

Event 203 First Aid Webelos Training Material

The First Aid competitive event for Camperall will consist of 2 different First Aid components, a **scenario challenge** and a **stretcher course challenge**.

The **stretcher challenge** will include constructing a stretcher from two six foot poles and a military issue blanket as shown below and transporting a patrol member over a designated distance. The stretcher challenge will be timed.

<p>BLANKET STRETCHER</p> 	<p>This technique requires two poles and a blanket.</p> <ol style="list-style-type: none">1. Place the blanket down on the ground.2. Place one pole approx. 1 foot from the middle of the blanket.3. Fold the short end of the blanket over the first pole.4. Place the second pole approx. 2 feet from the first (this distance may vary with victim or blanket size).5. Fold both halves of the blanket over the second pole.
---	---

During the first aid challenge, each Patrol will be presented with one of five different **first aid scenarios** dealing with any of the following first aid situations.

1. Stopped Breathing
2. Internal Poisoning
3. Burns
4. Hypothermia

Each Patrol will need to know whether or not a scenario is one of the hurry cases for first aid as well. (Stopped breathing, internal poisoning will be the two tested on.)

Event 203 First Aid Webelos Training Material

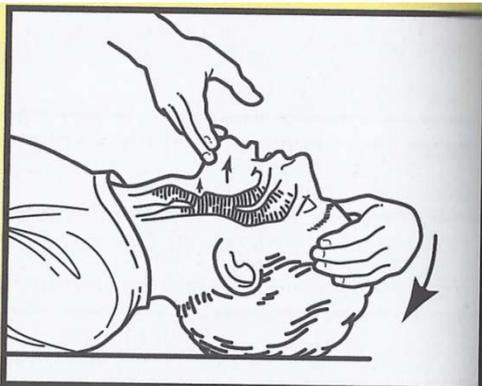
As well, the following detail first aid information is pulled directly out of the BSA Handbook:

1. Stopped Breathing:

A human brain will survive without oxygen for no more than about five minutes before suffering serious damage. At normal temperatures, a person cannot live without air for more than ten minutes. Rescue breathing can keep someone alive until he recovers or help arrives.

First Aid for Stopped Breathing:

1. Open the airway
 - a. The airway is the passage that allows air entering the mouth or nose to reach the lungs. A person cannot breathe if his airway is blocked by the back of the tongue, a chunk of food, or anything else.
 - b. If a victim is unconscious, place him on his back. Clear his tongue from his airway by pressing on his forehead with one hand and lifting his chin with the other to tilt his head back. (If you think his neck might be injured, keep his head still and thrust his jaw forward.)



- c. Look in his mouth for gum, food or other obstructions. Remove them by sweeping them out with your index finger.

Someone who is choking on food might grasp his throat to signal that he is unable to breathe. Treat by performing the Heimlich maneuver.

- d. Protect the airway of any accident victim. If he begins to vomit, turn him on his side so that the vomit comes out of his mouth rather than getting into his lungs.

2. If the airway seems to be open and the victim is still not inhaling and exhaling, begin rescue breathing.

- a. Place a mouth-barrier device over the victim's mouth. That will protect both of you from any orally transmitted diseases.
 - b. While maintaining the head tilt or jaw-thrust, pinch the nostrils, seal your mouth over the victim's mouth, and blow into it to fill his lungs. (For a child, seal your mouth over both the mouth and nose, then breathe gently.) Watch to see if the chest rises.
 - c. Remove your mouth and take another breath. Look for the victim's chest to fall as he exhales.
 - d. Repeat every 5 seconds for anyone over 9 years of age, every 3 seconds for anyone 9 or under.



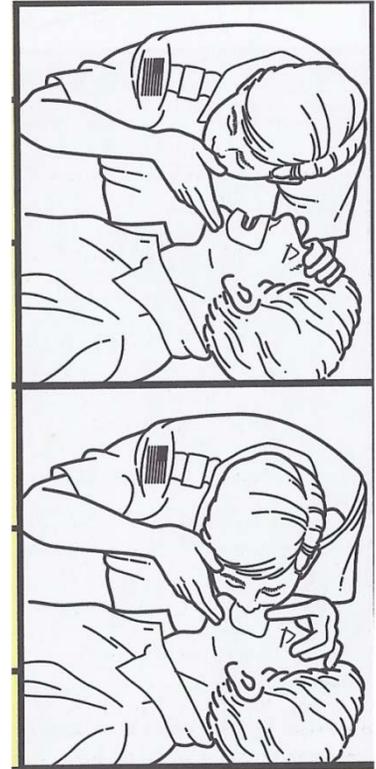
Event 203 First Aid Webelos Training Material

If the victim's chest does not rise and fall, no air is reaching his lungs. Follow these steps:

- e. Reposition his head and jaw so that the tongue does not block the airway.
- f. Check again for obstructions in his mouth.
- g. Perform the Heimlich maneuver to remove anything lodged in the throat.

