

# FIRST-AID LEAFLET

## SITUATIONS – PROCEDURES

<b>CONTENTS:</b>	1
FIRST AID	2
ARTIFICIAL RESPIRATION	2
CONTROL OF BLEEDING	2
FRACTURES	3
BURNS	3
SHOCK	3
WOUNDS	3
EYE INJURIES	3
ABDOMINAL WOUNDS	4
BACKBONE FRACTURE	4
HEAT STROKE	4
BLEEDING NOSE	4
FOREIGN BODY IN THE NOSE	4
BLEEDING EAR	5
FOREIGN BODY IN THE EAR	5
SNAKE BITE	5
DOG BITE	5
INSECT BITE	5
CHEMICAL BURNS	6
SUFFOCATION	6
ELECTRIC SHOCK	6
UNCONSCIOUSNESS	6
POISONING	6

## **FIRST - AID**

First-aid is the immediate care given to the victim of an accident or sudden illness before the arrival of a qualified expert. The purpose of First-aid is to preserve life, assist recovery, prevent aggravation and minimize complications at a later date with the help of such material as may be available.

## **ARTIFICIAL RESPIRATION**

- Mouth to Mouth: This is appropriate and effective technique for emergency artificial respiration.
- Keep the head slightly backward and open the jaw.
- Seal the casualty's nose to prevent escape of air by pinching with thumb and index finger.
- Take a deep breath, open your mouth widely, place it over the victim's mouth and make a tight seal.
- Quickly blow the full breath into the mouth of victim.
- Remove your mouth from the victim and allow him to exhale passively.
- Repeat the procedure 12 to 15 times per minute, till medical aid is arranged.
- Arrange immediate medical aid.

## **CAUTIONARY NOTE**

- Do not give mouth to mouth resuscitation during CPR in the presence of toxins such as cyanide, hydrogen sulphide, corrosives and organo-phosphates. Ventilate the casualty by using a face mask or bag/valve/mask assembly.
- Avoid mouth to mouth resuscitation if there is possibility of transmission of infection between the victim and the rescuer, such as HIV, Hepatitis-B, Tuberculosis, Shigellosis, Meningococcal meningitis, Herpes simplex virus and Salmonella. Use an interpositional airway device which must function effectively in both its resuscitation and protective roles, and be immediately available at all times.

## **CONTROL OF BLEEDING**

- Apply direct pressure by thumb or finger.
- Apply dressing – gauze pad and bandage.
- Apply indirect pressure on pressure points.
- Apply tourniquet.
- Remove the injured to the hospital.

## **FRACTURES**

Signs of Fracture : Pain, Tenderness, Swelling, Loss of Power, Deformity

- Do not move the injured unless the life is endangered from other causes.
- Deal with the haemorrhage and breathing difficulties. Immobilise the fracture by using suitable splints.
- Immobilisation should include one joint above and one joint below the fracture.
- Remove the injured to the hospital.

## **BURNS**

- Pour running cold water on the affected part.
- Do not apply ointments or oils or any other substance.
- Cover the wound with sterilized cloth.
- Give artificial respiration, if needed.
- Prevent shock.
- Arrange immediate medical aid.

## **SHOCK**

- Lay the patient on his back.
- Stop bleeding, if any.
- Relieve pain by supporting the injured part.
- Keep the patient comfortable.
- Do not cause sweating.
- Fluids may be given by mouth in small amounts, if the patient is conscious.
- Reassure the patient.
- Arrange immediate medical aid.

## **WOUNDS**

- Stop the bleeding, if any.
- Avoid touching the wounds.
- Cover the wound with sterilized cloth.
- Arrange immediate medical aid.

## **EYE INJURIES**

- Removal of foreign body should not be attempted.
- Do not apply oil or ointment.
- Apply sterile pad and loose bandage.
- Send the patient to the hospital.

### **ABDOMINAL WOUNDS**

- No time should be lost in sending the patient to the hospital.
- Keep the patient flat on his back.
- Give nothing by mouth.
- Maintain warmth.
- If intestines protrude from the wound, do not attempt to touch or replace them.
- Apply sterile dressing and binder on the wound.
- Provide immediate transportation to the hospital.

