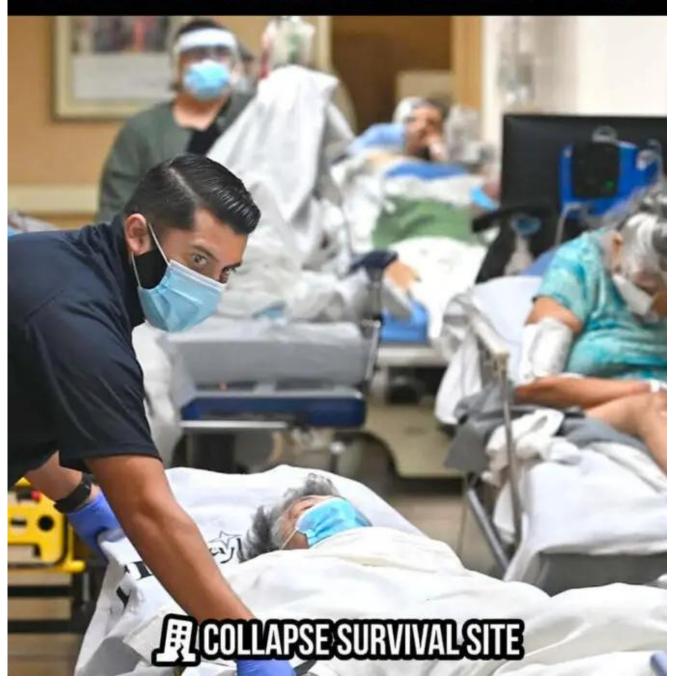
When the Hospitals are Overrun: First Aid Basics for Preppers

Estimated reading time: 36 minutes

WHEN THE HOSPITALS ARE OVERN:

FIRST AID BASICS FOR PREPPERS



Introduction

Disasters put the most severe challenges on systems and services, and catastrophic disasters historically overwhelm those systems and services. Hurricane Katrina and the Indonesian tsunami are classic examples.

<u>COVID-19</u> is the <u>latest</u> and it begs the question — will it be the last? Most reasonable people would conclude it will not be the last catastrophe to strike and it may leave us again to watch helplessly as our systems and services continue to struggle and fail.

There's been too much written about the <u>corruption of the pharmaceutical industry</u>, the <u>greed of insurance companies</u> and the heartless <u>support of the American Medical Association</u> for both of those industries and their continuing focus on the profitability of hospitals and medical practices.

The average <u>life expectancy in the United States has gone down</u> for the third year in a row and medical care continues to be either too expensive or simply unavailable for too many. Meanwhile, more nurses are going on strike, and fewer people are going into the medical field because of the skyrocketing cost of college tuition.

Even now, in a relatively stable and peaceful time; hospitals are struggling to keep up. It stands to reason that if there's a major disaster in your town, your local hospital might not be able to help you.

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Lessons Learned?

If there's any lesson learned from watching people suffer and die from the <u>failure of systems and support</u> it's that more and more, we're on our own.

From power generation to safe drinking water and food to personal defense and home security one critical preparation has become apparent in the midst of the recent <u>Covid chaos</u>—the need for self-sufficient personal healthcare and first aid.

Some of this exploration is basic but in an environment where treatment for even the most serious medical conditions can be delayed or unavailable we need to <u>expand those basics</u> to multiple levels of injuries and illnesses beyond the Bandaids.

Just as much of this exploration covers the fact that after a collapse of society hospitals will not only be overrun, but may simply be unavailable. This could also apply to doctors, emergency medical services; even conventional sources like 911 may be unavailable or more than overwhelmed.

There's always the possibility that medical outposts will occur and that some concerted efforts will be made to sustain hospitals. But triage will always be in place and only those with serious, but survivable conditions will eventually get treatment. As we'll reiterate from time to time —after the collapse we'll be pretty much on our own.

From A Plan to Prepared

It's fairly easy to <u>assemble a lot</u> of first aid "stuff."It's actually a good idea. But it's a mistake to simply toss a first aid kit in the cupboard or the car and assume all is well. For one, most standard first aid kits are designed to injuries. If the injury is significant like a deep wound that won't stop bleeding or severe burns ranging from second to third degree, <u>are you ready</u> and do you know what to do?

At a time when people are hesitant to spend hours and hours in a hospital waiting room we may have to think more proactively about treating more significant injuries ourselves. It's also possible that emergency services can't keep up with the number of calls or the disaster has made it impossible for an ambulance to travel.

In some instances, professional medical help is the only solution but even then, how well can you stabilize someone while you travel or wait for the medical help to happen? And what if it never shows up?

In a repeating scenario occurring more and more these days, some people may find themselves at least waiting in a hospital bed. A <u>hospital bed parked in a hallway</u> unattended by overwhelmed medical personnel and eventually receiving minimal treatment and an immediate release due to the lack of hospital rooms and staff.

Someone who would usually spend a day or two in a hospital to recover is sent home not only because it's the only alternative, but in the event of a contagious pandemic — safer.

As the <u>threat of disasters grow</u> from climate change to the failing infrastructure of the power grid and our water supply, the threats to our healthcare system will only grow with them , That kind of situation puts a tremendous burden on a family as the injured or ill person now has to be cared for at home. In a catastrophic disaster, injured and ill people may never make it to a hospital and home treatment will be the only and last desperate resort.

