OUTDOORS FIRST AND PRIMER

The 4+1 B's in Triage-Bleeding, Breathing, Burns, Bones, Bites

Burns

1. You can prevent a lot of tissue damage by immediately plunging the burned area into cold water and leaving it there until the skin has cooled...10 to 15 minutes.

2. Burns are prone to infection, and must be protected with a clean, non-fluffy dressing.

3. Bandage the area lightly. If several layers of skin are damaged, the victim may go into <u>shock</u>. (See below)

Animal Bites

Minor Bites: Animals carry bacteria in their mouth that can cause a variety of infections; to prevent an infection, pour water over the wound for at least five minutes as soon as you have been bitten. Cover the wound with a sterile dressing.

Serious Bites: Wash the wound in cold water, and then apply pressure with a gauze pad to control bleeding. Raise the area above the heart. Bandage the wound and seek medical help.

Snake Bites

 Do not panic; panic accelerates the heartbeat, taking the venom around the body faster. If you are sure that the snake was only mildly poisonous, wash the wound then bandage it firmly. If you are not sure, do not wash the wound; a snake can be identified by its venom, and its bite can be treated accordingly.
If you are in a country where snake bites can be fatal, immediately apply



direct pressure to the bite wound. Bandage the area firmly above and below the bite to localize the venom. Seek medical help immediately.

Bee and Wasp Stings

1. Flick the sting out with a credit card or similar device by running the card along the affected limb. Do not use tweezers; you would squeeze even more venom into the wound.

2. Some people are allergic to insect stings (anaphylactic shock); they should be treated for shock and may need to be resuscitated. Seek medical help.

Tick Bites

Removing Ticks: Ticks have strong jaws, which will remain embedded if the body is pulled away, causing infection. Cover the tick with petroleum jelly, lip balm (Vaseline, ChapStick, etc.), or heavy oil to close its breathing pores. If tick does not drop off, carefully remove it with tweezers, or apply the burning end of a cigarette (if there is a smoker around).



Severe External Bleeding

If left uncared for, a severe wound can cause a victim to bleed to death. These 5 simple steps will help you slow (and hopefully stop!) severe external bleeding. 1. Press the edges of the wound together. If you cannot remove a foreign body from the wound, press the skin up to the sides of the object.

2. Lie the victim down. Check for fractures, then raise his bleeding limb and apply pressure on the wound with a gauze pad until bleeding stops.

3. Apply a sterile dressing to the wound, padding all sides of a protruding object.

4. Bandage the wound firmly, but do not impede circulation. Do not push in or pull out a protruding object.

5. Gently press a fingernail or toenail. If the color does not return quickly, rebandage more loosely.

The ABC of Resuscitation

1. To check an unconscious victim, place two fingers under his chin and a hand on his forehead. Tilt his head back to open his **airway**. Remove any obstructions from his mouth.

2. Listen and feel for victim's **breathing**. If he is breathing, place him in the <u>recovery position</u>. If he is not breathing, begin <u>rescue breathing</u>.



3. Check the victim's **circulation** by feeling for a pulse at the side of his windpipe (carotid artery). If there is no pulse, begin <u>CPR</u> immediately.

The Recovery Position

1. If a victim is unconscious but breathing, bend his near arm up at a right angle

to his body. Hold the back of his far hand to his near cheek. With the near leg straight, pull the far knee toward you.

2. With the victim on his side, place his uppermost leg at right angles to his body. His head will be supported by the hand of the uppermost arm. Tilt his head back so that he will not choke if he vomits.



Rescue Breathing

 To ensure an open airway, first clear the victim's mouth of obstructions, then place one hand under his chin and one on his forehead, and tilt his head back.
Pinching the victim's nose shut, clamp your mouth over his mouth, and blow steadily for about two seconds until his chest rises. Remove your mouth and let his chest fall, then repeat.

3. Listen for the victim's breathing and

check his pulse. If he still has a pulse, give 10 breaths per minute until help arrives or the victim is breathing by himself. If the pulse has stopped, combine rescue breathing with <u>chest compressions</u>.

(also see image <u>above</u>)

Cardiopulmonary Resuscitation (CPR)

If a person's heart has stopped, give cardiopulmonary resuscitation (CPR). This consists of chest compressions to maintain the blood flow to the brain, combined with <u>rescue breathing</u> to oxygenate the blood. Give chest compressions at a rate of 80 per minute, counting "one-and-two-and..."

