This First Aid Chart is not intended to take the place of qualified help in the event of an emergency. In any emergency, always seek medical advice and assistance when you think it is needed. It is also recommended that you take a certified CPR and first aid course.

**EMERGENCY FIRST AID CHART**

**ANIMAL BITE**
Flush the wound area with water and wash with soap and water for at least 5 minutes. Cover with a clean dressing or cloth. Immediately seek care at a hospital or emergency center.

**BLACK EYE**
As soon as possible following the injury, dip a cloth in ice water and hold next to the area for at least 10 minutes. A ‘black eye’ is essentially a bruise around the eye that will cause pain and swelling and gradually fade in time. If the bruise does not fade or if there is a change in vision, consult a physician.

**CUTS**
Minor – Wash wound area with soap and water, not alcohol; cover with a sterile gauze bandage.

Major – If blood appears to be gushing or spurting, follow these instructions and call for help.

1. Stop any further loss of blood and press hard on the cut for 10 minutes. Do not remove pressure to see if it’s wounds is bleeding. If possible, raise the cut above the level of the chest. After 10 minutes, if the bleeding has stopped, cover the cut with a bandage. If the bleeding hasn't stopped, try pressing harder for five more minutes and seek medical help.

**BURNS**
Minor – Immediately cool the burn area by putting it under cool running water or in a sink filled with cool water for at least five minutes until the pain subsides. Never apply butter, grease or ointment. Don’t open blisters or remove dead skin.

Cover with gauze. If blisters break, apply a clean dressing. If the burn is on the face, covers an area bigger than your hand or if it is in the eye or an emergency number.

Severe – Have victim lie down and cover him or her. Never remove clothing or clean the burns. Call for emergency help.

**CHEMICALS**
Quickly flush area with water for at least 15 minutes, cover with gauze and call for emergency help.

**CHOKING**
If the person is choking and unable to cough or speak, get behind the person and wrap your arms around the waist. Make a fist, grasp fist with other hand. Place fist against the stomach just above the navel but well below the lower tip of the breastbone. Pull fist upward into the stomach with a quick upward thrust. Repeat up to four times. If choking continues, seek medical help. If the victim becomes unconscious, lay him or her down, roll to side, pull the tongue and jaw forward and with the index finger, dislodge any visible matter. Perform mouth-to-mouth resuscitation and/or CPR.

**CONVULSION/SEIZURE**
Gently prevent person from hurting him or herself and control nearby objects. Loosen clothing after jerking seizures. Have person lie down. Help keep the airway open. Turn head to the side in case of vomiting to prevent choking on inhaled vomitus. After convulsion, administer mouth-to-mouth resuscitation or CPR. After seizure, allow patient to rest. Seek medical attention.

**ELECTRIC SHOCK**
Turn off electricity if possible. If person is not breathing, place your mouth tightly over his or hers, pinch nostrils and blow into mouth until you see the chest rise. Remove your mouth. Give two breaths and check pulse (see C below). If pulse is present, continue rescue breathing at a rate of 12 times per minute.

**EMERGENCY DEPARTMENT**
Turn person on back and quickly remove any foreign matter from mouth. Place your arms around the waist. If no pulse, start rescue breathing and external cardiac compressions.

**Frostbite**
Signs and symptoms: The skin of hands, feet, face or other areas may feel numb, become white or pale, feel僵硬, turn blue. The skin may feel cold and tight. Care should be taken to avoid breaking blisters, since this will cause further damage. A gradual warming, by immersing the area in water that is slightly warmer than body, is safe for slight frostbite. Elevate the affected area, cover with dry and warm garments and consider pain relievers if there is slight pain. Keep frostbitten toes or fingers separated with clean, dry cloths. Hospitalization is necessary for children whose body temperatures drop below 93°F and for adults who have severe frostbite. Don't sit in front of an oven or fire to warm the frost- bitten area, to avoid exposure to the heat that could burn the tissue. Don't massage the damaged area or rub with snow. Do not break blisters or apply an ice drink. Contact your physician or emer- gency room immediately.

**HEAD INJURY/CONCUSSION**
Usual symptoms of simple concussion include headache, slight dizziness, queasy stomach or vomiting. These usually require an ice pack to the head and rest. Other more severe symptoms such as unusual drowsiness, unequal pupils, persistent vomiting, confusion and loss of consciousness. If one or more of these conditions are present, immediately seek medical care.

**INSECT BITES AND STINGS**
Bees, wasps, hornets, or other insects: Try to remove stinger by gently scraping with a clean knife blade. Cleanse with soap and water, and apply an ice compress to reduce swelling. If person has an allergic reaction (will happen within 30 minutes), hives, itching all over, wheezing, vomiting or a history of allergic reaction, follow directions on bee sting kit, if available. Call for emer-gency help.

**TICK BITE**
Cover the insect’s body with a heavy oil or lighter fluid. The insect should remain for about 20 minutes. Carefully remove with tweezers, being sure to remove all parts of the insect. Scrub area with soap and water.

**ITCHY BITES**
Use hydrocorti-sone cream, calamine lotion or rubbing alcohol.

**NOSEBLEED**
Have person sit down and lean forward, if possible. Have person breathe through the mouth. Or pack bleeding nostril(s) with gauze and pinch. If bleeding persists, call a doctor.

**POISONING**
Don't force to vomit immediately. Call poison control. Tell them what substance and how much was swallowed. Take the bottle or package of the drug when you call. Directions on the container may not be up to date. Always follow the instructions given by the poison control center. Do not give the patient fluids or cause to vomit if unconsciousness continues. Call for emergency help.

**SHOCK**
Have person lie down, loosen clothing and cover to prevent loss of body heat. Be cautious not to overheat. Check pulse rate and seek professional help.

**SPRAYS & STRAINS**
Elevate the injured joint to a comfortable position. Apply an ice bag or a cold compress over the sprain to reduce pain and swelling. A sprain does not rule out fracture. Person should not bear weight on a sprain. Sprains that continue to swell should be examined by a physician.

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**UNCONSCIOUSNESS**
When person cannot be aroused in a flat position and make sure the victim is airway clear. Check pulse rate. If no pulse is felt, begin administering CPR. Keep the person comfortable and warm. Never give unconscious person food or liquid. If vomiting occurs, turn head to the side to prevent choking on inhaled vomitus. For unconscious adults, have the person on their back on a firm surface. Place heel of your hand on lower breastbone (about 1 1/2 inches up from the tip), with fingers off chest and other hand on top. Gently rock forward, exerting pressure down, to force blood out of the brain. Release pressure. Alternate (B) breathing with (C) circulation.

**TWO RESCUERS**
Give 60 chest compressions per minute — one breath after each five compressions. One rescuer: Perform both artificial circulation and rescue breathing, giving 80 chest compressions in two full breaths for each 15 compressions.

**FOR SMALL CHILDREN AND INFANTS**
Cover nose and mouth with your mouth to avoid poisoning. Blow gently and place a few compressions. Use only heel of one hand for children; only the tips of index and middle fingers for infants. Give 80 to 100 compressions per minute, with one breath after each five compressions.