Basic Preps

This covers basic planning and an adjustment to a mindset that's more focused on enabling you and your family to deal with medical emergencies during and following a disaster. We'll get into specific checklists and more information but before we do any actual assembly it's important to understand the big picture of what and why any of us need to do this.

• Assemble <u>first aid equipment</u> but ordinary. Most first aid kits are designed for cuts, scrapes and minor burns.

They're common and should be treated properly but selfsufficient first aid supplies need to be assembled to treat a wide range of injuries and illnesses.

- Create a medical knowledge bank of books, first aid apps, bookmarked medical sites on the Internet, awareness of how to access medical advice online with doctors and specialists, and skills acquired through research, practice or classes in first aid across minor and major injuries and illnesses.
- Assess your family's unique medical needs. Many people have chronic conditions requiring routine testing, treatments, therapy, equipment, medications and anything else they need to function comfortably and stay well. Learn as much as you can about their conditions and possible side-effects or other conditions that could result and make sure you know how to provide consistent care at home if professional medical care is unavailable.
- Stockpile some items. We've all learned the hard way that some items are quickly gone from store shelves and this can be especially true for medical supplies that are reused with any frequency like bandages, antiseptics, medicines and other first aid items that are typically used once and replaced.
- Collect and store OTC medicines <u>across a range of</u> possible conditions.

OTC Medications are inexpensive and don't require a prescription. Store them in bulk in the original sealed,

unopened container and store in a cool, dark place. OTC meds will eventually expire but most will simply lose their potency. Rotate your storage as time goes on but remember that replacing any medicine may be a challenge if the disaster has a long-term duration.

- Remember the kids. OTC medicines for children of various ages have different dosage levels. If you have children in your family or group, make sure you have them covered with kid's strength medicines. This is also true for any equipment or supplies that need to be "kid-sized" like splints or braces. Treatments for children.
- Prescription medications can be difficult to stockpile but in many instances you can purchase a 90-day supply instead of 30 days. Some Canadian pharmacies will provide a 6-month supply but make sure they are a credible Canadian pharmacy and remember that insurance may or may not cover the full cost. If you or a family member is highly dependent on a pharmaceutical like insulin or Coumadin, talk to your doctor about your concerns and they may give you a larger prescription. Whether or not your insurance will comply is another question so you may have to pay an additional cost. And make sure you are aware of any implications related to the expiration of any prescription pharmaceutical. Some prescribed medicines like Tetracycline can become toxic after expiration.
- Learn about alternative methods of treatment. Some herbal remedies are surprisingly effective but make sure you understand exactly how effective they will be and all the details with regards to preparation and treatment. Most are long-term treatments that do not provide immediate results the way a pharmaceutical would

do, but some are surprising exceptions. This may motivate you to plant some unique herbs and vegetables while you learn how to use them to treat medical conditions. You should also discuss this with your doctor because some herbal medicines have adverse reactions with prescribed pharmaceuticals.

- Take the time to actually practice some first aid and medical skills. There are online. Practice applying a tourniquet. Practice wrapping a limb with a splint and wraps; take the time to practice the simple and critical techniques. You don't want to be doing this for the first time in the fog of panic that accompanies most serious injuries.
- Share your knowledge with your family. You never know who may have to apply the skills and shared awareness of what could happen, and what needs to be done to treat it could make for a calmer and more understanding patient in the event that some level of first aid needs to be applied to them. Approaching someone in pain with a suture needle for the first time is not a best case scenario. Awareness of what can happen and what must be done is a good heads-up for all concerned.
- An emergency dental kit is a good idea. We tend to get so focused on injuries and illnesses affecting our bodies that we sometimes forget something as basic as our teeth.

First Aid Kits

An easy way to approach some of this is to buy a <u>trauma level</u> <u>first aid kit.</u> They're expensive but they have a large range

of supplies and equipment to handle some of the most serious medical emergencies.

Most are stocked with the equipment that paramedics carry with them for a medical emergency. Just make sure you take the time to look carefully at the contents to make sure it not only has all of the items you think you may need, but sufficient quantities of frequently used or disposable items.

You could also yourself. Some of us already have some supplies on hand and others may have <u>some financial challenges</u> that make a significant and difficult. If that's the case you can find many quality first aid items at a dollar store or improvise solutions.

These lists are designed around the needs of one person. Multiply the disposable supplies and OTC medicines by the number of people in your family or group to determine a total quantity.

Regardless of the circumstances, you could always approach this gradually and build up your equipment and supplies using the following checklists to make sure you are well stocked and supplied for any self-sufficient, medical emergency.

A note on supply quantities: Anytime we recommend a quantity of any item it's for one person over the course of a year. The quantities assume treatment of potential injuries from a serious event or disaster. Many can also be used for everyday first aid. Regardless of the severity, most of us don't get injured every day. If you feel any of the quantities are more or less than you would actually need, increase or decrease based on your personal level of concern or afflictions common to your location or situation.

Minor Injuries and Illnesses

Minor injuries are common and can usually be treated at home.

