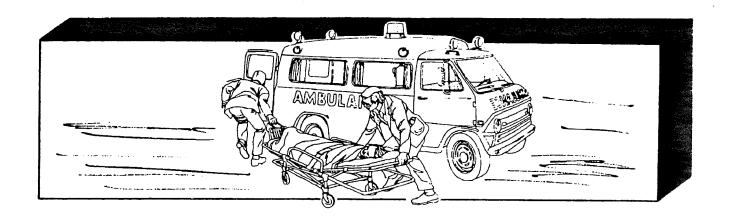
# LEADERSHIP TRAINING COURSE

# SECTION VI FIRST AID

Alternative for those who are unable to attend the standard first aid course offered by the American Red Cross



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Royal Rangers
Men's Ministries Department
Assemblies of God

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#### FIRST AID SECTION OF THE ROYAL RANGERS LEADERSHIP TRAINING COURSE

It is desired that all men taking the Royal Rangers Leadership Training Course complete the American Red Cross First Aid Course.

However, realizing that oftentimes, limits such as distance, job considerations, cost, and other factors prohibit men from being able to complete that requirement, this workbook is designed to give you basic knowledge of first aid and satisfy the first aid training requirement.

As in previous booklets, a passing grade is required for completion.

Trail Rangers, Sea Rangers, Air Rangers, and Trailblazers who desire to earn the First Aid Merit of the Advanced Merits section may substitute this workbook for that merit.

#### **TEXTBOOKS**

1. ROYAL RANGERS HANDBOOKS (ordered from the Gospel Publishing House)

PIONEERS HANDBOOK

(for boys 9-11 years)

Order No. 02-0682.

TRAILBLAZERS HANDBOOK

(for boys 12-14 years)

Order No. 02-0683.

AIR-SEA-TRAIL RANGERS HANDBOOK

(for boys 15-17 years)

Order No. 02-0693

Each of these handbooks can be ordered from the Gospel Publishing House, 1445 Boonville Avenue, Springfield, MO 65802-1894. Commander and lieutenant commander trainees should select the handbook which corresponds to the outpost group they will be handling. If they will be working with a combination group (excluding Buckaroos), we would suggest ordering the TRAILBLAZERS HANDBOOK, as this handbook combines methods used in both the PIONEER and AIR-SEA-TRAIL RANGER HANDBOOKS. Outpost Councilmen and outpost chaplains should secure a copy of the TRAILBLAZER HANDBOOK for general training rather than specializing in one group.

2. AMERICAN RED CROSS FIRST-AID HANDBOOK--This book contains all the information necessary to qualify as an "expert" in first aid. One CAMPING AWARD requirement is that the recipient be proficient in the techniques and methods of first aid. This book can be ordered from any American Red Cross office in the United States.

Since this workbook satisfies the first aid requirements in Book IV of the Leadership Training Course, there is no pin for this workbook.

# THE PURPOSES OF FIRST AID

# Studying the purposes of First Aid

Tra	-Sea-Trail Rangers Handbookilblazers Handbookneers Handbook		Read pages 107-120 Read pages 22-33 Read pages 26-35	
	APPLY	YING THE PURPOSES OF FIR	ST AID	
Wri	te a brief paragraph on why you believe	Royal Rangers should know firs	at aid.	
		TESTING FIRST AID		
1.		is the immediate care given	to anyone who is badly hurt.	
2.	First aid is the	aid you give someone before	e thearrives	•
3.	2. 3.		ly ill include:	· ·
4.	A is a necessity for each outpost group.			
5.	Each should know where the kit is located.			
6.	Place ait.	on wound and spira	al wind the	around
7.	purposes.	are useful as an emergency	cover, arm sling, dressing, and for	other
8.		will revive a person who ha	s fainted.	
9.	is good for insect bites or stings.			
10.		is good for sponging skin ex	sposed to poison ivy.	
11.	If drinking water is not guaranteed to b			
12.	One- or 2-inch		has many uses in first aid work.	
13.	A	should be	e used to wash wounds.	
14.	are good	to use on small cuts or wounds.		

