

Emergency Aid Stage 2 Badge

Explain How To Help Someone Who: is bleeding, has a burn, is having an asthma attack

Accident & Emergency Room[©]

By Samantha Eagle

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Overview

The children are going to work within mini hospitals which will have an Accident and Emergency department. You are going to split your group into teams of six. One half of the group are going to be the Accident and Emergency staff and the other half are going to be the patients.

In each Accident and Emergency you need 1 doctor, 1 nurse, 1 receptionist and 3 patients. So depending on how many children you have in your group will depend on how many hospitals you setup.

The Week Before – Leader Speak

Next week we are going to be looking at how to deal with minor injuries for our Emergency Aid badge stage 2. We are going to be setting up a lifelike hospital with an Accident and Emergency unit.

If anyone has or can get hold of something that resembles a doctors coat or any doctors plastic toy instruments can you bring them in. Maybe your mum or your dad has an overall you can use or one you can borrow. It's not essential but it will make it all the more lifelike if you can bring something in.

Preparation Before The Meeting

1. Print out a copy of this document 'Instructions for the leader'
2. Print out the 'Scenarios for the patients' – found in this document - You will need a complete set for each hospital.

Materials Needed

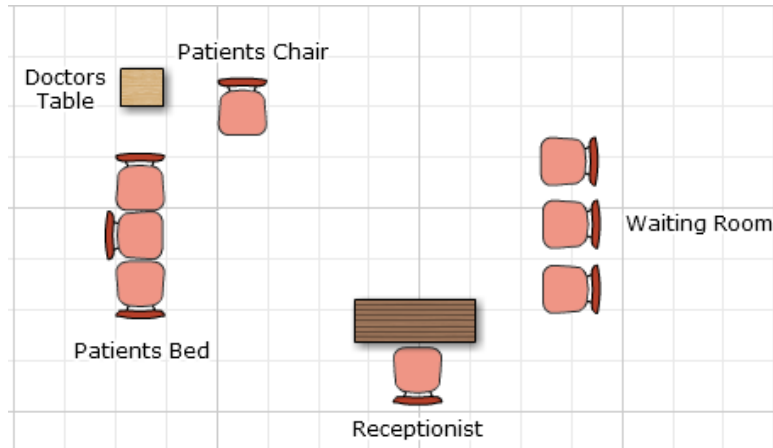
Each emergency room should have...

- Three chairs for the waiting room
- A chair and desk for the receptionist
- Two chairs facing each other for a bed and one in the middle to make it longer for a patient that needs to lay down
- One chair for a patient that can sit upright
- Plasters, Bandages
- Cloths
- Bowl and Soap (to wash hands)
- Paper Towels to dry hands
- Magazines for the waiting room
- A pile of scenarios for the patients to pick as they walk in
- Blanket
- Plastic cup for each hospital

Preparation At The Meeting Before The Children Arrive

Directions for setting up your hospital Accident and Emergency Rooms

1. Using the materials list setup your Emergency and Accident department like this



Directions/Leader Speak

1. **Speak** - The last task you are going to perform for your Emergency Aid stage 2 badge is to look at how to treat minor injuries. You are going to do this by operating out of a real life hospital (well one I've made up for you here tonight)
2. **Direction** - The receptionist sits at the receptionist table
3. **Direction** - The doctor and nurse wait by the patients bed
4. **Direction** - Before the patient walks into the hospital the leader gives them an 'Accident Scenario' – this will tell them what is wrong with them and how it will be treated
5. **Direction** - The patients walks into the hospital and approaches the receptionist, then let's him/her know what is wrong with them
6. **Action** - The receptionist quickly reads the scenario sheet and writes down the patients name on the "Accident Scenario" slip of paper and asks the patient to sit down in the waiting area
7. **Action** - The receptionist then takes the paper over and hands it to the nurse who then quickly reads it before handing it to the doctor to read
8. **Action** - The nurse calls the patients name and the patient follows the nurse to the doctor
9. **Action** - The doctor and nurse together deal with the injury using the scenario sheet
10. **Action** - Once the patient has been dealt with they go outside the hospital and stand with the leader
11. **Direction** - When all patients have been dealt with the staff within the hospital swop their roles for example, the receptionist now becomes the nurse and the doctor now becomes the receptionist, and the nurse becomes the doctor
12. **Action** - The patients come back in the hospital with a different scenario each and the process is repeated
13. **Direction** - Once the next three scenarios have been carried out the children swop so the patients now become the staff and the staff now become the patients.