1. Place the heel of your hand two finger-widths up from the end of the sternum and your other hand on top of the first. Press down firmly, then release. For babies, use two fingers over their hearts. 2. Check for a pulse. After 15 chest compressions, give the victim two breaths of <u>rescue breathing</u>. Repeat until the pulse restarts, professional help arrives, or you are too exhausted to continue. (Note the ratio of 15 to 2). If two people are administering resuscitation, then the person giving chest compressions should give 5, stopping to allow the other person to give one quick deep breath.

The Effects of Heat

Dehydration

The gradual loss of water and salts from the body causes headache, dizziness, nausea, and sweating. The victim may have pale, clammy skin, muscle cramps, and breathing problems. Move him to a cool place and give him plenty of food and electrolyte solutions.

Hyperthermia/Heatstroke

Heatstroke is the result of depletion of body fluids or exposure to a significant heat source. It can cause feverishness, severe headache and vomiting, the cessation of sweating, and unconsciousness.

1. Cool the body of a heatstroke victim immediately. Make sure it is in the shade.

2. If possible, put him in cool water; wrap him in cool wet clothes or sleeping bag liner; or sponge his skin with cool water, rubbing alcohol, ice, or cold packs.

3. Once the victim's temperature drops to about 101 F, you may lay him in the recovery position in a cool room.

4. If the temperature begins to rise again, you will need to repeat the cooling process.

5. If he/she is able to drink, you may give him some water.

6. Do not give a heatstroke victim any medication.

7. You should watch for signs of shock while waiting for medical attention.

Treating Shock

Shock is a serious condition most often brought about by major injury or fear. It can easily be overlooked, but if left uncared for, a victim of shock may develop serious problems.

1. Lay the victim down, on a coat or sleeping bag, if possible. Raise her feet higher than her head. Loosen her clothing, reassure her, and take her pulse.

2. Cover the victim with a coat or sleeping bag. Check her breathing and pulse rates, particularly if she is unconscious. Be ready to resuscitate her if her heart stops beating.

Making a Dressing and Applying a bandage

Make a pad and affix it at the center point. If the bleeding persists, do not take the bandage off but reinforce it with further bandaging. Time and pressure will stop the bleeding. In cases of persistent bleeding, elevate the wound as much as possible. Put some support under a cut leg, for example, to raise it above the rest of the reclining body. You may need to place extra padding over the wound and then hold it very firmly in place with your hand for about fifteen minutes, applying considerable pressure.

Unless there are pressing and obvious reasons for doing so, do not change the dressing. If bleeding has been severe and the dressing is soaked through, you should, if you have enough clean bandage roll, apply more to ensure that the surface of the bandage that is exposed to the air is dry. Germs will infect through a soaked bandage more readily than through one with a dry exterior.

Once the wound has had time to begin healing -- forty-eight hours is often recommended - you can change the dressing once to ensure a dry covering during the rest of the healing period.

The Effects of Cold

Hypothermia

Hypothermia comes about when you are exposed to cold for a prolonged period of time, and can lead to death.

Symptoms & Treatment:

- * *Shivering:* this is your first warning that you're getting cold. Try to prevent things from getting worse by getting on some warmer clothing, or by moving.
- * Stumbling, slurred speech, violent shivering, deep fatigue: now things are getting bad. You must absolutely do something to warm up. Get to a warm shelter, get more clothing, and move around. If beyond this you stop feeling cold, don't be fooled, things are just getting worse.
- * Unconsciousness, followed by death: the situation is very serious. Do anything to get the victim warmed up before it's too late. Even put them in a sleeping bag with another person, after removing their clothes. Warning: if the victim can choose whom they want in the bag with them semi-nude, they are not so sick!

* Other treatment: wrap them in a survival blanket (temperature-protectant thermal-layered one); administer sips of lukewarm liquids; monitor their symptoms carefully and regularly

Prevention:

The best thing you can do is to keep yourself and others from getting cold in the first place. Some of the most common ways we lose heat are through sweating, contact with cold water or cold wind, and contact with cold objects such as concrete and steel. Lack of food can contribute to hypothermia by reducing the body's fuel reserves. For young girls who are menstruating, this can also be a warning factor. Our susceptibility to cold also depends to a great degree on our general level of fitness, our mental state, and what clothing we wear. When trekking in cold weather, wear a warm, wooly hat, as 65% of your body heat is lost through the scalp. Do not trek in jeans, as they do not shed moisture when soakedwear khaki or corduroy trousers. Dress in layers. Wear an outer shell jacket with an inner liner that can be removed, and wear polypropylene, silk or wool undergarments in really cold conditions. Cotton offers completely inadequate protection against wind and cold-if you trek in a t-shirt or skivvy, then also take a sweater and light jacket at the <u>very minimum</u> in a small backpack.

These notes from <u>www.equipped.com/stayalive/index.html</u>