
Competition Resources: First Aid Summary

First Aid Summary

Signs and Symptoms + Treatment

This is a summary of conditions covered in NLS for the purpose of review. I created this off the top of my head and so it does not represent any standard. In fact, some things (such as placing a stroke patient limp-side up) may not necessarily be listed as proper treatment in the CLSM anymore. But some judges will give points for this, and that is why I included it. Also note that I did not include items that are common sense such as “treat for shock” or “call EMS” for all patients.

Bumped Head	
Bruising Swelling	Rule out d-spine Ice
Concussion	
Shock Ringing Ears Blurry Vision Dizziness Vomiting	d-spine? EMS if victim lost consciousness Prevent from sleeping Ice injury
Compression - IntraCranial Pressure (ICP)	
Coma Rapid decrease in LOC Unequal Pupils Snoring	d-spine Assisted Ventilations
Skull Fracture	
Bruises around eyes Bruises behind ears CSF Fluid from ears & nose	d-spine Careful with applying pressure
Stoke - CerebroVascular Accident (CVA)	
Part of body limp Unequal Pupils	Lateral - (limp-side up)

Asthma	
Difficulty Breathing Wheezing/gasping History	Meds: Bronchodilator = Ventilin EMS? Oxygen, Assisted Ventilations?
Anaphylaxis	
Itching, numbness, tingling Blotchy areas or hives Swelling of tongue and face Tightness in throat Difficulty breathing	Maintain ABC's (Oral Airway) Ice on swelling (& on neck) Epipen (if necessary)
Hyperventilation	

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Rapid, shallow breathing Anxiety, Emotional stress	Rest & Relaxation Coaching breaths “Pursed-lip” breathing Oxygen probably not necessary
Chronic Obstructed Pulmonary Disease - COPD	
	Turn oxygen down to 2-5 lpm if it is adversely affecting patient
Pulmonary Edema	
(Secondary Drowning, Chlorine Gas Inhalation) Difficulty Breathing Coughing - Wheezing Chest Pain Pink Sputum Fever	Semi-sitting Oxygen

Angina	
Similar to heart attack, BUT: Provoked by stress/exercise Less than 15 minutes Relieved by oxygen Relieved with nitroglycerin	Give medication (unless pulse is really weak, or patient has taken viagra in the past 24 hours) Position of Comfort If no improvement, another dose every 5 minutes
Heart Attack - Myocardial Infarction	
Squeezing, burning pain Radiates across the chest Radiates to arms, back, and jaw More than 30 minutes Difficulty breathing Anxiety Shock	Monitor & maintain ABC's Call EMS ASAP Position of comfort (usually semi-sitting) Loosen tight clothing -ASA - Aspirin (blood thinner) – 1 Adult tablet or 2 Child tablets
Cardiac Arrest	
No pulse	CPR

Fracture	
same as sprain EXCEPT: History of impact Point tenderness Crepitis	Check distal circulation Ice Immobilize above & below Elevate if possible
Dislocation	

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Joint is dislocated	Same as fracture
Sprain	
Swelling Decreased range of motion History of strain or pull	Ice Wrap with crepe

Diabetic Coma - Hyperglycemia	
Coma Slow decrease in LOC Thirsty Fruity breath Drunken behaviour	Insulin
Insulin Shock - Hypoglycemia	
Shock Rapid decrease in LOC Hungry	Glucose +Starch (Bread)

Major Bleed	
Bright Red Spurting	Direct Pressure Ice Elevation (If above doesn't work, use indirect pressure) Pressure Bandage
Amputation	Treat the part as well: Wrap in moist gauze Put in bag Put in another bag with ice
Minor Bleed	
Laceration: slice	Steri-strips Refer to doctor Need stitches if greater than 2mm wide or 2cm long
Abrasion: roadrash	Clean carefully
Avulsion: tear	Replace flap
Puncture	Soak to clean Ask about tetanus shot (10 years)
Impaled	Stabilize with triangulars & gauze Don't stack more than 2 donuts
Burns	
2 nd Degree: Blisters Red Painful	Water for 15 minutes & cover with moist gauze Don't break blisters Check distal pulse

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Shock	Give water to drink EMS if more than 15% or in key areas
3 rd Degree: Black, gray, white, leathery, dry, or charred Surrounded by 1 st and 2 nd degree burns	Wrap loosely with dry sterile gauze Treat surrounding 2 nd degree burns Check distal pulse
Chemical burns:	Wet chemical: flush with water Dry chemical: brush and flush (the chemical may react with water) Find name of chemical and MSDS
Electrical Burn: Similar to 3 rd degree	Look for entrance and exit burns Wrap loosely with dry sterile gauze Check distal pulse

Infection

Redness Swelling Puss Red Streaks Tendor Lymph Nodes	Clean wound EMS if serious
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Nosebleed

	Hold nose for 15 minutes Ice on bridge of nose Recommend: No sudden movement or deep water, and no nose-picking or blowing nose
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Penetrating Eye Injury

Fluid leaking from eye (vitreous humour)	Lay victim on back (treat as spinal) Remove loose pieces Stabilize any protruding objects Cover both eyes
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Broken Ribs

	Ice Check for complications
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Flail Chest

Paradoxal Movement Crepitis	Fill depression Tape Securely
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Open Pneumothorax

Blood bubbles Escaping Air Pulmonary Edema	Cover with hand right away Tape plastic on 3 sides Watch for tension pneumo
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Tension (Closed) Pneumothorax	
Trachea Shift Over-expansion of injured side No air escape	Release bandage if possible
Internal Bleeding	
Swelling Rigidity Pain Bruising	Ice
Exposed Organs	
	Corral organs Cover with moist dressing

Hypothermia	
Mild to Moderate: Decreased LOC Slowing vitals Dilated Pupils Shivering to No shivering	Minimize further heat loss Use blankets and warm clothes NO Stimulants
Severe: Unconscious Extremely slow vitals Pulmonary Edema Heart Failure	Check pulse rate for full minute NO drinks
Hyperthermia	
Heat Cramps	Stretch Gatorade (salt water)
Heat Syncope (faint)	Rest
Heat Exhaustion: Shock symptoms	Treat for shock Gatorade & water
Heat Stroke: Coma symptoms	Cool down ASAP with cold water Monitor vitals closely

Seizures	
Can be associated with many first aid conditions, but an epileptic seizure follows this pattern: Pre-seizure 'aura' Contraction of muscles Gurgling breathing Loss of bladder control Usually less than 2 minutes Post-seizure 'drunken' phase	Maintain ABC's Protect the head (in water, remove to mat) Reassess after seizure

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Shock	Coma
Pale Cool *Clammy Weak-rapid pulse (decreased blood pressure) Seizures	Red Hot Dry Strong-fast pulse (increased blood pressure) Seizures
Concussion Insulin Shock Heat Exhaustion etc.	ICP Diabetic Coma Heat Stroke Drug Overdose