

FIRST AID

Call 911 or an Emergency Number for any severely ill or injured child.

STINGS AND BITES

Stinging Insects Remove the stinger as quickly as possible with the scraping motion of a fingernail. Put a cold compress on the bite to relieve the pain. If trouble breathing, fainting, or extreme swelling occurs, call 911 or an emergency number immediately. For hives, nausea, or vomiting, call the pediatrician. For spider bites, call the pediatrician or Poison Center and describe the spider. Have the pediatrician examine any bites that become infected.

Animal or Human Bites Wash wound thoroughly with soap and water. Call the pediatrician. The child may require a tetanus or rabies shot.

Ticks Use tweezers or your fingers to grasp as close as possible to the head of the tick and slowly pull the tick away from the point of attachment. Call the pediatrician if the child develops symptoms such as a rash or fever.

Snake Bites Take the child to an emergency department if you are concerned that the snake may be poisonous or if you are unsure of the type of snake bite. Keep the child at rest. Do not apply ice. Loosely splint the injured area and keep it at rest, positioned below the level of the heart. Try to identify the snake, if you can do so safely.



BURNS AND SCALDS

General Treatment First stop the burning process by removing the child from contact with hot water or a hot object (for example, tar). If clothing is burning, smother flames and cool clothing by soaking with water. Remove clothing unless it is firmly stuck to the skin. Run cool water over burned skin until the pain stops. Do not use ice or apply any butter, grease, medication, or ointment.

Burns With Blisters Do not break the blisters. Call the pediatrician for advice on how to cover the burn and about any burns on the face, hands, feet, or genitals.

Large or Deep Burns Call 911 or an emergency number. After stopping and cooling the burn, keep the child warm with a clean sheet covered with a blanket until help arrives.

Electrical Burns Disconnect electrical power. Do NOT touch the victim with bare hands. Pull the victim away from the power source with a wooden pole. ALL electrical burns need to be seen by a doctor.

SKIN WOUNDS

Make sure the child is immunized for tetanus. Any open wound may require a tetanus booster even when the child is currently immunized. If the child has an open wound, ask the pediatrician if the child should receive a tetanus booster.

Bruises Apply cold compresses. Call the pediatrician if the child has a crush injury, large bruises, continued pain, or swelling. The pediatrician may recommend acetaminophen for pain.

Cuts Wash small cuts with water until clean. Use direct pressure with a clean cloth to stop bleeding. Apply an antibiotic ointment, then cover the cut with a clean bandage. Call the pediatrician for large and/or deep cuts, or if the wound is gaping, because stitches should be placed without delay. For major bleeding, call for help (911 or an emergency number). Continue direct pressure with a clean cloth until help arrives.

Scrapes Rinse with soap and water to remove dirt and germs. Do not use detergents, alcohol, or peroxide. Use antiseptic soap. Apply an antibiotic ointment and a bandage that will not stick to the wound.

Splinters Remove small splinters with tweezers, then wash and apply local antiseptic. If you are unable to remove the splinter completely, call the pediatrician.

Puncture Wounds Do not remove large objects such as a knife or stick from a wound. Call for emergency medical assistance (911). Such objects must be removed by a doctor. Call the pediatrician for all puncture wounds. The child may need a tetanus booster.



EYE INJURIES

If anything is splashed in the eye, flush gently with water for at least 15 minutes. Call the Poison Center or the pediatrician for further advice. Any injured or painful eye should be seen by a doctor. Do NOT touch or rub an injured eye. Do NOT apply medication. Do NOT remove objects stuck into the eye. Cover the painful or injured eye with a paper cup or eye shield until you can get medical help. An eye injury may require a tetanus booster.

FRACTURES AND SPRAINS

DO NOT MOVE A CHILD WHO MAY HAVE A NECK OR BACK INJURY, as this may cause serious harm. Call 911 or an emergency number.

If an injured area is painful, swollen, deformed, or if motion causes pain, wrap it in a towel or soft cloth and make a splint with cardboard or another rigid material to hold the arm or leg in place. Apply ice or a cold compress, or seek emergency care, if there is a break in the skin near the fracture or if you can see the bone, cover the area with a clean bandage, make a splint as described above, and seek emergency care.