The supplies and equipment are fairly straight forward and the conditions rarely life threatening. The minor injuries come from infection and the use of topical antiseptics is both a standard and critical part of any first aid treatment for minor injuries. The knowledge and skills to treat minor injuries and illness can be found in most first aid manuals or through video tutorials online.

The following identifies symptoms and treatments based on recommendations from Clinic. At times they recommend seeing a doctor. If none is available in person there are options to consult with doctors online who can also prescribe pharmaceuticals that can be delivered or picked up from a local pharmacy.

Colds and flu

- The standard recommendation for treating colds and flu is to drink plenty of fluids and bed rest. However, a severe infection you put you at a high risk of complications. Your doctor can prescribe you a range of antiviral drugs to treat you including:
- Oseltamivir (Tamiflu)
 - Zanamivir (Relenza)peramivir (Rapivab)
 - Baloxavir (Xofluza).

These pharmaceuticals are taken a variety of ways. Zanamivir is taken through an inhaler and as a result should be avoided by anyone with asthma, lung disease or any other chronic respiratory conditions. In that instance a drug like Oseltamivir which is taken orally is a good alternative.

They are no miracle cures but can shorten the flu by a day or two and prevent further serious complications.

Cuts and Scrapes

Scrapes remove an outer layer of skin but sometimes don't bleed or only bleed topically. Cuts penetrate the skin and cause minor bleeding. Here are some general guidelines for the treatment of cuts and scrapes:

- 1. Wash your hands. This is standard procedure to prevent infection.
- 2. Stop any bleeding. Typically, minor scrapes and cuts will stop bleeding on their own. If it continues to bleed, apply a bandage, gauze pad or sterile cloth with gentle pressure. Also, keep the wound area elevated if possible until the bleeding stops.
- 3. Clean the cut or scrape. The first step is to gently rinse with water. You can use tap water and just keep the wound under the running water. You should also wash around the wound but try and keep the soap out of the wound. If you see any dirt or debris in the wound, remove with tweezers or rinse it out. If you can't get all of the debris out of the wound, see your doctor.
- 4. Apply an antiseptic or antibiotic. If you don't have a topical antibiotic like Neosporin you could apply Vaseline. The idea is to keep the area moist to help prevent scarring. If the ingredients in any antiseptic ointment causes a rash, stop using it.
- 5. **Apply a bandage.** This depends on the size of the wound. For smaller wounds use a Bandaid. Larger wounds require a gauze pad with paper tape or you may need to wrap with rolled gauze if on an arm or leg.
- 6. Change the bandage. You should do this at least once a day or whenever the covering becomes dirty or wet.
- 7. **Consider a tetanus shot.** If your cut or scrape is dirty or deep and you haven't had a tetanus shot in five years —get one.
- 8. **Sign of infection.** If you see redness, swelling, pus, drainage, increased pain or warmth it's a sign that an

infection has set in. See a doctor.

Sprains

In some instances, <u>a sprain</u> can be more painful than a broken bone.

- Watch for any swelling or tenderness wherever the sprain has occurred. The specific location and intensity of any pain can help you determine the nature and extent of the injury.
- Get an X-ray to rule out a serious bone injury or fracture.

Remember the **R.I.C.E. approach** for sprains. This stands for rest, ice, compression and elevation.

- Rest. Don't do anything. Especially activities that can aggravate the pain and discomfort. Simply avoid physical activity.
- Ice. Try to apply ice as soon as possible. You can use an ice pack or immerse the sprained ankle or wrist in a slushy bath of water and ice for 15 to 20 minutes and repeat for 2 to 3 hours. You might want to do this every day for 3 to 5 days after the injury first occurs.
- Compression. This can help stop swelling after your ice treatments. It usually involves wrapping the affected area with an elastic bandage (ACE) until the swelling stops. The key is to not wrap it too tightly and cut off circulation. A common recommendation is to start wrapping the sprain at the end farthest from your heart and wrapped towards your heart. If there's any pain, loosen the wrapping. You should also loosen if you feel numbness or swelling shows up above or below the wrap.
- Elevation. Elevate the injury above your heart if you can. This is especially important at night. A couple of

pillows can do the trick. Gravity helps to reduce the swelling.

Take an over-the-counter medication like <u>Ibuprofen</u> or <u>Acetaminophen</u>.

Slowly begin to use the injured limb after a couple of days or when the pain allows. Go slow and you should see gradual improvement in your ability to support your weight and to move with lessening pain. Be patient, recovering from a sprain can take days to weeks to even months.

Insect Bites and Stings

Reactions to insect bites and stings are usually mild resulting in itching, redness, stinging (depending on the insect) or some minor swelling. On rare occasions a severe reaction can occur especially if the sting is from a wasp, hornet, bee or more exotic insects like scorpions and fire ants. Remember too that some insects transmit disease such as Malaria, Lyme Disease and West Nile Virus.

For mild reactions:

- Get away from the area where the sting or bite occurred.

