover the person with a coat or blanket to prevent heat loss. If necessary, lie down next to and hug the person to share your body heat until help arrives. Place insulation between the person and the ground. [Note: Do not use hot-water bottles or electric blankets to try to warm the person.]
5. Monitor for breathing and pulse every so often.
6. Do not give any food or liquids. If the person asks for water, moisten the lips, but do not allow him or her to drink any fluids.
7. Reassure the person. Make him or her as comfortable as you can.
8. If the person vomits, roll him or her on the side so the vomit does not back up into the windpipe and lungs.

Precautions:

1. Do not raise the feet or lower the head if you suspect the person has a head, neck, back, or leg injury.
2. Do not raise feet or move legs if hip or leg bones are broken. Keep the victim lying flat.

Prevention: N/A

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>
Boy Scout Handbook, Boy Scouts of America, 1998



Snake Bite (Non-Poisonous)

Cross-Reference: Cuts / Punctures (Minor)22
Shock..... 44

Symptoms: N/A

First Aid: 1. Gently wash the site with soap and water.
2. Treat as a minor cut or puncture.
3. Consult a health care provider if you notice signs of infection.

Note: Snakes are not warm-blooded, and thus cannot carry rabies.

Precautions: N/A

Prevention: 1. Wear clothing that covers your legs. Don't go barefoot. Wear long pants tucked into socks when walking through fields and forests, when camping, hiking, etc.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>
Boy Scout Handbook, Boy Scouts of America, 1998



Snake Bite (Poisonous)

Cross-Reference: Shock.....44
Rescue Breathing44

Symptoms: N/A

First Aid:

1. Keep the wounded extremity inactive and below the level of the victim's heart.
2. Transport the victim to a hospital immediately without physically exerting the victim.
3. Remove rings and other jewelry that might cause problems if the area around the bite swells.
4. Treat for shock.

Precautions:

1. Do not apply ice to a snake bite. Ice will not help and can damage skin and tissue.

Prevention:

1. Wear clothing that covers your legs. Don't go barefoot. Wear long pants tucked into socks when walking through fields and forests, when camping, hiking, etc.
2. Use a long stick or hiking staff to poke among stones & brush ahead of you when hiking.
3. Watch where you put your hands when collecting firewood or climbing over rocks and logs.

Source: Boy Scout Handbook, Boy Scouts of America, 1998
Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Spider Bite (Poisonous)

Cross-Reference:	Insect Bite	40
	Rescue Breathing	44
	Shock.....	46

- Symptoms:
1. Pain, redness, & swelling around the wound
 2. Sweating, fever or chills
 3. Nausea, vomiting
 4. Stomach pain, cramps
 5. Severe muscle pain, spasms
 6. Joint pain
 7. Difficult breathing
 8. Shock

- First Aid:
1. Treat for shock.
 2. Seek medical attention as soon as possible.

Precautions: N/A

- Prevention:
1. Wear clothing that covers your arms and legs. Don't go barefoot. Wear long pants tucked into socks when walking through fields and forests, when camping, hiking, etc.

Source: Boy Scout Handbook, Boy Scouts of America, 1998



Sprains / Strains

Cross-Reference: N/A

Symptoms: N/A

First Aid:

1. Remove rings immediately if you have sprained a finger or other part of your hand. (If swelling occurs, the rings may have to be cut off.)
2. Use crutches for a badly sprained ankle. Crutches keep you from putting weight on the ankle which could cause further damage. Using them will help speed healing.
3. Rest the injured area for 24 to 48 hours.
4. Ice the area for 5 to 20 minutes every hour for the first 48 - 72 hours or until the area no longer looks or feels hot.
5. Compress the area by wrapping it tightly with an elastic bandage for 30 minutes, then unwrap it for 15 minutes. Begin wrapping from the point farthest from the heart and wrap toward the center of the body. Repeat several times.
6. Elevate the area to reduce swelling. Prop it up to keep it elevated while you sleep.
7. Take aspirin, ibuprofen, or naproxen sodium to reduce inflammation and pain. Acetaminophen will help the pain, but not the inflammation.
8. Once the injured area begins to heal:
 - Work at establishing a full range of motion as soon as possible after an injury. This will help maintain flexibility during healing and prevent the scar tissue formed by the injury from limiting future performance.
 - Gradually strengthen the injured area once the inflammation is controlled and a range of motion is re-established.
 - Do regular exercise using activities that do not strain the injured part. This should be started a few days after the injury, even though the injured part is still healing.