Roleplay One

Situation - **Minor** Cut but bleeding heavily

Body Part - The palm of a hand



1. Immediately press the cut tightly with your hand or the injured person's hand over a clean pad or cloth and do not let go. In an outside emergency situation if you cannot get a cloth just use your hand
2. Sit or lie the injured person down and raise their arm above their head so that the bleeding slows down and stops
3. If the pad becomes soaked with blood, don't take it off. Put another pad on top of the first one and bind it tightly with a cloth. It should not be too tight. You must be able to fit a finger between the cloth and the skin
4. Once the bleeding is under control you can dress the cut
5. Wash and dry your hands thoroughly
6. Clean the wound under running tap water, or with a sterile saline solution, but do not use antiseptic because it may damage the tissue and slow down healing
7. Pat the area dry with a clean towel
8. Apply a sterile, adhesive dressing, such as a plaster

Roleplay Two

Situation - **Minor** Cut but bleeding heavily

Body Part - The Finger



1. Immediately press the cut tightly with your hand or the injured person's hand over a clean pad or cloth and do not let go.
2. Sit or lie the injured person down and raise their arm above their head so that the bleeding slows down and stops
3. If the pad becomes soaked with blood, don't take it off. Put another pad on top of the first one and bind it tightly with a cloth. It should not be too tight. You must be able to fit a finger between the cloth and the skin
4. Once the bleeding is under control you can dress the cut
5. Wash and dry your hands thoroughly
6. Clean the wound under running tap water, or with a sterile saline solution, but do not use antiseptic because it may damage the tissue and slow down healing
7. Pat the area dry with a clean towel
8. Apply a sterile, adhesive dressing, such as a plaster

Roleplay Three

Situation - Nose Bleed

Body Part - The nose



1. Sit down and pinch the soft part of the nasal cavity, just above the nostrils for about 10 minutes (this can be shorter for the **roleplay** purposes)
2. Tell the injured person to lean forward and breathe through their mouth this will drain blood down your nose instead of down the back of their throat
3. Tell the casualty to spit out any excess fluid in the mouth. Swallowing may disturb the clot and cause the casualty to feel sick
4. Loosen any tight clothing around the neck or chest
5. Stay upright, rather than lying down as this reduces the blood pressure in the veins of your nose and will discourage further bleeding
6. Maintain the pressure on your nose for up to 20 minutes (this isn't necessary for the **roleplay**)
7. Tell the patient to avoid blowing their nose, bending down and strenuous activity for at least 12 hours after a nosebleed; tell them to try to keep their head above the level of their heart during this time

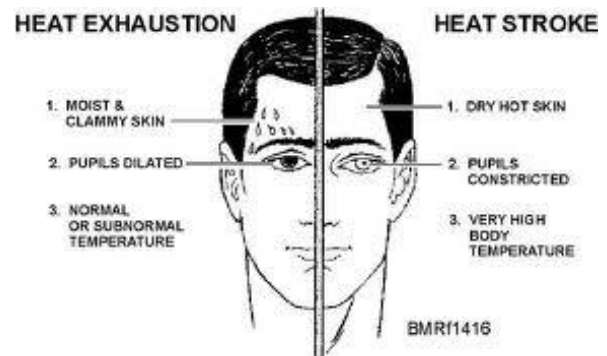
Roleplay Four

Situation - Mild Heat Exhaustion

Body Part - All

Symptoms: Pale and weak, feeling faint. The skin is cool and moist. Their pulse is rapid and weak. They may seem confused.