If the foot or hand below the injured part is cold or discolored, seek immediate emergency care.



FEVER

Fever in children is usually caused by infection. It also can be caused by chemicals, poisons, medications, an environment that is too hot, or an extreme level of exertion. Take the child's temperature to see if he has a fever. Most pediatricians consider any thermometer reading above 100.4°F (38°C) a sign of a fever. However, the way the child looks and behaves is more important than how high the child's temperature is. Call the pediatrician immediately if the child has a fever and:

- Appears very ill, is unusually drowsy, or is very fussy
- Has been in an extremely hot place, such as an overheated car
- Has additional symptoms such as a stiff neck, severe headache, severe sore throat, severe ear pain, an unexplained rash, or repeated vomiting or diarrhea
- Has a condition causing immune suppression (such as sickle cell disease, cancer, or the taking of steroids)
- Has had a seizure
- Is less than 2 months of age and has a rectal temperature of 100.4°F (38°C) or higher

To make the child more comfortable, dress him in light clothing, give him cool liquids to drink, and keep him calm. The pediatrician may recommend fever medications. Do not use aspirin to treat a child's fever. Aspirin has been linked with Reye syndrome, a serious disease that affects the liver and brain.



FAINING

Lay the child on his back with his head to the side. Do NOT give the child anything to drink. If the child does not wake up within 1 minute, call the pediatrician, or dial 911 or an emergency number, if the child is not breathing, begin CPR.

TEETH

Baby Teeth If knocked out or broken, apply clean gauze to control bleeding and call the pediatric dentist.

Permanent Teeth If knocked out, find the tooth and, if dirty, rinse gently without scrubbing or touching the root. Do not use chemical cleaners. Use milk or cold running water. Place the tooth into clean water or milk and transport the tooth with the child when seeking emergency care. Call and go directly to the pediatric dentist or an emergency department. If the tooth is broken, save the pieces in milk and call the pediatric dentist immediately.



CONVULSIONS, SEIZURES

If the child is breathing, lay her on her side to prevent choking. Make sure the child is safe from objects that could injure her. Do not put anything in the child's mouth. Loosen any tight clothing. Perform rescue breathing if the child is blue or not breathing. Call 911 or an emergency number.

HEAD INJURIES

DO NOT MOVE A CHILD WHO MAY HAVE A SERIOUS HEAD, NECK, AND/OR BACK INJURY. This may cause further harm.

Call 911 or an emergency number immediately if the child loses consciousness and does not awaken within a few minutes.

- Call the pediatrician for a child with a head injury and any of the following:
- Loss of consciousness
 - Drowsiness that lasts longer than 2 hours
 - Difficulty being awakened
 - Persistent headache or vomiting
 - Clumsiness or inability to move any body part
 - Coughing or blood or watery fluid from ears or nose
 - Convulsions (seizures)
 - Abnormal speech or behavior

For any questions about less serious injuries, call the pediatrician.

POISONS

If the child has been exposed to or ingested a poison, call the Poison Center at 800/222-1222.

Swallowed Poisons Any nonfood substance is a potential poison. Call the Poison Center immediately. Do not induce vomiting except on professional advice. The Poison Center will give you further instructions.

Fire, Gas, or Smoke

Get the victim into fresh air and call 911 or the fire department. If the child is not breathing, start cardiopulmonary resuscitation (CPR) and continue until help arrives.

Skin Exposure If acids, lye, pesticides, chemicals, poisons, or any potentially poisonous substance comes in contact with a child's skin, eyes, or hair, brush off any residual material while wearing rubber gloves, if possible. Remove contaminated clothing. Wash skin, eyes, or hair with large quantities of water or mild soap and water. Call the Poison Center for further advice.

If a child is unconscious, becoming drowsy, having convulsions, or having trouble breathing, call 911 or an emergency number. Bring the poisonous substance (safely contained) with you to the hospital.



NOSEBLEEDS

Keep the child in a sitting position with the head tilted slightly forward. Apply firm, steady pressure to both nostrils by squeezing them between your thumb and index finger for 10 minutes. If bleeding continues, or is very heavy, call the pediatrician or seek emergency care.

Does your community have 911? If not, note the number of your local ambulance service and other important numbers below.