 Many stinging insects live in nests.
- Remove the stinger if you see one. A credit card rubbed gently over the stinger can work or use your fingernail or tweezers.
- Wash the area with soap and water to prevent infection.
- Apply a cold, clean rag filled with ice to reduce the swelling and relieve the pain.
- If the sting or bite is on an arm or leg, elevate it.
- Think about applying an ointment like calamine lotion, hydrocortisone cream or even a paste made out of baking soda and water. Do this several times a day until the pain and swelling stops.

• If the pain and swelling persists longer than a day or two you might want to see a doctor.

For severe reactions:

You may have to call 911 or go to a hospital if any of the following occurs after a bite or sting:

- Sudden swelling around the lips, throat or eyelids
- Any difficulty breathing. This is a sign of a severe allergy and could lead to <u>anaphylactic shock</u>
- Heart racing or rapid heartbeat
- Hives
- Vomiting, cramps or general nausea
- Any scorpion sting should be taken seriously especially with children

Take these actions immediately for severe reactions

- Loosen any tight clothing and treat for shock by covering the person with a blanket. Avoid the temptation to give them anything to drink.
- Some people with allergies to bites and stings carry something called an Epi-pen. This injects <u>epinephrine</u> to counteract the allergic reaction. Ask them if they have one and if they need help injection it. This is done by pressing the Epi-pen against their thigh and holding it in place for several seconds.
- Consider CPR if the person stops breathing, is unresponsive and shows no signs of circulation or movement.
- If vomiting begins make sure you or the stung person is sitting in a position to prevent choking.

Rashes and Skin Irritation

Various plants from Poison Ivy to Stinging Nettle can cause rashes on the skin.

- Cold water and soap are a standard treatment in addition to topical anesthetics.
- Some rashes are symptomatic of more serious conditions like shingles, psoriasis, an allergic reaction or poisoning so the condition should be monitored for improvement.
- Apply a topical skin ointment like cortisone cream (<u>Cortizone 10</u>) at least for a few days.
- Soak the area in a cold-water bath and add a half cup of baking soda or a soaking product like <u>Aveeno</u>.
- Take an antihistamine like <u>Bendryl</u>. This will not only help you sleep but will combat many allergic reactions. A non-drowsy alternative is <u>Claritin</u>.

First Degree Burns

First degree burns usually cause redness and pain.

- Common treatment is running the burned area under cold water.
- The use of OTC burn creams or topical anesthetic sprays and sometimes simple bandages to cover the burned area.

Eye Redness

Red eye is a common problem that can affect one or both eyes. The redness associated with red eye comes from blood vessels on the surface of your eye that is expanded (dilated) due to some form of irritation.

The cause of the irritation can emerge from a variety of

causes. The most common cause is when someone gets something
in their eye. General treatments include:

- Start by washing your hands with soap and water.
- Use a stream of warm water to gently flush the object out of the eye. You could use an eyecup or a clean shot glass. Make sure the rim of the glass is resting on the bone around the base of the eye socket.
- Take a shower. It's the easiest way to direct a gentle stream of warm water into your eyes. You could also hold your eyelid open to thoroughly flush the eye.
- •Always remove contact lenses before flushing or irrigating your eyes. Often the thing in your eye can get under the contact lens.

Supply Checklist for Minor Injuries

Many of these items are what you'll find in a common kitchen first aid kit. The only caveat is that disasters and other afflictions that occur over the course of a year may exhaust the standard supply of some items in a common first aid kit. There are also <u>pre-packed first aid cabinets</u>.

Here's a starting point for what one person might need to cover minor injuries and illness over a disastrous year:

- 100 Adhesive bandages in assorted sizes
- 40 gauze pads in assorted sizes
- 5 rolls of gauze wrap
- 2 rolls of medical adhesive tape
- 12 butterfly bandages
- 2 tubes of topical antiseptic like Neosporin
- Topical anesthetics like <u>Bactine</u> cream and spray, hydrocortisone cream or Cortisone-10, calamine lotion, <u>anti-itch cream</u>, <u>sunburn relief cream</u>, insect bite relief cream or spray. It may be wise to buy at least 1

of the entire range of topical anesthetics due to the multiple conditions they can treat.

- 1 bottle of saline eye rinse and eye drops.
- 4 eye patches
- OTC medicines including:
 - 100 pain relief pills or caplets
 - 50 decongestant pills or caplets
 - 50 allergy relief tablets (antihistamine) like Benadryl
 - 1 bottle cough medicine like Robitussin

Equipment Checklist for Minor Emergencies

Most equipment for any medical treatment is diagnostic although some are therapeutic and <u>some surgical</u>. One piece of equipment can typically be used to assess the condition of multiple people so the quantity is usually one unless it's designed for unique parts of the body like a left hand versus right hand. Sizes can also vary depending on the age of the person. We're also listing non-digital equipment that doesn't use batteries which may be unavailable in a disaster.

- Traditional thermometer
- Blood pressure cuff
- Stethoscope
- Wrist sprain braces. One for each hand and additional if needed for children.
- Ankle sprain braces. One for each foot and additional if needed for children.
- 2 arm slings

Major Injuries and Illness

Major injuries and illness are alarming in their nature and often life-threatening. First aid and medical treatment often requires immediate attention and recovery is sometimes measured in weeks and even months.

