



Skills Session: First Aid

Time Frame

2 hours

Materials

- Personal first-aid kit
- Patrol/troop first-aid kit
- BSA Accident Report folder

Resources









- *Boy Scout Handbook*—chapter 3, “Tenderfoot Scout”; chapter 4, “Second Class Scout”; chapter 5, “First Class Scout”; chapter 11, “First Aid”
- *Guide to Safe Scouting*

Goals

By the end of this session, participants will be able to

- Shape their attitudes and approach to first-aid situations.
- Define first aid and explain what a first-aid plan is.
- Describe a systematic approach to first aid.
- Assemble a first-aid kit that includes items for specific injuries.
- Explain the considerations for first aid in pretrip planning.

Assignments

- Demonstrate the Heimlich maneuver and tell when it is used.  T12a
- Show first aid for the following:  T12b
 - Simple cuts and scratches
 - Blisters on the hand and foot
 - Minor burns or scalds (first-degree)
 - Bites or stings of insects and ticks
 - Poisonous snakebite
 - Nosebleed
 - Frostbite and sunburn
- Show what to do for “hurry” cases of stopped breathing, serious bleeding, and internal poisoning.  S6a
- Prepare a personal first-aid kit to take with you on a hike.  S6b
- Demonstrate first aid for the following:  S6c
 - Object in the eye
 - Bite of a suspected rabid animal
 - Puncture wounds from a splinter, nail, and fishhook
 - Serious burns (second-degree)
 - Heat exhaustion
 - Shock
 - Heatstroke, dehydration, hypothermia, and hyperventilation
- Demonstrate bandages for a sprained ankle and for injuries on the head, the upper arm, and the collarbone.  F8b
- Show how to transport by yourself, and with one other person, a person  F8c
 - From a smoke-filled room
 - With a sprained ankle, for at least 25 yards
- Tell the five most common signs of a heart attack. Explain the steps (procedures) in cardiopulmonary resuscitation (CPR).  F8d

Before You Begin

For the weekend program, the First Aid skills session can be split into two time periods. Conduct this session in a lecture/demonstration format, before participants spend the night in small campsites or go on any small-group overnights without staff members. Using role play, leaders will learn how to render aid in an emergency and how to teach these skills to Scouts so they can be prepared.

Lesson Plan: First Aid

What Is First Aid?

First aid is just that—the first help given the victim of an accident or other health emergency. First aid should

- Stop life-threatening dangers.
- Protect an injured or ill person from further harm.
- Get proper medical help for the victim.

While the First Aid merit badge and Tenderfoot, Second Class, and First Class badges provide a solid introduction to first aid, there is always more to learn. Keeping your skills sharp requires regular practice and review.

Personal First-Aid Kit vs. Patrol/Troop First-Aid Kit

The *Boy Scout Handbook* tells what items make up the **personal first-aid kit** and the **patrol/troop first-aid kit**. Always take along your *personal first-aid kit* whenever you go hiking or camping. This kit allows you to treat scratches, blisters, and other minor injuries, and to provide initial care for more serious emergencies. Everything for this kit fits in a resealable plastic bag. The *patrol/troop first-aid kit* contains a wider variety of items to treat a wide range of injuries. The kit fits easily in a fanny pack that can be carried by one Scout.

Hurry Cases

Hurry cases—stopped breathing, no heartbeat, severe bleeding, and internal poisoning—pose an immediate threat to a victim's life and require quick action by the first-aider. Assess the situation:

- Is the victim breathing?
- Is the victim's heart beating?
- Is there severe bleeding?
- Is there evidence of poisoning?

Once you have completed the quick assessment, begin treatment and have someone seek help. Start by treating the conditions that pose the greatest threat to life.

STOPPED BREATHING

The *Boy Scout Handbook* has detailed instructions on first aid for stopped breathing. Because techniques for performing rescue breathing are constantly being improved, check with your local Red Cross chapter for current methods and training opportunities.