**BE PREPARED: CALL 911
KEEP EMERGENCY NUMBERS
BY YOUR TELEPHONE**

PEDIATRICIAN _____

PEDIATRIC DENTIST _____

POISON CENTER _____

AMBULANCE _____

EMERGENCY DEPARTMENT _____

FIRE _____

POLICE _____



Turn Over for Choking and CPR Instructions

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™

Aap First Aid Guide

Tao Le,Vikas Bhushan,April Troy



Aap First Aid Guide:

Risk Management in Sport and Recreation John Otto Spengler, Daniel Connaughton, Andrew T. Pittman, 2006 Risk Management in Sport and Recreation is a comprehensive resource for those charged with the responsibility of providing for the safety of participants and spectators in a sport or recreation setting. It covers a range of safety issues including lightning, heat illness, aquatics, playground safety, drug testing, and medical emergency action plans. Readers receive clear and detailed explanations of issues to consider before making decisions on risk management. Risk Management in Sport and Recreation is designed to provide a foundation for approaching key issues in safety and risk management. It shows readers how to evaluate and analyze various safety issues and apply the underlying concepts to a variety of situations. The following are unique features of the text: A safety guidelines finder lists Web sites of accessible standards, guidelines, and recommendations from leading organizations; Chapter objectives and pullout boxes of key points and key statistics stress the importance of the topic under discussion; Threshold issues in each chapter highlight important factors to consider when making decisions on risk management; Real world applications at the end of each chapter present scenarios involving the potential for harm and readers must make a decision on how to address the issues; Examples of public service announcements, posters, and other publicly viewed safety information are presented; An appendix offers examples of emergency action plans, checklists, and recommendations from organizations such as the National Lightning Safety Institute and university aquatic centers; A companion Web site provides links to the Web sites used in the book as well as updates to guidelines and links that may occur after the book is in print. The safety guidelines finder gives students and practitioners a single location from which they can easily access important safety information. Organized under land-based or water-based activities, each activity lists guidelines, recommendations, and standards along with the source for that information. Each entry includes Web sites where readers can find the full documents. The text also features sample guidelines and safety checklists from agencies and associations that demonstrate how organizations might plan for risk and communicate safety information. Readers also consider the types of postings and equipment they will need in order to communicate their risk management plans and they are given real-life situations in which a risk management plan is needed and are prompted to consider why and how to create a plan for such situations. The resource will help students and professionals plan for and manage risk. Current and future employees of sport facilities, school athletic programs, parks and recreation programs, youth and aquatic centers, or resorts and golf courses will find that Risk Management in Sport and Recreation provides the tools to assist in making the right decisions to manage risk effectively. *Public Health Nursing - Revised Reprint* Marcia Stanhope, Jeanette Lancaster, 2013-10-15 This Revised Reprint of our 8th edition, the gold standard in community health nursing, Public Health Nursing: Population-Centered Health Care in the Community, has been updated with a new Quality and Safety Education in Nursing (QSEN) appendix that features examples of incorporating knowledge, skills, and attitudes to improve quality and safety.

in community public health nursing practice As with the previous version this text provides comprehensive and up to date content to keep you at the forefront of the ever changing community health climate and prepare you for an effective nursing career In addition to concepts and interventions for individuals families and communities this text also incorporates real life applications of the public nurse s role Healthy People 2020 initiatives new chapters on forensics and genomics plus timely coverage of disaster management and important client populations such as pregnant teens the homeless immigrants and more Evidence Based Practice boxes illustrate how the latest research findings apply to public community health nursing Separate chapters on disease outbreak investigation and disaster management describe the nurse s role in surveilling public health and managing these types of threats to public health Separate unit on the public community health nurse s role describes the different functions of the public community health nurse within the community Levels of Prevention boxes show how community public health nurses deliver health care interventions at the primary secondary and tertiary levels of prevention What Do You Think Did You Know and How To boxes use practical examples and critical thinking exercises to illustrate chapter content The Cutting Edge highlights significant issues and new approaches to community oriented nursing practice Practice Application provides case studies with critical thinking questions Separate chapters on community health initiatives thoroughly describe different approaches to promoting health among populations Appendixes offer additional resources and key information such as screening and assessment tools and clinical practice guidelines NEW Quality and Safety Education in Nursing QSEN appendix features examples of incorporating knowledge skills and attitudes to improve quality and safety in community public health nursing practice NEW Linking Content to Practice boxes provide real life applications for chapter content NEW Healthy People 2020 feature boxes highlight the goals and objectives for promoting health and wellness over the next decade NEW Forensic Nursing in the Community chapter focuses on the unique role of forensic nurses in public health and safety interpersonal violence mass violence and disasters NEW Genomics in Public Health Nursing chapter includes a history of genetics and genomics and their impact on public community health nursing care