Resume rescue breathing. Continue until a medic tells you to stop or it becomes physically impossible for you to keep going.

Techniques for performing rescue breathing are constantly being improved. Check with your local Red Cross chapter for current methods and training opportunities.



2. Internal Poisoning:

Among children, poisoning is the most frequent cause of accidental death. Young children will swallow almost anything: fuels, poisons, insecticides, battery acid, peeling wall paint, pills from the medicine cabinet, weed killer from garden supplies. If you see items in your home that could be dangerous to a child, move them to safe storage.

Some mushrooms, fungi, berries, and leaves are poisonous if swallowed. Eat no wild plants unless you are certain they will not harm you. Overdoses of drugs can also be poisoning emergencies.

A poisoning victim might suffer nausea and stomach pains. He might vomit and there might be burns around his mouth. His breathing might be different from normal. Often the most important sign of poisoning is the presence of the poison – open pill bottles, spilled household cleansers, or other evidence of what might have been swallowed.

First Aid for Internal Poisoning:

1. Immediately take any poison containers to a telephone. Call the poison control center toll free at 1-800-222-1222, or 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 a bowl, cook pot, or plastic bag). It will help a physician identify the poison and give the right treatment.



Event 203 First Aid Webelos Training Material

3. Burns and Scalds:

A spark from a campfire, boiling water spilled from a pot, rays of the sun on bare skin, a bolt of lightning – the causes of burns are many. Treatment for a burn depends upon its degree

First Aid for Burns and scalds: Get the victim away from the source of the heat that caused the burn and treat any hurry cases – stopped breathing, no heartbeat, or severe bleeding. Then try to assess the degree of burn.

First Aid for First-Degree Burn: A mild burn will cause the skin to be tender and it might also become red. Treat immediately by holding the burn under cold water or applying cool wet compresses until there is little or no pain.

First Aid for Second-Degree Burn: If blisters form, the burn is more serious. Place the injury in cool water until the pain goes away. Let the burn dry, then protect it with a sterile gauze pad. Do not break the blisters – that makes them open wounds. Do not apply butter, creams, ointments, or sprays – they are difficult to remove and can slow the healing process.

First Aid for Third-Degree Burn: This is the most severe burn. Skin might be burned away and some flesh will be charred. Since nerves are damaged, the victim might feel no pain. Do not try to remove clothing, as it might be sticking to the flesh. Do not apply creams, ointments, or sprays. Wrap a clean sheet around the victim, treat him or her for shock, and get immediate medical attention.

4. Hypothermia:

Cold Emergencies:

When you hear of someone freezing to death or dying of exposure, the killer was probably hypothermia - from hypo, meaning "low", and thermia, meaning "heat". It occurs when the body is losing more heat than it can generate.

Flesh exposed to low temperatures or cold wind can freeze. Far from the body's core heat, toes and fingers are especially vulnerable, as are the nose, ears, and cheeks.

Avoid cold emergencies by wearing enough clothing to stay warm and dry, and don't forget your hat. Eat plenty of food for energy and drink lots of fluids. If bad weather catches in the backcountry, put up your tent and crawl into your sleeping bag.

Event 203 First Aid Webelos Training Material

4. Hypothermia (continued):

Hypothermia is a danger to anyone who is not dressed warmly enough. Wind, rain, hunger, dehydration, and exhaustion increase the risk. The temperature doesn't have to be below freezing. A lightly dressed hiker caught in a windy rainstorm is at great risk. So is a swimmer too far out in chilly water.

A victim of hypothermia might show any of these symptoms:

- Feeling cold and numb
- Fatigue and anxiety
- Uncontrollable shivering
- Confusion, irritability; makes bad decisions
- stumbling and/or falling down
- Loss of consciousness

While one person is being treated for hypothermia, the rest of the group could also be at risk. Be sure to protect yourself and others from getting too cold. Everyone should take shelter, put on dry, warm clothing, and have something to eat and drink. Look out for one another.

First Aid for Hypothermia

Treat a victim of hypothermia by preventing him from getting colder and, if necessary, helping him rewarm to his normal body temperature. Try any or all of the following methods. Be gentle and patient with anyone suffering hypothermia.

1. Take the victim into the shelter of a building or a tent and get him into warm, dry clothes.
2. Zip him into a dry sleeping bag.
3. Offer an alert victim warm or hot liquids (cocoa, soup, fruit juices).
4. Give him water bottles filled with warm fluid to hold in the armpit and groin areas.
5. If hypothermia is advanced, helping the victim breathe warm, moist air will aid in rewarming.
6. Be ready to provide other first aid if needed.
7. Seek medical care for the victim.