NO HEARTBEAT

An accident or medical condition that causes stopped breathing can also cause a person's heart to stop. Performing *cardiopulmonary resuscitation (CPR)* can sometimes provide both oxygen and blood circulation for such a victim. Learning CPR requires special training from an instructor certified by the Red Cross or other appropriate organization. The *Boy Scout Handbook* gives the procedures for CPR in detail.

HEART ATTACK. Heart attack is one of the major causes of death in the United States. The *Boy Scout Handbook* tells how to be prepared to help someone else who is having heart trouble. The handbook also tells how to spot the five common warning signals of heart attack.

FIRST AID FOR SEVERE BLEEDING

Without quick first aid, the victim of a severe cut can bleed to death in a matter of minutes. The *Boy Scout Handbook* tells how to render first aid for severe bleeding, and gives recommendations for treating victims who are bleeding.

INTERNAL POISONING

Poisoning is the most frequent cause of accidental death among children. For this reason, it's important to know first aid for internal poisoning.

1. Immediately take the container of the suspected poison to a telephone. Call the poison control center toll free at 800-764-7661, or call your local emergency center at 911, or an operator, and follow the instructions you are given.
2. Treat the victim for shock and monitor breathing. Do not give anything by mouth unless you are told to do so by medical professionals.
3. Save any vomit (use any container such as a bowl, cook pot, or plastic bag). It will help a physician identify the poison and give the right treatment.

Heimlich Maneuver

Learn when it's appropriate to administer the Heimlich maneuver. Use the Heimlich maneuver whenever a choking victim nods yes but cannot speak, cough, or breathe when asked, "Are you choking?" Encourage a choking victim who is conscious and can speak, cough, or breathe, to cough up the object. Be prepared to administer first aid if necessary; have someone call for help. Practice the Heimlich maneuver, as directed in the *Boy Scout Handbook*, on a suitable training device—never on another person.

Shock

Most injuries result in some degree of shock, which prevents the circulatory system from providing enough blood to all parts of the body. Treat every victim for shock, even if no symptoms appear. Symptoms may include all or some of the following: a feeling of weakness; confusion, fear, dizziness; moist, clammy, cool, and pale skin; a quick, weak pulse; shallow, rapid, and irregular breathing; nausea and vomiting; extreme thirst. See the *Boy Scout Handbook* for information about treatment of shock.

Heat Emergencies

Avoid heat emergencies by taking a few precautions in hot weather: Drink plenty of fluids, and rest in the shade when you feel too warm. The *Boy Scout Handbook* tells how to identify and treat the different types of heat emergencies:

- **HEAT EXHAUSTION**—when the body's cooling system becomes overworked
- **HEATSTROKE**—when a victim's cooling system has stopped functioning; life-threatening

- **DEHYDRATION**—when a person loses more moisture (through breathing, sweating, digestion, urination) than is taken in; can be life-threatening

SUNBURN. Sunburn, an injury common among people who enjoy being outdoors, can easily be prevented. Use plenty of sunscreen with a sun protection factor (SPF) of at least 15. Reapply sunscreen after swimming or if you are perspiring. Use a broad-brimmed hat, long-sleeved shirt, and long pants for added protection.

Cold Emergencies

Avoid cold emergencies by wearing the right clothing when in the outdoors, eating plenty of food for energy, and drinking lots of fluids. Be prepared for bad weather, and know how to identify and treat cold emergencies.

Hypothermia occurs when the body loses more heat than it can generate. The temperature doesn't have to be below freezing for hypothermia to strike. Dehydration, exhaustion, hunger, and exposure to wind and rain increase the risk of hypothermia. A victim of hypothermia may

- Feel cold and numb.
- Display fatigue and anxiety.
- Shiver uncontrollably.
- Seem confused, irritable, and may make bad decisions.
- Stumble and or fall.
- Lose consciousness.