The knowledge and skills to treat major injuries and illness is potentially complex and any reference materials from books should also be accompanied by video tutorials online and if possible, actual training and practice for treatments such as CPR, the Heimlich maneuver, suturing, 2^{nd} and 3^{rd} degree burn care and broken bones.

The following symptoms and treatments are from the Mayo Clinic:

Wound Care

Wounds penetrate the skin into muscle. <u>Deep wounds</u> can potentially cut veins and arteries. Treatments include:

- The use of pressure or tourniquets to control heavy bleeding.
- Sterile water to thoroughly cleanse the wound.
- Topical antiseptics
- The use of either butterfly bandages or sutures to close the wound.
- They are then dressed with bandages, gauze or wraps depending on the location and size of the wound.

Broken Bones

It's difficult to <u>diagnose a broken bone</u> without an X-ray. Complicating matters are the variety of bone breaks affecting so many different parts of the body.

Usual symptoms are the inability to use the limb affected, intense pain, redness and swelling. You'll need to either go online or consult a medical reference book to understand the symptoms and treatments for various broken bones. Some breaks have to be set and that can be dangerous for a non-professional.

General treatments include the use of:

- Pain relievers
- Splints and elastic wraps (<u>ACE bandage</u>)
- Slings

And the RICE therapy used for sprains including:

- **Rest**. Avoid activities that cause pain, swelling or discomfort. But don't avoid all physical activity.
- Ice. Even if you're seeking medical help, ice the area immediately. Use an ice pack or slush bath of ice and water for 15 to 20 minutes each time and repeat every two to three hours while you're awake for the first few days after the injury.
- Compression. To help stop swelling, compress the area with an elastic bandage until the swelling stops. Don't wrap it too tightly or you may hinder circulation. Begin wrapping at the end farthest from your heart. Loosen the wrap if the pain increases, the area becomes numb or swelling is occurring below the wrapped area.
- **Elevation.** Elevate the injured area above the level of your heart, especially at night, which allows gravity to help reduce swelling.

Every effort should be made to get someone with a suspected broken bone to professional medical care. If that's impossible, continue to carefully monitor the injured person and consult multiple sources for more information.

2nd and 3rd Degree Burns

2nd and 3rd degree burns are serious and should be treated by a medical professional if at all possible. Symptoms include:

- 2nd-degree burn. A second degree burn not only affects the outer layer of skin (the epidermis) but the under layer of skin (the dermis). It results in both redness and swelling and is often accompanied by red, white or even splotchy skin. Blisters usually develop and the pain is often severe. Any deep second degree burn can lead to permanent scarring.
- 3rd-degree burn. This is the most serious burn and it reaches beyond the epidermis and dermis to the fat layer of skin and even muscle. The area can be burned black, brown or even white. The skin often appears leathery. A third degree burn can permanently destroy nerves causing chronic numbness.

Treatments vary depending on the severity and the percentage of the body that has suffered the burns. Recovery can take months and scarring is common.

- Water-based treatments. This is more complicated than it sounds and usually involves a form of treatment called "mist therapy." It's used by medical professionals to both clean and stimulate the affected tissue.
- Pain and anxiety medications. These are often administered by medical professionals to manage the intense pain that often accompanies a third-degree burn. Possibilities include morphine and other anti-anxiety medications. This is often done during wound dressing changes when the pain is most severe.
- Fluid therapy to prevent dehydration. Intravenous fluids

- (IV) are often administered to prevent dehydration and the possibility of organ failure.
- Ointments and burn creams. Common topical treatments for severe burns include <u>bacitracin</u> and <u>Silvadene</u>. Both help burn wounds to close, heal and prevent infection.
- Drugs to fight infection. It's quite possible that a patient with third-degree burns will receive an antibiotic injection of IV. This could also include a tetanus shot.

Choking

<u>Choking</u> is a very common occurrence and everyone should have a good working knowledge of how to determine when someone is choking and various treatments.

Choking happens when an object is caught in the windpipe or throat causing a blockage in the air-flow. In adults this is often as a result of a piece of food. Young children and infants often swallow all manner of objects. Immediate first aid is critical due to the fact that choking cuts off oxygen to the brain.

The class is signs of choking are when someone clutches their hands to their throat. There are other signs as well:

- The sudden inability to talk
- Squeaking sounds when trying to breathe
- Obvious difficulty breathing or very noisy, raspy breathing
- Persistent coughing which may be loud or a hoarse whisper
- Flushed skin turning bluish or pale in color
- Blue or dusky appearance of the lips, skin and fingernails
- Non-responsiveness or total loss of consciousness

If the person is coughing they should be encouraged to keep coughing. Coughing will often expel the object. If the person can't talk, laugh or cry and continues to choke the approach to take is called the "five-and-five."

- 5 back blows is the first step. You do this by standing to the side of the choking person or in the case of children, kneeling next to them. Place one arm across the chest to support them and bend them over at the waist. You want their body parallel with the ground. You then deliver five back blows between the shoulder blades with the heel of your hand.
- The Heimlich maneuver. There are classes where you can learn this maneuver on medical dummies. It involves wrapping your arms around their waist while tipping the person forward slightly. You make a fist with one hand and press heard into the abdomen and pull in with a quick, upward thrust. This is similar to lifting the person up. Do this 6 to 10 times until the blockage is dislodged or do 5 more blows on the back and repeat the Heimlich.
- Do the Heimlich before calling 911. If another person is available, ask them to call 911 but continue the Heimlich and back blows until emergency medical help arrives. That assumes that emergency services are still available to some degree. If the person becomes unconscious perform CPR.