1. Lie the person down in a cool place and raise their feet
2. Give them plenty of water to drink
3. Remove any excess clothing
4. They should feel better in about half an hour

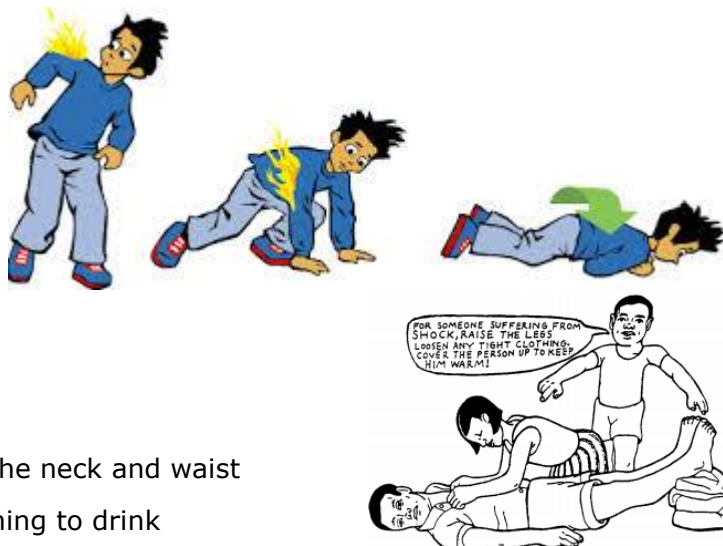


Roleplay Five

Situation - Person is on fire

Body Part - All

1. Roll them in a mat or throw a blanket over them
2. Now treat for **shock**
3. Lay the person down
4. Turn the head to one side
5. If possible raise the feet
6. Loosen the clothing around the neck and waist
7. Do not give the person anything to drink



Roleplay Six

Situation - Person is in **mild** shock

Body Part - All

1. Lay the person down
2. Turn the head to one side
3. If possible raise the feet
4. Loosen the clothing around the neck and waist
5. Do not give the person anything to drink



Roleplay Seven

Situation - Graze

Body Part - The knee

1. Sit the patient down and temporarily protect the wound by covering it with a clean piece of gauze
2. Wash your hands
3. Rinse the wound under cold running water until it is clean unless a clot has started to form and you feel it would be better to leave it as washing it would cause it to start bleeding again
4. Further clean the wound by using wet cotton wool. Always clean away from the centre of the wound outwards
5. Dry the area around the wound and place a dressing over it. Never dress a wound with cotton wool or anything fluffy



Roleplay Eight

Situation - Minor Burn

Body Part - The **Hand**



1. Cool the burnt area immediately by holding the injured part under cold running water or immerse in a bowl of cold water for at least 10 minutes to reduce the pain and to limit the extent of the burn. This will remove the heat from the injury and can help prevent scarring later.
2. Quickly, but carefully, remove any rings, watches, and tight clothing from the injured area before any swelling develops
3. Protect the injury by placing a sterile dressing over it, large enough to cover the area completely without the dressing sticking to the injury
4. If there are any blisters, do not attempt to burst them
5. Watch for the signs and symptoms of shock

NOTE: If the area of the injury is more than 2.5cm (one inch) square or caused by an electrical current, seek professional medical help.

Roleplay Nine

Situation - Bee Sting

Body Part - The Arm



1. If stung by a bee and the stinger is still in place - scrape it out:
2. Scrape out a bee sting left in the skin as quickly as possible. Use the edge of a knife, the edge of a credit card, a fingernail, or anything similar.
3. The quicker you remove the sting the better
4. Do not try to grab the sting to pluck it out as this may squeeze more venom into the skin. Scraping it out is better.

Roleplay Ten

Situation - Asthma Attack

Body Part - All

1. Reassure them and ask them to breathe slowly and deeply which will help them control their breathing
2. Help them use their reliever inhaler straight away. This should relieve the attack
3. Sit them down in a comfortable position
4. If it doesn't get better within a few minutes, it may be a severe attack. Get them to take one or two puffs of their inhaler every two minutes, until they've had 10 puffs
5. If the attack is severe and they are getting worse or becoming exhausted, or if this is their **first** attack, then call 999/112 for an ambulance
6. Help them to keep using their inhaler if they need to. Keep checking their breathing, pulse and level of response
7. If they lose consciousness at any point, open their airway, check their breathing and prepare to treat someone who's become unconscious

In an asthma attack, the muscles of the air passages in the lungs go into spasm. This makes the airways narrower, making it difficult to breathe.

People with asthma usually deal with their own attacks by using a blue reliever inhaler at the first sign of an attack. But if someone doesn't have an inhaler, or the attack is severe, you may need to help.

If you think someone is having an asthma attack, these are the five key things to look for:

1. Difficulty breathing or speaking
2. Wheezing
3. Coughing
4. Distress
5. Grey-blue tinge to the lips, earlobes and nailbeds (known as cyanosis)