See the *Boy Scout Handbook* for step-by-step instructions on first aid for hypothermia.

FROSTBITE. In cold weather, learn how to identify the signs of frostbite. The toes, feet, fingers, ears, nose, and cheeks are especially vulnerable. One victim may complain that these extremities feel painful and then numb, while another might not notice anything wrong. Be alert to grayish-white patches on the skin—a sure sign of frostbite. The *Boy Scout Handbook* gives first-aid instructions for frostbite.

Other First-Aid Cases

Especially in the outdoors, Scouts will be exposed to a variety of first-aid situations.

FIRST AID FOR SIMPLE CUTS AND SCRATCHES

Cuts and scratches are *wounds*—openings in the skin and tissues that can allow germs to enter the body and cause infection.

- Wash **small wounds** with soap and water, then apply antiseptic to help prevent infection. Keep the wound clean with an adhesive bandage. On camping trips, clean and rebandage small wounds daily.
- For **large cuts**, use direct pressure to stop the bleeding. Use direct pressure to stop bleeding, and keep the wound as clean as possible to limit infection.

Cover open wounds with a sterile gauze pad or clean cloth folded to size and secure with tape, cravat bandage, or other binder.

FIRST AID FOR BLISTERS

Blisters are pockets of fluid that form as the skin's way of protecting itself from friction. Hikers can avoid foot blisters by wearing shoes or boots that fit, by changing socks if they become sweaty or wet, and by paying attention to how their feet feel. The *Boy Scout Handbook* tells how to avoid and how to treat blisters.

FIRST AID FOR FIRST- AND SECOND-DEGREE BURNS

Treatment for burns depends upon its degree.

- **MINOR (FIRST-DEGREE) BURNS OR SCALDS** will cause the skin to be tender and may cause redness. Treat immediately by holding the burn under cold water or applying cool, wet compresses until the pain subsides.
- **SERIOUS (SECOND-DEGREE) BURNS** form blisters. Place the injured area in cool water until the pain fades, then let the burn dry and protect it with a sterile gauze pad. Do not break the blisters—that makes them open wounds. **Do not apply butter, creams, salves, ointments, jellies, or sprays**—these are difficult to remove and can slow healing.

FIRST AID FOR BITES OR STINGS OF INSECTS AND TICKS

Bites from these critters can be painful, and some can cause infection. The *Boy Scout Handbook* instructs how to treat bee and wasp stings, tick bites, chigger bites, and spider bites, and has some tips for prevention.

FIRST AID FOR POISONOUS SNAKEBITES

Poisonous snakebites can cause sharp, burning pain. Avoid snakes by using a hiking stick to poke among stones and brush ahead of you while walking through areas where snakes are common. Watch where you put your hands and feet as you collect firewood or climb over rocks and logs. The steps given in the *Boy Scout Handbook* tell what to do in case of poisonous snakebite.

FIRST AID FOR NOSEBLEED

Have the victim sit up and lean forward to prevent blood from draining into the throat. Maintain pressure on the flow by pinching the nostrils together. Apply a cool, wet cloth to the area. If there are other injuries to the face and head or more severe bleeding, position the victim to keep blood out of the airway. Treat for shock and get help.

FIRST AID FOR AN OBJECT IN THE EYE

Have the person blink; tears might flush out the foreign object. If that doesn't work, with clean hands, pull the upper lid down over the lower one. The lower lashes might brush out the speck. For an object under the lower lid, place your thumb just below the lid and gently pull the lid down. Use the corner of a sterile gauze pad or clean handkerchief to lift out the speck. If that also fails, seek medical attention.

FIRST AID FOR THE BITE OF A SUSPECTED RABID ANIMAL

Rabies is a deadly disease that can be transmitted through the saliva of some warm-blooded animals such as dogs and cats. If someone is bitten:

1. Scrub the bite with soap and water to remove saliva.
2. Cover the wound with a sterile bandage and get the victim to a doctor.
3. Do not put yourself at risk by trying to catch the animal. Call police, rangers, or animal control officers who are trained to do the job safely.

