

MAFES Dawg Tracks

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MISSISSIPPI STATE UNIVERSITY™
MS AGRICULTURAL AND
FORESTRY EXPERIMENT STATION

Basic First Aid - I

I feel that it is advantageous to repeat each year these newsletters on first aid. We try to schedule classes and refreshers to keep everyone informed but, due to schedules, sometimes it is nearly impossible to work them in to fit all work schedules. Even with newsletters, videos, and first aid/CPR classes, you never can cover all the avenues of potential injuries that might occur.

The next two issues of “**DAWG TRACKS**” shall cover the basic parts of first aid/CPR that, if used, will give insight on what to do in emergency situations.

RESCUE BREATHING for an ADULT-

If the victim is unconscious, perform rescue breathing. If their heart has stopped beating, start **CARDIAC PULMONARY RESUSCITATION (CPR)**. You may be in doubt as to whether or not it is needed. Start it! If you don't know how, try to find someone who does. We encourage all of our employees to take the actual course as it includes CPR.

When breathing stops and the lips, tongue, or fingernails turn blue, the victim needs immediate help! If you have any doubts about their condition, ask them if you can help by starting CPR. Delaying rescue breathing may cost the victim their life. Start immediately, seconds count!!

10 STEPS TO ASSIST AN ADULT WHO HAS STOPPED BREATHING:

- ✓ Does the person respond? Tap or gently shake them and ask, “Are you okay?”
- ✓ Look around you to see that there are no obstacles that will cause further harm.
- ✓ Ask a bystander to call 9-1-1. If no one is around, call yourself.
- ✓ Get the victim on their back, very carefully, if they aren't in that position already.
- ✓ Tilt the head back and hold under their chin to open their airway. Check for any obstructions in their mouth that need to be cleared.
- ✓ Check for their pulse on the side of their neck, for approximately five to ten seconds.
- ✓ If there is no pulse, give two full breaths (with head tilted and fingers pinching the nostrils to keep them closed).
- ✓ With one hand flat on top of the other and positioned at the base of the sternum, do 30 repetitions of chest depressions and look at the abdominal region for evidence of breathing.
- ✓ Repeat two full breaths and the 30 chest depressions until the victim regains the ability to breathe on their own or until the Emergency Medical Technicians (EMTs) arrive.
- ✓ If needed for clearing the mouth, use the “log roll” to turn the victim on their side. Also, if you need to leave to seek help, move their arm in a “V” and the top leg in a “V”. The victim

can remain in this position for 30 minutes (long enough for you to get help). For infants and small children, follow the first four steps above. On the fifth step, cover the child's mouth and nose and give two small breaths.

- ✓ Check for a pulse and call 9-1-1.

SHOCK-

Shock usually accompanies severe injuries or emotional stress. Signs of shock include cold and clammy skin, pale face, chills, confusion, frequent nausea or vomiting, and shallow breathing. Until the EMTs arrive, have the victim to lie down with their legs and feet elevated. Keep the victim covered to prevent chills or loss of body heat. If the victim is able to swallow or doesn't have an abdominal injury, give them non-alcoholic fluids.

BLEEDING-

Until emergency help arrives, try to control the bleeding. When possible:

- Put on rubber or latex gloves. If gloves aren't available, use clean plastic bags to cover your hands.
- Control bleeding with hands or fingers at the nearest pressure point. Place a clean, thick cloth or bandage (if available) on the wound and apply pressure. If a white cloth isn't available, use anything that is available, as long as it is clean. Don't use paper products.
- If there are no apparent broken bones, raise the wounded part above the body to slow the bleeding and possibly avoid shock.
- Use pressure as far as possible to control bleeding. You should only apply a tourniquet as the last resort. There is a possibility of crushing tissue and damaging nerves and blood vessels which can cause permanent damage.
- Get the victim medical help as soon as possible!

BURNS & SCALDS-

Until medical help arrives:

- Immerse the burned area in tap or cool water, or apply cool, moist towels. Refrain from using ice as it might do more damage in the affected area.
- Continue this pattern until help arrives. Avoid bursting any blisters. Do not use any ointments, powders, or greases.
- For more severe burns, keep the victim quiet and treat them for shock.
- If any clothing is stuck to the body, remove it slowly and carefully.
- Chemical burns – Flush the area with plenty of water and keep the exposed area covered with a clean cloth.
- Give the victim plenty of water or non-alcoholic fluids, assuming they can swallow.
- Get the victim medical attention as soon as possible.

Other factors in first aid shall be discussed in the next week's issue. These issues above can very well happen in our areas. I sincerely hope that these discussions will be preserved and used in cases of need.

Ted Gordon-Risk Mgmt. / Loss Control Mgr.
MAFES/MSU-Extension (662) 566-2201
Excerpts: www.redcross.org
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**STOP ACCIDENTS BEFORE
THEY STOP YOU!
SAFETY—DO IT FOR YOUR
FAMILY**