Caring for Our Children American Academy of Pediatrics,2002 This guide is a resource for paediatricians interactions with parents as well as local child care providers which should help to promote the health and safety of children in these settings

Kidex for Fours R. Adrienne Boyd,2006 Kidex for Four s Practicing Competent Child Care provides extensive tools for understanding and caring for four year olds in a child care setting Suggestions for best practice care are integrated throughout the resource coupled with information to acquaint you with typical and atypical four year old behavior Kidex for Four s Practicing Competent Child Care assists you in developing a Kidex class book similar to a classroom operating manual that includes individual profiles for each child group schedules monthly checklists for important milestones of development and planned activities to accompany each month Many other documents to help manage the classroom are provided These documents pertain to safety hygiene sanitation communication providing for children and their families and

articles for parents Maintaining current information assures all children will receive consistent competent care every day

Magill's Medical Guide Anne Chang,2008 Covers diseases disorders treatments procedures specialties anatomy biology and issues in an A Z format with sidebars addressing recent developments in medicine and concise information boxes for all diseases and disorders

Mom's Ultimate Book of Lists, A Michelle LaRowe,2009-12 With more than a hundred helpful lists at a mom s fingertips this practical reference guide from a former nanny will save time money and sanity for today s busy moms

Kidex for Infants Adrienne Boyd,2006 Kidex for Infants Practicing Competent Child Care offers you the opportunity to keep an individual record for each infant with instructions for proper documentation of the infant s day a sample of charting and a reproducible charting template Individual profile sheets insure that you the professional are aware of all important details necessary to care for each infant such as type of formula bottle and nipple sleeping and playing habits etc Suggestions for best practice care are integrated throughout the resource coupled with information to acquaint you with typical and atypical infant behavior Kidex for Infants Practicing Competent Child Care assists you in developing a Kidex class book similar to a classroom operating manual that includes individual profiles for each child group schedules monthly checklists for important milestones of development and planned activities to accompany each month Many other documents to help manage the classroom are provided These documents pertain to safety hygiene sanitation communication providing for children and their families and articles for parents Maintaining current information assures all children will receive consistent competent care every day

Child Care Safety Ted S. Ferry,1993 First Aid for the Match: Insider Advice from Students and Residency Directors Tao Le,Vikas Bhushan,Chirag Amin,2001 The purpose of FIRST AID FOR THE MATCH is to help medical students effectively and efficiently navigate the often complex residency applications process It is designed to help students makes the most of their limited time money and energy In the spirit of FIRST AID FOR THE USMLE STPE 1 this book is a student to student guide that draws on the advice and experiences of medical students who have successfully gone through the Match and are now training in the programs of their choice

The Complete Idiot's Guide to Child Safety Miriam Bachar Settle,Susan Crites Price,2000 The Complete Idiot s Guide to Child Safety is a security blanket for parents to ensure that children are safe at home in the neighborhood or on the road

First Aid for the Match, Fourth Edition Tao Le,Vikas Bhushan,April Troy,2006-09-13 REAL WORLD RELEVANT ANSWERS TO ALL YOUR MATCH QUESTIONS More application and interview tips for each specialty Get the match you want What to do if you don t match Personal statements and CVs that worked Frequently asked interview questions and good answers Winning tips from students who matched with top programs Latest trends in specialties THE SUPPORT YOU NEED TO GET THE MATCH YOU WANT Select the right program Stay cool and do it right with step by step directions Avoid costly interview mistakes Get the inside scoop on Match Day Utilize tips designed for your specific situation Zero in on your goals