# TESTING FIRST AID PROCEDURES

. Describe fir	rst aid for a simple wound			
. Describe fi	rst aid for a large wound.			
. Use a pair o	of to pull a well into the wound.	from	under the skin. Then wor	k
	rst aid for burns.			The state of the s
. Where there	e is an accident, there may be the person	Keep him	Place something un	nder his
	n is having and		theand	ithe
	est aid for fainting.			
Describe fir	est aid for a nosebleed.			
A black eye	e is a	Describe first aid for a	black eye.	
When a per injured part	son is bleeding, apply		to wound and	the
O	are injuries to the sof	t tissues surrounding joints	5 <b>.</b>	
The		,, and _	are	most often affected
Describe firs	t aid for a blister.			
2. If you have t	peen in contact with	wash the area with strop	,	Or
			ng boup and water, aren sp	ongo n with
rue-False (Circ				
1. It is re	eally not important to know be	asic first aid.	r	T F
2. Any ty	ype of box will do for a first a	aid kit, if it is sturdy and w	vell marked.	T F
3. The w	ord first in first aid suggests	more aid will follow.	•	T F
4. Alway	s tell your patient how bad hi	s injury looks.	r	TF

	0.	first aid techniques.
	7.	A broken blister should be treated like any other wound.
	8.	Poison Sumac is just a Indian nickname for a harmless plant.  T F
	9.	A solution of baking soda is good for areas infected by poison oak.  T F
	10.	Most wounds can be cared for by applying direct pressure, cleaning, applying T F medicine, and applying a bandage.
		ARTIFICIAL RESPIRATION
Nu	mber t	hese steps in the order you would do them:
	_ Tilt	the head back so the chin is pointing upward.
	_ Ope	en your mouth wide and place tightly over victim's mouth; pinch nostrils shut.
	If th	nere is foreign matter visible in the mouth, wipe it out quickly.
	_ Pull	or push the jaw into a jutting-out motion.
	_Blo	w into victim's mouth.
(Th	e follo	owing section is in the Trailblazers and Air-Sea-Trail Rangers handbooks only)
		POISONING
1.	or _	the poison with large amounts of and, which gives more protection to the
2.	Dilu	te until occurs.
3.	Keej	the person is removed from the
4.	If an	is indicated on the label, give as directed.
5.	For the a	give water and ofto neutralize acid.
6.		may be used if there is no milk of magnesia.
7.	In th	ne case of strong acids, DO NOT
8.	For	alkalies, such as lye, give a of with or or
		to protect stomach linings.

5. Arterial bleeding is considered a simple wound.

T F

9. In kerosene poisoning, vomiting (should, should not) be induced. (Choose one).

#### **FRACTURES**

Ma	tch the term with the definition.			
	Fracture	a. Both bone and skin are broken		
	Simple Fracture	<ul><li>b. an object made of wood or metal to keep a broken bone in place</li><li>c. the bone is broken, but skin is not.</li></ul>		
	Compound Fracture			
	Splint	d. a broken bone		
1.		with fractures until the limb is splinted.		
2.	•	nt is a, which should be pplied to the		
		ADDITIONAL FIRST AID TRAINING		

#### ADDITIONAL FIRST AID TRAINING

The Three B's

The three B's is a simple way to determine the needs of a victim, and a good way to determine which victim needs the prompt attention if several are hurt. The three B's are: BREATHING, BLEEDING, AND BROKEN BONES.

#### **BREATHING**

If someone is lying down, or collapses, your first concern is to see if they are conscious. The best way to do this is to firmly take the victim's shoulder, gently shake, and shout, "Are you okay?" (Remember to immediately send for help).

If the person is unconscious, check for breathing. You have only a few minutes to save a life of someone whose breathing has stopped. Permanent brain damage can occur within 4 minutes or less.

The best method is the "A Quick Check" method.

A = Airway: Tip the head and check for breathing. Quick = Give 4 quick, full breaths if victim is not breathing. Check = Check pulse and breathing.

Pulse can be found in the groove in the side of the neck. Keep head tipped back, place the fingertips of your hand on the Adam's apple, then slide your fingers into the groove at the side of the neck.

If victim does not respond and is not breathing, but has a pulse, proceed immediately with artificial respiration, and continue until the person starts breathing on his own or until help arrives.

If a victim does not respond and is not breathing, and has no pulse, proceed with CPR. If you have not been trained in CPR, give mouth-to-mouth breathing.

If a conscious victim is choking or having trouble breathing, ask, "Can you speak?" If the airway is blocked, there may be a high-pitched noise when inhaling, and very weak or no coughing. Signs of breathing difficulty are gasping, choking, coughing, wheezing, and grasping the throat.

Two methods of first aid are available. Remember, if the victim is coughing forcefully, let him alone, and encourage him to cough. If this does not work, there is the back blows and the abdominal thrust.

