



# Ask The Paediatricians

F O U N D A T I O N  
C H I L D R E N - H E A L T H - W E L F A R E



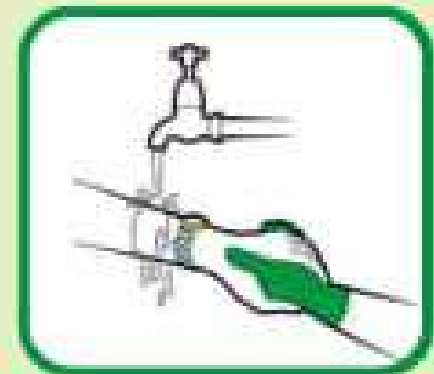
**FIRST AID CARE TIPS**

# CONTENT

- Burns
- Splinters
- Fainting
- Cuts and scrapes
- Nosebleeds
- Sprains/strains
- Seizure/convulsion
- Head injury
- Asthma attack
- Accidental poisoning
- Diabetic emergency
- Bleeding wounds
- Loss of consciousness
- Fracture
- Stroke
- Choking
- Fever
- Diarrhoea
- Vomiting
- Heart attack
- CPR

# BURNS

- Run under cool water for 10 minutes.
- If there is no water available, you could use cold milk or canned drinks.
- Wrap/cover in cling film or bandage.
- Don't pour pap, eggs etc. on the burns area.
- Don't pop blisters.



# SPLINTERS

- If it doesn't hurt, let it come out by itself.
- Clean a small needle or pair of tweezers and remove splinter.



# FAINTING

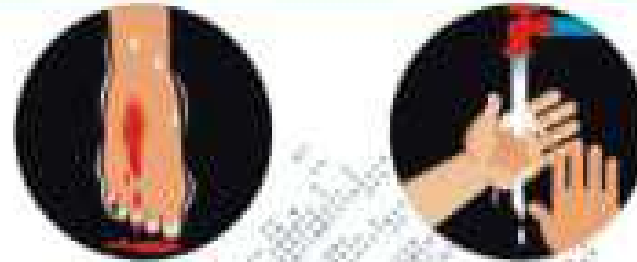
- Lie casualty down and elevate feet.
- Give food/water for energy.
- Cool the casualty down with a damp towel on forehead.

## DON'T

- Don't pour water on the person.
- Don't crowd around the person.
- Don't pour spirit, anointing oil, onion on the person.

# CUTS AND SCRAPES

- Stop bleeding by adding small amount of pressure.
- Rinse with water and clean wound.
- Apply antiseptic and cover wound with plaster.



6



# NOSE BLEED

- Bend forward, pinch nostrils.
- Breathe through mouth during nosebleed.
- Don't tilt head back.
- If bleeding doesn't stop in 30 minutes, seek medical advice.



# SPRAIN/STRAINS

Think **RICE**

- **R**est
- **I**ce for roughly 10 minutes
- **C**omfortable support
- **E**levate the limbs

If the injury is severe, take to the hospital





# SEIZURE/CONVULSION

- Protect them from hurting themselves.
- Most note when seizure started and how long it last.

Once jerking has stopped:

- Lift chin to keep airway open and check breathing.
- Put in recovery position



# SEIZURE/CONVULSION

## DON'TS

- Don't put anything in their mouth, including your fingers, spoon, knife, sticks.
- Don't put onion, salt, pepper, holy water, herbal concoction, methylated spirit, olive oil on their eyes, nose, mouth.
- Do not put their hands or feet in fire.
- Do not hold down or restrain the person.
- Do not put a child who is having a convulsion in the bath of water in an attempt to cool the temperature **10**

# HEAD INJURY

- Get them to rest.
- Hold something cold to the injury.
- If they vomit, become drowsy, bleeding or their condition worsens, go to the hospital.



# ASTHMA ATTACK

## With an INHALER

- Sit up straight and open chest.
- Take one puff from reliever inhaler every 30-60 secs. 10 puffs each cycle.
- Repeat Step 2 after 15 minutes.
- Go to the hospital if puffs don't work.

## NO INHALER

- Sit up straight.
- Take long deep breaths.
- Try and stay calm
- Go to the hospital if breathing doesn't improve.



# ACCIDENTAL POISONING

- Find out what the child ate, when they had it, and how much they had
- Do not try to make the person vomit.
- Do not give anything to eat or drink
- Keep the containers for identification



# DIABETIC EMERGENCY

- If unsure if it is high blood sugar or low blood sugar, give them something sugary e.g. a cube of sugar
- Go to the hospital if not improving.
- Low blood sugar: use glucose powder, if not available give sugar.