And here is how to do the <u>Heimlich on children</u>.

Performing the Heimlich on yourself:

-Start by calling 911 if you can. Even if you can't

speak, any noise will alert most 911 operators that something is wrong at your number and they may dispatch to your address if calling from a cell phone. If emergency services aren't available you're on your own.

- Place your fist on your stomach just above your navel.
- Grab your fist with your other hand and bend over a countertop or chair.
- Pull your fist in and up.
- If you or another person is obese place your hand a little bit higher under the breastbone and proceed with the in and upward thrusts.
- Repeat these steps until the blockage is dislodged.
- If the blockage is visible in the back of your throat while looking in a mirror, try to reach in with your finger and sweep it out but don't push it farther down.

Clearing the airway of a choking infant:

- Call 911 if emergency services are available
- Sit and hold the infant face down on your forearm. Rest your forearm and the infant on your thigh. Make sure you support the infant's head and neck with your head and place the infant with its head lower than the trunk of its body.
- Begin by thumping the back of the infant gently with the heel of your hand. The idea is to use gravity and the gently blows of your hand to release the blockage.
- A Heimlich maneuver on an infant must be done gently. Turn the infant face up on your forearm and rest your arm and the infant on your thigh. Place 2 fingers at the center of the infant's breastbone and give 5 quick but gently compressions. You only want to press down about an inch and a half. Make sure you let the infant's chest rise again between each one of the 5 compressions.
- Alternate the back blows and Heimlich until the object is dislodged.

- If the child is older than age one and still conscious use only abdominal thrusts.
- If the infant loses consciousness perform CPR.
- Devices used to suck an obstruction from an infant's
 throat can also be used if all else fails.

The best step to take is a certified first-aid training course that specializes in the Heimlich maneuver and CPR for all ages.

Poisoning

Poisoning is difficult to diagnose in many instances. So many of the symptoms of poisoning are similar to other conditions that it can be difficult to recognize. Other conditions that often mimic poisoning symptoms include stroke, alcohol intoxication, seizures, insulin shock and other reactions to medications and allergies. Specific symptoms of poisoning include:

- An off, chemical odor on the breath smelling like a solvent, paint thinner or gasoline
- Vomiting and abdominal cramp[s
- Redness or the appearance of burns around the lips and mouth
- Difficulty breathing or excessive coughing and choking
- Drowsiness and intense fatigue
- Confusion of the mental state inconsistent with a person's typical behavior

Often, many of these symptoms will happen concurrently. If you think the person has been poisoned, look for chemical bottles or cans; empty pill bottles or medicine packages, scattered pills or spilled chemicals, and stains, odors or even burns on the person the objects nearby.

With children the range of possibilities increases from a

swallowed button battery to medicated patches like Nicoderme or any other chemical under the sink or in the garage. Here are various ways to treat someone who you suspect has been poisoned:

- Call 911 if emergency services are available.
- Call the poison helpline at 800-222-1222. Hopefully they're still responding to calls.
- If swallowed poison, remove anything in the person or child's mouth. If you suspect a specific chemical like a household cleaner, read the label for any directions for how to treat accidental poisoning.
- For poison on the skin, remove contaminated clothing while wearing gloves and rinse the skin for 15 to 20 minutes with water either with a hose or in a shower.
- For poison in the eye, flush the eye continually with lukewarm water in a shower or sink for 20 minutes until emergency medical services arrive.
- If the poison has been inhaled, move the person to fresh air as soon as possible.
- If vomiting occurs, support the person by the shoulders. Turn their head to either side if vomiting while semiconscious or non-responsive.
- Collect any suspected pill bottles, chemicals or any other poisoning possibility and give to emergency medical services when they arrive. Make sure to inform them that you are not sure what if any of them are the source of the emergency.
- Perform CPR if the person appears to have stopped breathing.
- Activated charcoal is often used to absorb poisons in the body and is a standard practice in many poisoning cases.

Animal Bites

The severity of animal bites varies depending on the amount of injury and the species of animal. For injuries that only break the skin as a result of a bite or claw wound:

- 1. Clean and wash the wound with soap and running water.
- 2. Apply an antiseptic ointment or cream and bandage the bite or wound.

Here are some other things to keep in mind:

- If the wound is deep, or the skin is torn or bleeding significantly you need to initially treat it like all deep wounds with a clean cloth to stop the bleeding followed by a pressure bandage.
- If there are any signs of swelling, oozing, pain or redness you should treat the wound for infection with continuous changes of dressings, additional antiseptic ointment and consider seeing a doctor.
- If the bite was from a cat or dog, try to determine if the animal has an up to date rabies vaccination.
- It it's a wild animal bite, see a doctor and they may recommend a rabies shot as a precaution. Bats are the worst and can bite without leaving any signs. In fact, if you are in an area with bats or awaken to find a bat in your bedroom you should see a doctor for a quick body checkup and possible rabies shot.