BACK BLOWS--Stand behind the person, a little to the side. Support the person with one hand on his chest. Bend him over so his head is lower than his chest. Give 4 quick blows over the spine, between the shoulder blades. Hit with the heel of your hand.

ABDOMINAL THRUST--If 4 back blows do not dislodge the object, give 4 thrusts. Place the hand in a fist, put the thumb of your fisted hand midway between the waist and the bottom edge of the rib cage, grasp your fist with your other hand, and press it into the victim's abdomen with a quick inward and upward thrust. DO NOT PUSH ON THE EDGE OF THE RIB CAGE OR XIPHOID.

#### **BLEEDING**

Review in the handbooks the methods of how to stop bleeding. NOTE: If you use a pressure point, KEEP using direct pressure and elevation. ADD the pressure point.

#### **TOURNIQUET**

When you use a tourniquet, you risk sacrifice of a limb to save a life. Never apply a tourniquet unless loss of life is a threat. The tourniquet is THE LAST RESORT to stop bleeding.

When you apply the tourniquet, apply it just above the wound or amputated part of the limb. Make it tight enough to stop all bleeding!

Never apply a loose tourniquet; it will only reduce the flow of blood, not prevent the loss of blood. Once a tourniquet is applied, LEAVE IT ALONE, and never loosen it. Place a "T" on the person's forehead, so the doctor will know to look for it. If nothing else, use the victim's blood to write "T" on the forehead.

#### **BURNS**

The severity of a burn is determined by the depth of the burn, called "degree," size of the burn, and location of the burn.

Age and physical condition are contributing factors to the seriousness of burns.

Burns can become infected, especially if blisters are present or if there is a loss of skin.

The four critical areas of the body are the hands, feet, face, and genitals.

If a person is burned in the face, be alert for injury in the breathing passage.

First-degree burns involve only the surface layers, and the skin may be pink or reddish. A mild sunburn, or burn from a hot pan, are two causes. Few or no blisters result.

A small second-degree burn goes deeper into the underlayers of the skin, and there are small blisters. Swelling is associated with second-degree burns, and the swelling and blistering are sometimes delayed.

A deep second-degree burn will have large blisters, and skin may be burned away. If a burn is open, it will ooze clear body fluid.

A third-degree burn goes all the way through the skin, may involve bone, muscle, or other tissue. It may be red and raw with ashy white or black charred areas. These burns destroy nerve endings, and may hurt less than a second degree burn. Absence of pain does not mean that a burn is mild.

Second- and third-degree burns need immediate medical attention.

First-degree burns can be submerged in water until pain subsides. DO NOT put water on an open burn, since it increases the danger of infection. Cover instead with a thick, dry, sterile dressing. Never remove clothing that is sticking to a burn.

#### HELPFUL TIPS TO PROPER FIRST AID

- 1. Act promptly--Send for help, examine victim quickly using the THREE B's method.
- 2. Start mouth-to-mouth resuscitation if breathing has stopped. PLAN NOW TO TAKE THE AMERICAN RED CROSS CPR COURSE.
- 3. Look for shock after checking and taking care of the Three "B's" Treat for shock if in doubt. Signs of shock include pale face; cold skin; rapid, weak pulse; and fainting.
- 4. Give aid at once for poisoning.
- 5. Handle with care--Don't move a victim unless you have to. If you have to move someone, use a stretcher or make one.
- 6. Splint bones, take care of burns, bandage wounds, and keep rechecking until medical help arrives.

#### TESTING FIRST AID ADDITIONAL TRAINING

#### TRUE - FALSE (Circle T or F) TF 1. Four B's are great for first aid The A in "A Quick Check" means ALERT TF Your first concern for a victim is to check for consciousness. TF 3. 4. Broken bones is the second "B" you need to check. TF The groove in the side of the neck is a good place to check pulse. TF Ask, "Are you choking?" to a person who has trouble breathing. TF 7. Back blows and abdominal thrust are proven methods to help a choking victim. TF

