

FIRST AID KIT ACCESSORIES

- Acetaminophen, aspirin or ibuprofen: to reduce pain and fever; the last two are also anti-inflammatories. **Note:** Don't give children or teenagers aspirin, as it is associated with Reye's syndrome, a serious complication of viral infections such as the flu and chicken pox.
- Activated charcoal for swallowed poisons. **Note:** Use only as directed by your local poison control center.
- Adhesive tape: to secure gauze dressings.
- Antibiotic skin ointment: to prevent infection from cuts and scrapes.
- Antihistamine (such as Benadryl): to reduce minor allergic reactions, such as a runny nose. **Note:** This drug may cause drowsiness.
- Antiseptic such as alcohol, in liquid or wipe form: to clean the skin around minor wounds; soap and water will work too.
- Band-Aids or other adhesive strip bandages in assorted sizes: for scrapes and cuts.
- Calamine lotion: to reduce itching from insect

- bites, poison ivy or poison oak (also dries the weeping skin rashes caused by these plants).
- Cotton balls, swabs or pads: to apply ointments or creams.
- Elastic (Ace) bandage: to wrap a pulled muscle or sprained joint, or to secure a homemade splint for a broken limb on the way to the hospital.
- First aid manual.
- Flashlight and extra batteries.
- Gauze bandages (a three-inch roll and a few four-inch squares): to stop bleeding and cover wounds.
- Gloves made of latex or vinyl: to prevent the spread of germs between open wounds and the first aid giver; use plastic bags as substitutes.
- Ice bag or cold pack: to reduce swelling; plastic bags filled with ice work well too.
- Pen and paper: to write down messages or information.
- Pepto-Bismol, Imodium or other antidiarrheal medication.

- Phone list of family members' doctors, the local poison control center, the nearest emergency room and hospital, and the name of someone to call in case of an emergency.
- Prescription medications that you and other family members may need, such as an asthmatic's inhaler or epinephrine for an allergic reaction to a wasp or hornet sting.
- Safety pins: to secure nonadhesive dressings.
- Scissors.
- Thermometers: an oral one for adults and older children, a rectal one for babies and toddlers.
- Triangular bandages: to make slings.
- Tweezers: to remove splinters or ticks that have become embedded in the skin; use a credit card to scrape out a stinger.

This list was compiled with help from the American Automobile Association (AAA), National Safety Council and other experts.

Important Phone Numbers

In an Emergency Call 911

Urgent Care Center

Poison Control Center

Physician

Police

Fire

Dentist

Hospital

Pharmacy

Additional Emergency First Aid Information on Reverse Side

What to do until professional medical help is available...

The information provided here will help you respond quickly and appropriately to emergencies. To be best prepared for emergencies, we recommend that everyone take an approved Red Cross First Aid and CPR course.

Emergency Action Principles:

Survey the Scene

- Is it safe? What happened?
- How many are injured?
- Can bystanders help?

Do a Primary Survey (for life-threatening conditions)

- Is the victim conscious? Gently tap the victim and ask, "Are you OK?"
- Is the victim's airway open?
- Is the victim breathing?
- Is pulse present?
- Check for severe bleeding.
- If possible, stay with victim and call **911** or have someone else make the call.

Do a Secondary Survey (if you find no life-threatening conditions)

- Survey the victim and bystanders.
- Check vital signs.
- Check for other injuries.

Poisoning

Swallowed Poisons

- Call poison control center or **911**.
- Have poison container with you if possible.
- Follow directions from poison control center personnel.
- Monitor vital signs.
- Save poison container and any vomit.

Inhaled Poisons

- Survey the scene.
- Is it safe for you to go to the victim?
- If **NO**...call for emergency assistance.
- If **YES**...continue with the following:
 - Remove victim from source of poison and get victim into fresh air.
 - Call for medical assistance.
 - Monitor vital signs.

External Bleeding

Call for assistance if necessary. Apply direct pressure over wound with gauze or pad of cloth and maintain pressure. Elevate the wound above the heart if there are no suspected fractures. Continue direct pressure. Apply a pressure bandage when bleeding is controlled. If bleeding will not stop, apply pressure to a pressure point while maintaining direct pressure.

DO NOT attempt to use a tourniquet. Too often it does more harm than good.

Burns

First Degree (Superficial): Redness or discoloration, mild swelling, pain.

Second Degree (Partial-Thickness): Red or mottled appearance, blisters, pain, skin may appear moist.

Third Degree (Full Thickness): Brown, charred or white areas, may be extreme pain or relatively no pain.

What To Do

- Cool the burn immediately by flushing with cool water. Call for emergency help, if necessary.
- Cover burn with dry, sterile dressing.

Do Not

- Clean burn or break blisters.
- Remove clothing that sticks to burn.
- Apply grease or ointment.
- Use cotton or loose-fibered material.

Heart Attack

Signals of a Heart Attack

Persistent chest pain or discomfort. This is the key signal of a heart attack. The pain or pressure is usually felt in the center of the chest, but may spread to the shoulder, arm, neck or jaw. It may range from discomfort to an unbearable crushing sensation. It is not relieved by resting, changing position or taking oral medication.

Breathing Difficulty

Noisy breathing, shortness of breath, faster breathing than normal.

Changes in Pulse Rate

Faster or slower than normal, or irregular.

Skin Appearance

Pale or bluish skin color; face may be moist or victim may sweat profusely.

What To Do

- Convince the victim to stop activity.
- Help the victim rest calmly in a comfortable position that allows ease of breathing.
- Try to obtain information about the victim's condition.
- Assist with medication, if prescribed.
- Call for emergency medical help.
- Monitor vital signs.

Sprains, Strains and Fractures

General Care

Rest. Avoid any movements that cause pain. Help the victim find the most comfortable position.

Ice. Apply ice (wrapped in cloth) or a cold pack to reduce swelling and ease pain.

Elevation. Elevate the injured area to reduce swelling, but only if it is possible to do so without causing further injury.

Choking

The victim of a complete airway obstruction cannot breathe, speak or cough. It is vital for you to establish an open airway as quickly as possible. This can be accomplished by using abdominal thrusts which simulate a cough, forcing air trapped in the lungs to push the object out of the airway.

When an Adult or Child (Ages 1-8) Is Choking

- Stand behind victim and wrap your arms around the victim's waist.
- Make a fist with one hand and place the thumb side against the middle of the victim's abdomen just above the naval and well below the lower tip of the breast bone.
- Grab fist with your other hand and give quick, upward thrusts into the abdomen.
- Repeat until the object is expelled or victim begins to cough or breathe.
- Get follow-up care at the nearest hospital emergency department.

When an Infant (Birth to One Year) Is Choking

- Call **911**.
- Support the infant's head and neck, turn the infant face-down on your forearm onto your thigh.
- Give four back blows forcefully between infant's shoulder blades with heel of hand.
- Supporting the infant's head and neck, turn the infant onto its back.
- Give four chest thrusts. Place middle and index fingers on breastbone. Quickly compress breastbone one-half to one inch with each thrust.
- Repeat steps 2-5 until object is expelled or infant starts to cry, cough or breathe.
- Get follow-up care at the nearest hospital emergency department.

To Perform Abdominal Thrusts on Yourself

- Press your abdomen onto a firm object, like the back of a chair.

Caution:

If victim has only partial obstruction and is able to speak or cough, **DO NOT** interfere with his attempt to expel the object. Stay with the victim and encourage coughing to clear the obstruction. If coughing persists, call **911**.