Venomous Snake Bites

This is serious and while symptoms can vary, amputation and death is always a possibility. According to the CDC, 7,000 to 8,000 people are bitten by venomous snakes in the U.S. every year. Here are some of the common signs of a venomous bite:

- Clearly defined puncture marks at the site of the wound usually topped by two larger holes of wounds from the fangs.
- Swelling, redness, bleeding, blistering, and bruising around the area of the bite.
- Nausea, diarrhea and vomiting (a common poisoning symptom)
- Severe pain at the site of the bite
- **Difficult and labored breathing** and in extreme cases breathing can stop altogether.
- A rapid heart rate, low blood pressure and a weak pulse
- Blurred or disturbed vision
- A metallic, rubber or minty taste in the mouth
- Tingling and numbness around the face or the limbs (usually localized to the area of the bite)
- Increased sweating and salivation (another common poisoning symptom)
- Muscle contractions and twitching

More often than not, combinations of the above symptoms occur

First Aid for Venomous Bites

- Call 911 immediately if emergency medical services are available.
- A snake bite kit is an inexpensive and reliable way to withdraw venom as a result of a snake bite.
- Antivenom will often be administered by a doctor or hospital. The sooner the antivenom is given the soon the irreversible damage from the venom can be stopped. This is why many venomous bites result in amputation. Without hospitals you're only hope is that some kind of access to medical treatment is available with antivenom in stock.
- Lie down or at least sit with the bite in a neutral position neither above you or below you if possible.

Most venomous bites are on the legs, hands or arms.

- Immediately remove rings, watches or any other constricting jewelry in proximity to the bite.
- Thoroughly wash the bite with soap and water.
- Use a snakebite kit if you have one. It would be wise to read the directions and understand how to do this long before you are ever bitten.
- Bandage the bite with a sterile dressing and antiseptic ointment.
- **Use a marker or pen** to indicate the area of swelling or tenderness after the bite and write the time next to it so you and any medical professional can monitor any advancement.

DO NOT DO ANY OF THE FOLLOWING:

- Don't pick the snake up or try to trap it. You should never handle a venomous snake even if it's dead or its head is decapitated.
- Don't wait for symptoms to appear. Act fast and seek medical help if you can find it.
- It's not recommended that you apply a tourniquet.
- Don't slash the wound or the bite area.
- Never suck out the venom. Either use a snakebite kit or find some other way to draw the venom out if you must.
- Avoid alcohol. It is not a pain killer.
- Don't apply ice. Some argue that it slows down the spread of the venom. It doesn't.
- Avoid folk remedies
- Do not take aspirin or any other pain relievers, especially those that may thin the blood.

Shock

Any severe injuring or medical condition can result in shock. Signs and symptoms may vary and different people respond to

events in different ways. Here are some common symptoms that can occur singly or in combination:

- Very pale or ashen colored skin
- Clammy, cool skin
- Bluish tinge appearing on fingertips or finger nails.

 This appears as gray in people with darker complexions.
- A very rapid and pounding pulse
- Shortness of breath and rapid breathing
- Enlarged pupils
- Vomiting and nausea
- Head spinning; dizziness and or fainting
- Weakness and general fatigue
- Noticeable changes in behavior or mental state including agitation, anxiousness and panic

First Aid for Shock

- Immediately lay the person down with their legs elevated unless the injury occurred to the legs and causes increased pain.
- Begin CPR if the person is not showing obvious sign of life
- Encourage the person to keep still. They will be very anxious, so reassure them.
- Remove any tight clothing or at least loosen buckles, buttons and other restraining items.
- Cover the person with a blanket your jacket
- Cover any bleeding wounds and keep pressure to prevent more bleeding.
- If the person is vomiting or bleeding from the mouth, turn them on their side to avoid choking.

Supply Checklist for Major Injuries

- Expedition Level first aid kit
- Eye first aid kit
- Snake bite kit

Traumatic Injuries and Illness

Unfortunately, there are occasions where no amount of supplies and equipment can heal or help someone suffering from a traumatic injury or illness. Professional medical care is the best solution.

What can be done falls in the category of short-term care to maintain someone as much as possible until professional medical care can be found. CPR is one example of how someone can be somewhat stabilized but there are limits to how much anyone can do with some conditions and afflictions.

The subjects below are linked to more information. That information should be used as a starting point for additional information. What's critical is to find professional medical help as soon as possible. In the meantime, do what can be done to keep them as stable as possible.

- Compound fractures
- Broken neck or back
- <u>Heart failure</u>
- <u>Heart attack</u>
- Stroke
- Gunshot and knife wounds

There are <u>trauma first aid kits</u> that can at least provide some of the tools for traumatic conditions. Some of the <u>first aid</u> <u>field manuals</u> from various armed services also contain

information about how to treat traumatic injuries.

Pet and Livestock First Aid

Life is filled with ironies and it may actually be easier to see a veterinarian than a doctor in a hospital someday, but following many disasters even a trip to the vet can be out of the question.

<u>Pets</u> and livestock are subject to the same level of injury and illness as people and there are couple ways to prepare.