Precautions: N/A

Prevention:

1. Clear porches and walkways of ice in winter weather.
2. Wear shoes and boots with non-skid soles.
3. Install sturdy hand rails on both sides of stairways.
4. Use rubber mats or adhesive-backed strips in bathtubs and shower stalls. Install a support bar.
5. Use a night light between the bedroom and bathroom or in the hallway at night.
6. Keep stairways and foot traffic areas clear of shoes, toys, tools, and other clutter.
7. Floor coverings should be kept skid-proof. Vinyl floors should be cleaned with non-skid wax.
8. Carpeting should be secured to the floor. Area rugs should have non-skid backing.
9. Be careful when using a ladder. Make sure it is steady and long



enough to reach the job without standing on the top three steps.

10. Lift items properly:

- Stand close to the item to be lifted..
- Plant your feet squarely, shoulder width apart.
- Bend at the knees, not at the waist. Keep the knees bent as you lift.
- Pull in your stomach and rear-end. Keep your back as straight as you can.
- Hold the object close to your body.
- Lift slowly. Let your legs carry the weight.
- Get help or use a dolly to move something that is too big or very heavy.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Stroke

Cross-Reference:	CPR	21
	Rescue Breathing	44
	Heart Attack	33

- Symptoms:
1. Unconsciousness
 2. Limp facial muscles
 3. Weakness of one side of the body
 4. Difficulty breathing
 5. Unequal pupil size
 6. Speech impairment

- First Aid:
1. Check for breathing and pulse. If no breathing and no pulse, do CPR.
 2. If no breathing, but there is a pulse, do rescue breathing.
 3. Seek Emergency Medical Attention. Call 999.
 4. If the victim has been taking medication to prevent heart attacks and is conscious, help them take their medication as prescribed.
 5. Keep the victim warm and in a sitting position if possible until help arrives.

Precautions: N/A

Prevention: N/A

Source: First Aid Facts, Certified Safety Mfg., Inc., Kansas City, Missouri



Sunburn

Cross-Reference: Burns (1st Degree)..... 15

Symptoms:

1. Skin is:
 - Red
 - Swollen
 - Painful
 - Sometimes blistered
2. Chills, fever, nausea, and vomiting can occur if the sunburn is severe and covers a large area of the body.

First Aid:

1. Cool the affected area with clean towels, cloths, or gauze dipped in cool water or take a cool bath or shower.
2. Take aspirin, acetaminophen, ibuprofen, or naproxen sodium for pain and/or headache and to reduce fever.
3. Use an over-the-counter topical steroid cream such as Cortaid if the pain lasts.
4. Rest in a cool, quiet room.
5. Drink plenty of water.
6. Don't use local anesthetic creams or sprays that numb pain such as Benzocaine or Lidocaine. If you must use them, only use a little because they cause allergic reactions in some people.
7. Put sunscreen on and cover sunburned skin when you go in the sun again to avoid further burning.

Precautions: N/A

Prevention:

1. Stay out of the sun between 10:00 am and 4:00 pm.
2. Protect your skin. Use sunblock with a sun protection factor (SPF) of 15 or more when exposed to the sun.
 - The lighter your skin, the higher the SPF number should be.
 - Sunscreen should be put on 15 - 30 minutes before exposure to the sun, then every 1 - 1.5 hours afterwards and after swimming.
3. Wear muted colors such as tan. Bright colors and white reflect the sun onto the face. Some clothing has sunscreen protection.
4. Wear a wide-brimmed hat.
5. Wear sunglasses that absorb at least 90% of UV rays. Labels on sunglasses tell you this.

Source: Healthworld Online, <http://www.healthy.net/clinic/firstaid/>



Pack Roster / Contact Information

**Pack roster intentionally not included in the website
version of the EPP, for security reasons.**

Contact the Cubmaster for a copy.