# BLEEDING WOUNDS

- Apply pressure on the bleeding spot using a clean cloth or bandage.
- Do not remove objects embedded in the wound.



15

# FRACTURE

- Keep the injured area still.
- If you can find something like a stick or board, use it to support the injured area and keep it steady.





# CHOKING

- Try to cough it out.
- Bend casualty forward and give 5 back blows.
- Stand behind casualty, link your hands between their belly button and chest with lower hand in a flat and pull sharply inward and upward.
- If unresponsive, open airway, check if breathing, if not breathing, start CPR.

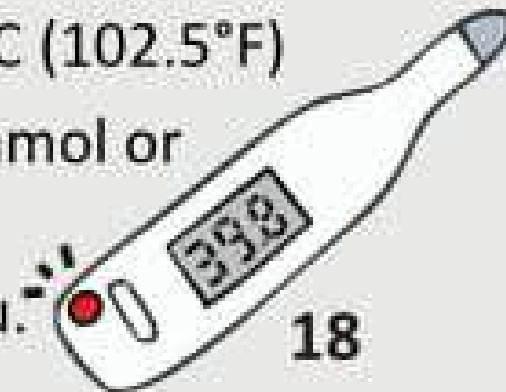


# FEVER

- Check temperature with thermometer and record.
- Remove clothes and tepid sponge
- Give paracetamol

## Access medical care if:

- a baby with a fever is under three months of age
- a child has a temperature higher than  $39^{\circ}\text{C}$  ( $102.5^{\circ}\text{F}$ )
- the fever does not decrease with paracetamol or lasts more than three days
- additional symptoms occur that worry you.



## DIARRHOEA & VOMITING

- Give oral rehydration solution (ORS)
- If no ORS, Offer small sips of water regularly
- Give zinc tablet
- If symptoms continue, seek medical advice
- Don't give medications such as antibiotics e.g. flagyl, tetracycline except if prescribed by a doctor
- Do not give children medications to stop stools e.g. diastop



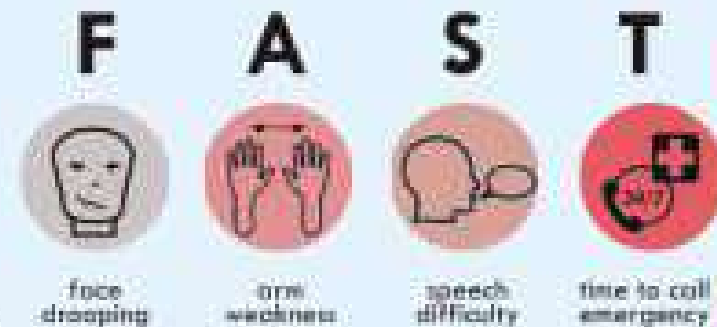
# STROKE

Look for (Think FAST)

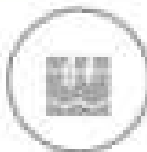
- Face – ask to smile
- Arm – ask to lift both arms
- Speech – can they talk clearly?
- Time to go to the hospital

While waiting for ambulance,

- Keep them comfortable,
- Check breathing, pulse and responsiveness



# HEART ATTACK WARNING SIGNS



*PALENESS OR  
GLAMMY SKIN*



*DIZZINESS OR  
LIGHTEADEDNESS*



*SHORTNESS  
OF BREATH*



*SHOULDER, NECK, JAW,  
ARM, OR BACK PAIN*



*HEART FLUTTERS*



*NAUSEA OR VOMITING*



*COLD SWEAT*



*INABILITY TO SLEEP*



*UNUSUAL FATIGUE*



*ABDOMINAL PAIN*



## LOSS OF CONSCIOUSNESS/COMA

- Tilt the head back, check breathing.
- If breathing, move to recovery position.

### **If not breathing**

- Give 30 chest compression, push firmly downward in middle of chest and release
  - Give 2 rescue breaths,
  - Continue with 30 chest compression and rescue breaths till help arrives.
- 22 • If not happy to give rescue breaths, continue hands only CPR

# CPR

- CPR stands for Cardiopulmonary resuscitation.
- It is a life-saving measure that is provided to someone who is possibly having a heart attack or drowning.
- CPR for heart attack can be performed by anyone – bystanders or first responders.
- Hands-only CPR includes giving repeated and rapid chest compressions in a rhythm of about 100-120 per minute until medical helpers arrive.


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**CONTACT US**

  +2349056916818

 askthepaediatricians@gmail.com

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