FIRST AID FOR PUNCTURE WOUNDS

Puncture wounds can be caused by just about any sharp object—dangerous because these objects may introduce germs into a wound that is hard to clean.

- Let **wounds from a splinter or nail** bleed to help remove impurities. Sterilize tweezers over a flame or in boiling water before using it to removing splinters or other objects you can see. Wash the area with soap and water, apply a sterile bandage, and get medical care.
- When **removing a fishhook**, first cut the line. If a doctor is not available, you might have to do this yourself. The *Boy Scout Handbook* shows you how.

Tying Bandages

Different types of injuries require different types of bandages to help protect the area from further harm.

BANDAGING A SPRAINED ANKLE

A sprained ankle occurs when your foot bends far enough to strain tendons and ligaments. If you sprain an ankle and must keep walking, don't remove your footwear, which will support your ankle. Reinforce the area by wrapping it—boot and all—with a triangular bandage or some other strip of cloth, as shown in the *Boy Scout Handbook*. As soon as you no longer need to walk, remove your shoe and rest with your leg raised. Reduce swelling with cold, wet towels or an ice pack. Seek medical care.

BANDAGING INJURIES TO THE HEAD

Head injuries require extreme urgency and care. Seek help immediately. If the victim is bleeding but conscious, have the person hold a clean cloth over the wound and apply pressure. Keep the victim as comfortable as possible while waiting for help to arrive. When the entire scalp must be covered, use the *triangular bandage* as shown in the *Boy Scout Handbook*.

BANDAGING AN INJURED UPPER ARM

Place the upper arm in a *sling* (as detailed in the *Boy Scout Handbook*), with the forearm raised about 3 inches above level. Then, using a *cravat bandage*, hold the upper arm against the side of the body. The body itself acts as a splint to immobilize the elbow and shoulder. (Make a cravat bandage from a Scout neckerchief or triangular bandage by folding the point down to the long edge, and finish by folding downward two more times to the long edge. Tie the bandage in place with a square knot.)

BANDAGING AN INJURED COLLARBONE

Place the forearm in a sling with the hand raised higher than the elbow, then tie the upper arm against the side of the body with a wide cravat bandage. No splint is necessary. (See the *Boy Scout Handbook* for a detailed illustration.)

Rescue Techniques

RESCUE FROM A SMOKE-FILLED ROOM

If your safety won't be compromised and if you cannot wait until trained rescuers arrive, you can move a person from a smoke-filled room by grasping the person's clothing with both hands and dragging the victim toward you. Or, roll the person onto a coat, blanket, tablecloth, or whatever else is handy, and drag the victim on that. You can also get behind the victim, reach under the arms, grab the wrists, and haul the person away.

RESCUE OF A VICTIM WITH A SPRAINED ANKLE

If you must transport a mildly disabled person by yourself, use the **walking assist**. Bring one of the victim's arms over your shoulder and hold onto the person's wrist. Place your free arm around the victim's waist.

If it's not possible for the victim to walk with assistance, use the **one-person carry**. Kneel in front of the victim with your back to the victim's belly. Grasp the victim's hands over your chest, and carry the person piggyback. Keep your back straight and lift with your legs.

If two first-aiders are available, use the **four-handed seat carry**. The bearers grasp their own right wrist with the left hand, and then lock hands with each other. The patient then sits on their hands and places his arms around their shoulders.

Two first-aiders can also use the **two-person carry**. The bearers kneel on either side of the victim. Each bearer slides one arm under the victim's back and one under the thighs. They then grasp each other's wrists and shoulders, then rise from the ground with the patient supported between them.

See the *Boy Scout Handbook* for detailed illustrations depicting each technique.

Activity

Have participants do one of the following activities from *Toop Program Resources*: First-Aid Baseball, First-Aid Kim's Game, First-Aid Problems.