Build Your Career in Aviation Industry Jyoti Kumar Chaudhary,2008 National Union Catalog ,1978 Includes entries for maps and

atlases **The American Academy of Pediatrics Guide to Your Child's Symptoms** Donald Schiff, Steven P. Shelov, American Academy of Pediatrics, 1997 The most complete authoritative and up to date guide to children's symptoms available from the most respected authority on child and adolescent health care in America Keep it close at hand Sesame Street Parents magazine When an infant or small child is ill it is often very difficult for a parent to understand the nature of the problem The American Academy of Pediatrics Guide to Your Child's Symptoms enables a parent to identify a symptom quickly learn its possible cause and determine how best to proceed More than one hundred symptoms are listed alphabetically and the text and illustrations that accompany each one are arranged in easy to follow charts The Guide also includes Advice and guidelines on evaluating the seriousness of the symptom and what action a parent should take complete with a specific section on when to consult a pediatrician Comprehensive entries covering all children from birth through adolescence Scores of sidebars on important topics such as recognizing language milestones correcting eye problems and stopping a nosebleed An illustrated guide to basic first aid Guidelines for safety and accident prevention Widely praised for its unprecedented user friendly style and format the hardcover edition of the Guide to Your Child's Symptoms was a number one Library Journal reference bestseller and a selection of the Literary Guild The book also won the 1998 American Medical Writers Association Medical Book Award for Lay Readers as well as a 1998 National Health Information Award **Pediatric Clinical Practice Guidelines & Policies** American Academy of Pediatrics, 2006 This evidence based decision making tool for managing common pediatric conditions has been revised and updated for 2006 with the latest clinical practice guidelines for more than 30 conditions plus every AAP policy statement clinical report and technical report through December 2005

Caring for Children in School-age Programs Derry Gosselin Koralek, Roberta L. Newman, Laura Jean Colker, Marian Newman, 1995 The Medical Library Association Encyclopedic Guide to Searching and Finding Health Information on the Web: Health and wellness P. F. Anderson, Nancy J. Allee, 2004 Annotation Searching for health information may be the most important type of search a librarian performs in a day Instead of starting a health care search with a blank computer screen or simply accessing ordinary information available most anywhere on the Web start with help from the prestigious Medical Library Association Each entry will show you how an experienced health sciences librarian would approach the question You can begin a truly valuable search knowing Special searching issues What to ask Where to start Supplementary search strategies Topic profile Recommended search terms and important sites Hotline phone numbers FAQs Publications on the Internet Professional organizations Patient support organizations and discussion groups Best One Stop Shops Finally there's one ready reference source written by librarians to help their colleagues that covers every important aspect of the question you or your user want to answer **Foundations of Nursing in the Community - E-Book** Marcia Stanhope, Jeanette Lancaster, 2013-10-15 With concise focused coverage of community health nursing Foundations of Nursing in the Community Community Oriented Practice 4th Edition provides essential information for community practice from nursing roles and care

settings to vulnerable population groups The book uses a practical community oriented approach and places an emphasis on health promotion and disease prevention Practical application of concepts is highlighted throughout the text in case studies critical thinking activities QSEN competencies and Healthy People 2020 objectives Evidence Based Practice boxes highlight current research findings their application to practice and how community public health nurses can apply the study results Levels of Prevention boxes identify specific nursing interventions at the primary secondary and tertiary levels to reinforce the concept of prevention as it pertains to community and public health care Focus on health promotion throughout the text emphasizes initiatives strategies and interventions that promote the health of the community Clinical Application scenarios offer realistic situations with questions and answers to help you apply chapter concepts to practice in the community Case Studies provide client scenarios within the community public health setting to help you develop assessment and critical thinking skills What Would You Do boxes present problem solving challenges that encourage both independent and collaborative thinking required in community settings How To boxes offer specific instructions on nursing interventions NEW QSEN boxes illustrate how quality and safety goals competencies objectives knowledge skills and attitudes can be applied in nursing practice in the community NEW Feature box on Linking Content to Practice highlights how chapter content is applied in the role of public community health nursing NEW Healthy People 2020 objectives in every chapter address the health priorities and emerging health issues expected in the next decade [Fellowship Directory](#) American Academy of Pediatrics,1997 [Fellowship List](#) American Academy of Pediatrics,1986

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