

Counselor's notes on First Aid

shock *indications*: weakness; pale, moist, clammy, cool skin; weak and rapid pulse; weakness, shivering, thirst, nausea and vomiting, shallow breathing.

treat: lie down; raise feet; talk to him calmly, assure him he'll be all right; treat the cause of shock (control bleeding, restore breathing, relieve pain, treat wounds); place blankets or coats under and over the patient to prevent loss of body heat; insure open airway; if conscious, sips of water; do not leave victim alone; get emergency medical care.

don't: wait for symptoms; "Quickly treat every accident victim for shock" (handbook page 418).

dehydration *prevention*: drink plenty of fluids (at least 2 quarts a day).

indications: thirst, dizziness, blurred vision;

treat: drink plenty of fluids, rest, ;

don't: chance drinking water from any unsafe source.

blisters *prevention on feet*: wear properly fitted, laced boots/shoes; wear socks without holes; break in new and stiff shoes; keep feet dry and clean; use foot powder; a thin inner sock and thick wool sock reduces the friction that causes blisters.

prevention on hands: wear gloves, start slowly and don't overdo work; toughen hands gradually.

indications: hot-spot appears before a blister;

treat: hot-spot should be protected by encircling the potential blister with a "doughnut" of moleskin or mole foam; remove pressure from blisters with moleskin—it's best to leave the blister unbroken;

if you decide that a foot blister is too uncomfortable, drain it by: clean the area with soap and water; sterilize a needle in a flame; prick a small hole at the *edge* of the blister; press out the liquid; apply a sterile dressing; treat as an open wound; watch out for infection.

don't: ignore hot-spots—they *will* get worse.

Cold

frostbite *prevention*: wear adequate clothing on the body and head, stay dry or change to dry clothes;

note: areas most likely to be affected—nose, cheeks, hands, feet.

indications: numb or painful frozen flesh, eventually: stiff, gray or whitish, blisters;

treat: get the area warm and keep warm, cover nose or cheeks with bare palm, put fingers underneath armpits, cold feet on a companion's bare belly, dip it lukewarm water (104°F–108°F); get inside if you can;

then: have victim exercise the area after it is warmed; get to a doctor.

don't: rub with snow, don't massage frozen skin; don't use hot water (above 108°F) to heat the skin.

hypothermia prevention: Be Prepared—dress warmly enough for the air around you, wear a hat, carry rain gear; know the weather predictions; keep yourself and clothes dry, eat high energy foods, don't push yourself into fatigue.

indications: After a combination of cool weather, damp clothes, wind, exhaustion or hunger;

starts with chilly, tired, irritable; then shivering; and finally disorientation, sleepiness, incoherence; ending in no shivering, unconsciousness and death;

test by: asking the victim to walk a straight line heel-to-toe for 30 ft, or ask victim to touch their thumb and little finger together;

treat: try exercising to get warm; if that does not work, get to shelter, remove wet clothes, get into sleeping bag, cover head;

next: give hot drink or soup, in severe cases: actively warm victim with other's bodies; seek medical care.

don't: rub skin to warm; give alcohol, "press on" with a prearranged plan now that current conditions indicate that things should change.

Hot

sunburn prevention: SPF 15 or better sunscreen, cover skin with clothing

indications: (a typical first degree burn) painful red skin, no blisters (2nd degree), no charred skin (3rd degree);

treat: relieve pain by cooling the area, apply sunburn lotion; if the burn area is large, treat for shock.

don't: apply lotions not specially formulated for sunburn.

heatstroke (aka sunstroke) *prevention:* stay in shade (avoid the direct sun for more than 30 min. at a time), wear light-colored clothes, wear a hat, drink plenty of water, take a little more salt.

note: much more *serious* than heat exhaustion, life-threatening; high temperatures have overwhelmed the body's cooling mechanisms.

indications: Skin red, hot (over 102°F), dry (no sweating unless he has been exercising hard); high pulse, small pupils, slow noisy breathing; confusion or disorientation, fainting or unconscious, convulsions,

first: move immediately to a cool, shaded spot;

next: place victim face up with head and shoulders raised, quickly cool the head and body with cold water; dry the skin after temp returns to below 102°F, when requested give all the water wanted;

don't: mistake for heat exhaustion, don't take a lot of salt, don't ignore the possibility that he may stop breathing.

heat exhaustion prevention: stay out of the sun, drink plenty of fluids, rest in the shade if you get too warm, plan strenuous activities during the cooler parts of the day.

indications: (overheated body) skin pale and clammy (cold sweat), temperature high (but below 102°F), large pupils, heavy sweating, dizzy, faint, tired, weak, nausea, headache, muscle cramps;

treat: move immediately to a cool, shaded spot, have victim lie down with feet raised,
next: cool the victim with cool, wet cloths and fans, sip water with a little salt;
don't: take a lot of salt.

Beasts

insect stings *prevention:* insect repellent, don't disturb nests.

indications: bee, wasp, hornet—painful sting; *treat:* remove stinger without squeezing it, ease pain by applying an icy cold towel or applying baking powder paste or household meat tenderizer;

don't: ignore the possibility of a severe allergic reaction.

tick bites *prevention:* wear long pants and long-sleeved shirt; button your collar; tuck cuffs of pants into boots or socks; inspect yourself daily.

indications: tick stuck to skin (small brown dot with its head buried in your skin).

treat: (according to First Aid MB) stop its breathing by coating tick with petroleum jelly, grease, or oil; in half-an-hour, ease it loose with tweezers (according to handbook) gently pull off with tweezers.

next: wash area with soap and water.

don't: touch tick with your fingers.

snakebite *prevention:* wear leather boots; never put your feet or hands where you cannot see them; stay alert outside; use your hiking stick to poke around in rocks and brush ahead of you.

note: know how to identify: copperhead, rattlesnake, cottonmouth (handbook pages 302-303).

indications: *non-poisonous*—broken skin (shallow), bleeding.

poisonous—puncture marks, pain, swelling, then: skin discoloration, nausea, vomiting, shallow breathing, blurred vision, shock;

treat: *non-poisonous*—(same as for puncture wound) encourage wound to bleed, clean with soap and water, rinse well with clear water, dry, apply dressing.

poisonous—make sure the snake is not still around; shock treatment—lie down and be still; bitten limb lower than the rest of body; as a precaution in case of swelling, remove rings, watches, or bracelets; if bite on arm or leg—apply broad constriction band 2–4 inches above the bite (not around fingers or toes), get medical help ASAP (while avoiding unnecessary physical activity of the victim).

don't: use a tourniquet, don't give alcohol, don't give sedatives or aspirin, don't use ice/cold packs, don't cut the skin and “suck out the poison”.