8.	Once you start with the pressure point procedure, discontinue with direct pressure since pressure point is more effective.	T F
9.	A tourniquet is an easy and safe way to take care of bleeding.	T F
10.	After applying a tourniquet, you should never take it off.	TF
11.	You should always place a "T" on the victim's head when a tourniquet is applied.	T F
12.	First-degree burns never have blisters or infection.	T F
13.	The worst burn is a deep second-degree burn.	T F
14.	You can gauge the severity of a burn by the amount of pain the victim is having.	T F
15.	Water is effective on open burns because it cools the heat.	T F
16.	You should immediately remove clothing from a burn even if it is sticking to prevent infection and further hurting.	T F
17.	A second degree burn does not need medical attention if proper first aid practices were used.	TF
18.	Cold skin, weak but rapid pulse, and fainting are signs of shock.	T F
19.	Encourage victims to lie still and quiet to prevent further injury.	T F
20.	Once you have administered first aid, your job is done.	T F
21.	CPR is not important if you know artificial respiration.	T F
22.	Knowing first aid could save a life, and applying first aid should always be accompanied with prayer.	T F

# FIRST AID GUIDE

This section is provided as a quick reference for basic first aid procedures. You should become familiar with these, and teach them.

teach them.	1	
Animal Bite	Redness, swelling, and bleeding if skin is broken. Victim may fear the animal.	Wash with soap and water. Cover with a clean bandage. Catch animal and report bite to doctor or hospital.
Asthma Attack	Breathing labored, difficult, and accompanied by wheezing or squeaking sounds.	Place victim in comfortable position, reassure victim, determine if he has medication, and administer HIS medication only after checking the exact dosage.

Blisters Not caused by burns. Are result of skin Wash area clean, sterilize a needle, open being subjected to repeated pressures and blister from edge, gently squeeze out fluid, excessive rubbing. and cover with dressing. DO NOT pull off dead skin. Keep clean. Put to bed, keep person warm. Chills Shivering, usually associated with a fever. Gasping, weak cough, high-pitched noise Choking Back blows or abdominal thrust. when inhaling. Cold Runny nose, sore throat, headache, run-down Adults--2 aspirins every 4 hours; Children-feeling, fever, or any combination of these. 1 aspirin every 4 hours. Drink fluids, get rest, use nose drops. Convulsions Strong, jerking motion, stiff body, and Call for doctor, keep patient from hurting difficult breathing. Bluish face, eyes rolled himself. Keep him lying down, on side or back, gritting of teeth. Frothy mouth. stomach, do not restrain. Slip something in mouth, between his teeth, if you can (folded handkerchief). Croup Noisy, difficult breathing, hoarse, barking Call doctor immediately; expose to moist cough. air. Pain. Earache Cool or warm compresses. Two or three eardrops if ear IS NOT discharging fluid. Drowning Unconscious, pale, or blue skin. If trained, administer CPR; if not, give mouth-to-mouth resuscitation. Get immediate medical help. STAY CALM, be confident in your ability **Emotional Problems** Apathy, blank expression, crying, nervous laughter, moodiness, irritability, untidiness. to handle the situation, use gentle authority (creates security), give food or something to drink. Eye Irritations Pain, redness, tears. Flush with water, eyedrops from kit. Pale clammy skin, temporary Fainting Lie person down, raise legs higher than unconsciousness, shallow breathing. body, loosen clothing, apply cold cloth to face. DO NOT rub area. Quickly warm in Frostbite Skin flushed, then changing to white or grayish yellow. May blister. Cold and lukewarm water (102° to 108°) or let thaw. numb. Pain. Headache Pain. Two aspirin, rest a few hours, cold compress on forehead. Heart Attack Chest pain, shooting to left shoulder and Call for ambulance. Make victim arm. Difficulty breathing. Lips, skin, and comfortable. Keep warm, loosen collar. If fingernails turn blue. trained, CPR. If not, mouth-to-mouth resuscitation. Give nothing by mouth. Heat Exhaustion Tired feeling, headache, skin pale and Lay him down, give sips of salt water, clammy. Temperature normal, vomiting may apply cold cloths. occur. Heat Stroke Skin hot and dry, no evidence of Undress as much as possible. Put to bed in perspiration, has very HIGH fever. coolest possible place. Sponge body with

water or alcohol, administer salt solution.

Different from heat exhaustion.

Insect Bites	Stinging feeling, pain, redness.	For bees, wasps, hornets, remove stinger, apply medicine or paste of baking soda, or calamine lotion.  TicksRemove carefully, wash with soap and water, prevent infection.
Nosebleed	Blood coming out of nose, may be some pain.	Seat patient, tip back head, squeeze nostrils.
Shock	Victim pale, weak, clammy skin, perspiration on upper lip and forehead. Pulse rate, breathing rate are increased.	Lie the person down. Keep him warm. Place something under feet. If difficulty breathing, lower feet and elevate shoulders and head.
Sunburn	Redness, mild swelling, pain, may be some blisters	Apply burn cream or cold towel. Protect from further sun.
Toothache	Pain	Give aspirin. Use tooth medicine from kit.
	CIDOT AID VIT	

#### FIRST AID KIT

Every outpost group needs a well-stocked, well-marked first aid kit made of sturdy construction, well marked, and boys need to know where it is, the contents, and how to use them.