### **BACKBONE FRACTURE**

- Fracture of backbone may lead to paralysis of limbs. Hence, victim should be handled with great care.
- Transport on a rigid frame, which may be improvised by using available board.
- The rigid frame is to be placed on a stretcher for transportation.
- Immediate hospitalization is needed.

### **HEAT STROKE**

- Make the patient lie down.
- Remove all clothings except the underwear.
- Keep the patient under the fan.
- Pour cold water on the body repeatedly.
- Wash the head thoroughly with cold water and dry it with towel.
- Record body temperature falls up to 38°C stop pouring water.
- Give plenty of cold water with a pinch of common salt in each glass of water to drink.
- Send the patient to the hospital.

### **BLEEDING NOSE**

- Make the patient sit on a Chair with head downward.
- Pinch the nose with fingers and thumb.
- Apply ice or cold compression.
- Do not plug the nostrils.
- Do not put water or any medicine through the nostrils.
- Send for medical aid immediately.

### **FOREIGN BODY IN THE NOSE**

- Do not try to remove the solid object.
- Ask the patient to breathe through mouth.
- Send the patient to the hospital.

### **BLEADING EAR**

- Lay the patient with the head slightly raised.
- Incline the head to the affected side and apply a dry dressing over the ear with loose bandage.
- Do not plug the ear.
- Apply pressure in front of the ear.
- Send for medical aid immediately.

### **FOREIGN BODY IN THE EAR**

- Solid – Do not try to remove, scratch or probe it.
- Insects – Put a few drops of water in the ear and turn the head so that affected ear points upwards.
- Keep the head in that position for 5 minutes, then turn the head downwards so that the water flows out.
- Arrange immediate medical aid.

### **SNAKE BITE**

- Reassure the patient
- Do not allow the person to run or walk
- Apply a ligature above the wound (in between the heart and the wound) if the bite is in the leg or hand.
- Wash the wound with potassium permanganate solution or with soap and water.
- Allow free bleeding.
- Never suck the blood from the wound.
- Treat for shock.
- Arrange immediate hospitalization, by transporting the patient in a lying down position.

### **DOG BITE**

- Clean the wound immediately with water.
- Then wash with antiseptic soap and water.
- Do not try to stop bleeding.
- Do not cover the wound.
- Send the patient to hospital for treatment.

### **INSECT BITE**

- The sting bite should be pulled out.
- Apply cold compression.
- Apply vinegar diluted with water.
- Soda-bicarbonate paste should be applied at the site.
- Prevent shock.
- Send for medial aid immediately.

### **CHEMICAL BURNS OF THE EYES**

- Immediate washing of the eye with clean water at least for fifteen minute or longer.
- Apply sterile dressing over the eye.
- Neutralising agents or ointments should not be used.
- Send the patient to the hospital.

### **SUFFOCATION**

- Remove the patient from the source
- Clean the airways.
- Restore breathing by artificial respiration.
- Send the patient to the hospital.

### **ELECTRIC SHOCK / INJURIES**

- Do not touch the casualty while he is still in contact with electricity.
- Switch off the current at once.
- Do not attempt first aid until the contact has been broken.
- Make the air passage clear and clean.
- Restore breathing Artificial respiration and external cardiac massage, if needed.
- Call for immediate medical aid.
- Send the patient to the hospital.

### **UNCONSCIOUSNESS**

- Make the patient lie down on his belly with head turned to one side.
- Check breathing and pulse.
- Loosen tight clothings.
- Clean the air-way.
- Give artificial respiration and external Cardiac Massage, if needed.
- Transport the patient to the hospital.

### **POISONING**

- Find the nature of the poison
- Give universal antidote mixture as given below to drink:
  - Charcoal powder - 2 table spoons
  - Coffee powder - 2 table spoons
  - Chalk powder - 1 table spoonAdd it to a glass of warm water and mix well.
- Send the patient immediately to the hospital.