Pet First Aid Kits

There are custom care. They include unique tools and supplies mostly for cats and dogs. It's worth at least looking at the contents of these kits if not just buying one. They're relatively inexpensive and easy to <u>buy online</u>.

Pet First Aid Books

The ability to diagnose and treat an injury or illness in pets is sometimes similar and sometimes very different from first aid approaches for people. It's worth taking the time to buy at least one book on pet first aid and reading about common conditions and treatments.

Livestock

People who raise livestock usually are aware of common conditions that can affect farm animals. If you are new to raising livestock even if it's just some chickens in a chicken coop, it's worth taking the time to read about ways to diagnose.

First aid kits and treatments for farm animals can be found at farm and feed stores or online. If you access a <u>veterinary</u> <u>medicine site online</u> you can buy medicines without a prescription but do your research to make sure you have an

accurate diagnosis and use the proper medicines and dosage.

Some missionaries have reported using <u>veterinary medicines on humans</u> but that is a very dangerous proposition given <u>the range of dosages and the biological and physiological differences</u> between people and farm animals.

Assembling Your Medical Knowledge Bank

Books

Books are a reliable way to quickly access medical knowledge and information. They're indispensable is everyday communication like cell phones and the Internet are compromised due to a disaster. They also are an easy way to learn about medical conditions and their treatment.

We've covered a range of books here from the everyday to the catastrophic. Across all of them there are some redundancies but it's wise to have at least two or three of them on the shelf:

- <u>Survival Medical Handbook</u>
- <u>U.S. Army First Aid Manual</u>
- <u>Survival Surgery</u>
- <u>Emergency Wound Treatment</u>
- <u>U.S. Army First Aid Field Manual</u>
- <u>The Merck Manual in Layman's Language</u>

Apps

Numerous apps for the iPhone and Android have been developed by medical resources from the Mayo Clinic to the Red Cross. Their greatest value is their portability especially if you are in a remote location away from home without access to books or a computer.

They cover a range of conditions from simple to significant. Some are free. The most reliable are those that are small enough to fit on your phone's hard drive so you don't have to depend on cellular service to access the information.

- American Red Cross
- Basic First Aid
- Red Cross How to Prepare for Emergencies
- Cat and Dog First Aid

There are also <u>articles online</u> about a range of first aid apps tailored to specific conditions and situations.

Skills You Should Learn and Practice

Having the knowledge and ability to treat medical emergencies is more important than any collection of medical supplies and equipment. Here are some critical skills that are worth studying and practicing. Hands-on classes are best and are often offered at local fire stations, hospitals and community colleges.

Many of the links are to video tutorials.

- Basic wound care for cuts, scrapes and deep wounds
- Methods to stop bleeding
- Suturing and practice with a suturing kit
- Burn treatment and continuing care
- Sprains and breaks and methods of treatment
- CPR
- <u>The Heimlich maneuver</u>
- Heimlich on Children
- <u>Diagnosis</u> and treatments for poisoning
- Eye first aid
- Rashes and other skin conditions

Alternative Medical Treatments

At a time where supplies, equipment, or medicines are not available the only solution is to improvise. Some of these alternatives are fairly simple like improvising a sling or a tourniquet. Others are scientifically proven like the pain relief benefits of willow bark or the use of homemade, activated charcoal for poisoning. Others are derived from native medicine including the use of plants as bandage alternatives or herbal remedies.

Where things get a little complicated is when using herbal remedies as a replacement for pharmaceuticals. It's true that some plants have natural anti-biotic properties but there are many variables affecting dosage, potency and side-effects that make the overuse or total reliance on herbal remedies a cautionary tale.

Do extensive research and due diligence and be mindful of any cautions. In a dire emergency it may seem like herbal remedies are the only alternative but the critical thing is to not make things worse in a desperate effort to make things better.

- Improvising a sling
- Improvising a tourniquet
- Improvising a splint
- Natural alternatives to bandages
- Natural pain relievers
- Making your own activated charcoal
- Natural remedies for rashes and other skin conditions
- Natural immune system boosters
- Medical uses for raw honey

Books are also an excellent reference especially across the

variety of natural and herbal remedies.

- Native American Herbal Remedies
- Herbal Medicine
- Modern Herbal Medicine
- Herbal Antibiotics
- Herbalism for Beginners

Conclusion

The breadth of information we covered may seem imposing and it is. One approach could be to start small with a focus on possible medical emergencies that could occur based on where you live and the situation surrounding you. As you continue to think about other possibilities you can extend your level of supplies and knowledge.

Another approach is to divide and conquer. Sit down with the family and ask people what they are interested in learning more about and let each family member become the resident expert. They can teach others as a family activity.

Better yet, try to <u>form a community</u> of neighbors, family and friend with varied skills. One set of skills to pursue are those with various degrees of medical knowledge. After a collapse they may be the only medical resource you have and they will literally be lifesavers.

You could also dedicate 30 minutes a day to either learning, purchasing, or improvising the things you need to have and need to know to deal with medical emergencies. It would make sense if everyone in your group did the same.

No matter how you approach it, having the knowledge, tools and supplies to deal with a medical emergency is a comforting skill. Hopefully you never have to deal with a severe injury or illness, but if you do you'll at least have the confidence

to find a solution —and maybe save a life.

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