<ol> <li>A 1-inch roll of gauze</li> <li>Four-inch gauze pads</li> <li>Triangular bandages</li> <li>Ammonia ampules</li> <li>Calamine lotion</li> <li>Rubbing alcohol</li> <li>water tablets</li> <li>One- and 2-inch adhesive tape</li> </ol>	<ul> <li>10. Bandages</li> <li>11. Tweezers</li> <li>12. Insect bite medicine</li> <li>13. Burn creme</li> <li>14. Bandage for sprains</li> <li>15. Snake bite kit</li> <li>16. Baking soda</li> <li>17. Scissors</li> </ul>	19. Emergency blanket 20. Eye and eardrops 21. Aspirin or pain killer 22. Petroleum jelly 23. Stomach medicine 24. Tourniquet 25. First aid book 26. Cotton balls and swabs 27. Matches
9. Bar of soapcloth	18. Toothache medicine	27. Matches

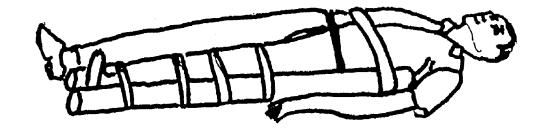
#### **SPLINTS**

Rule Number 1--Do not move the patient until the broken limb is splinted. Splint it where it lies.

Apply splints so they extend beyond the joints above and below the fracture. Splints can be made out of wood, newspapers rolled tightly, poles, umbrellas, or any number of sturdy objects.

Fasten a splint in place with bandages or strips of cloth, handkerchiefs, belts, etc. After splinting the limb, elevate it above the level of the heart with pillows.

Pad the splint to prevent the patient from being uncomfortable.



# TRIANGULAR BANDAGE

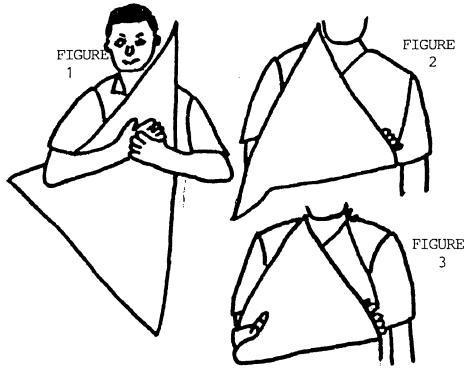


FIGURE 1 - Lay patient down, Spread triangular bandage as shown.

FIGURE 2 - Pull bandage up and tie around neck with a square knot.

FIGURE 3 - Secure bandage around elbow with a safety pin.

# FIRST AID SKILLS

Find in the American Red Cross First Aid Handbook the sections that demonstrate the following items, and demostrate them to your instructor, and describe below.

1. How to apply a splint:
2. How to make a blanket stretcher:
3. How to bandage a head wound:
4. How to apply a finger-tip bandage:
5. Two-person carry:
6. Blanket drag:
7. Explain a fire escape procedure:
8. How to bandage a sprain ankle:
9. Explain the two kinds of action that are needed to enter a victim into the EMS system.
Action 1:
Action 2:

Rescue And Transportation

# TRAINING COURSE SUMMARY SHEET

Name			
Address		· · · · · · · · · · · · · · · · · · ·	
City:	State:	Zip	
Church	City & State		
Royal Ranger Position:		_ Date Completed	
PLEASE READ CAREFULLY BEF	FORE SIGNING:		
I do hereby certify that I have compl Royal Rangers Leadership Training		nents to satisfy the first aid requirements of the	
1. There is a genuine difficulty that l	cannot complete the American	can Red Cross First Aid Course.	
2. I have read all the assigned materi American Red Cross First Aid Handle		ys' handbooks, and have acquired a copy of the	;
3. I have completed all assigned mate <i>Course</i> .	erial in the Royal Rangers fi	irst aid section of the Leadership Training	
COMMENTS OR SUGGESTIONS	PRETAINING TO THE FIR	RST AID SECTION OF THE RR LTC:	

NOTICE: This course does not entitle you to a card from the American Red Cross.