FIRST

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

STINGS AND BITES

Sclingling Property Remove the stinger as quickly as possible with the scraping motion of a fingermat. Put a cold the scraping motion of the scraping account to the scraping of the scraping scraping scraping, fainting, or extreme swelling occurs call \$611 or an emergency number immediately. For Nives, nauros, or vomiting, call the pediatrician. For spider bites, call the pediatrician or Posson Center and describe the spider. Have

the pediatrician examine any bites that become infected. Amined on Plannam Bibles Wash evound thoroughly with soap and water. Call the pediatrician. The child may require a teramus or rables shot.

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

Smaller Bibbas Take the child to an emergency department if you are concurred that the snake map be polonomous or if you are unsure of the type of snake bite. Keep the child at rest, Do not apply one. Loosely splint the injured area and keep it at rest, positioned as, or slightly below, the level of the heart. Try to identify the snake, if you can do so safety.

BURNS AND SCALDS

Castescraid Terlastromaisms firsts stop the burning process by removing the child from contact with hot water as hot object the example, said if contact water as a hot object the example, said if contact water as a second of the contact with the contact water as a second of the contact water as a second of the contact water as a second of the contact water burned skin until the pain stops. Do not use

ice or apply any butter, grease, medication, or circiment. Bernes With Misters 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.

Example our Design Baumes 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.

Effects food Burres Disconnect electrical power. Do NOT touch the victim selfs have hands. Pull the victim selfs have the power source with a wooden pole. ALL electrical burns need to be seen by a disctor.

EYE INJURIES

If amything is solashed in the eye, flush gently with water for at least 15 minutes. Call the Poisson Center or the pediatrician for further advice. Any injuried or painful eye should be seen by a doctor. Do NOT touch or rub an injured eye. Do NOT apply medication. Do NOT nemove objects stuck into the eye. Cover the painful or injured eye this a paper cup or eye shield until you can get medical help. An eye injury may require a betanus 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 injuried area is painful, swotlen, deformed, or if motion causes pain, wrap it in a towel or soft color and make a splint with cardboard or another nigit material to hold the arm or leg in place. Apply to or a cold compress, call the pediatrician, 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.



0,0

FEVER

Fever in children is usually caused by infection, it also can be canied by chemicals, poisons, medications, an emilioniment that is too hot, or an extreme level of overactivity. Take the child's temperature to see if he has a fever. Most prefactious consider any thermometer mading above 100.47 (28YC) a sign of a fever, meter mading above 100.47 (28YC) a sign of a fever important than how high the child's temperature is. Call the conductivities immediately if the child has a

- Appears very iff, is unusually drowny, or is very
- Has been in an extremely hot place, such as an overheated car
 Has additional symptoms such as a stiff neck, severe!
- Has additional symptoms such as a stiff neck, severe headache, severe sore throat, severe sar pain, an unexplained rash, or represent vomiting or diarrhes
- Has a condition causing immune suppression butch as sickle cell disease, cancer, or the taking of steroids)
- Hise had a setzure
 Its less than 2 months of age and has a rectal temperature
 of 100.4T (38TC) or higher

To make the child more comfortable, dress him in light clothing, give him cool liquids to drink, and keep him calm. The pedia rician may recommend fever medications. Do not use applied to creat a child's fever. Aspirin has been linked with Raye syndrome, a verticul disease that affects the liver and brain.

FAINTING

Law the child on his back with his head to the side. Do NOT give the child anything to chick, if the child does not wake up right away, call the pediatrician, or did 50 f or an emergency number, if the child is not breathing, begin CTE.

TEETH

Bailey Teath if knocked out or broken, apply clean gause to control bleeding and call the pediatric dentist.

Paramanase Tracelly if anoched out, find the tooth and, if dirty, rises gently without sorubbing or touching the soci. Do not use the control of the soci. To not use the social running easer. Race 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 denoted or an emergency department. If the tooth is broken, see the pieces in milk and call the pediatric denoted immediately.

CONVULSIONS, SEIZURES

If the child is breathing, lay her on her side to prevent cholong. Make sure the child is safe from objects that could injure her On not put anything in the child's mouth, Loosen any tight clothing. Perform rescue breathing if the child is blue or not breathing. Call \$11 or an energency number.

SKIN WOUNDS

Make sure the child is immunized for setanus. 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.

Brestats Apply cold compresses. Call the pediatrician if the child has a crush injury, large bruises, continued pain, or swelling.

Birtase's Appropriate compresses. Call the pediatrician in the child has a crush injury, target brusses, continued plain, or swetting. The pediatrician may recommend acetaminophen for pain.

Casts 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 anti/or deep cuts, or if the wound is gaping. Because strickes should be placed without delay. For major bleeding, call for help 011 or an emergency number. Continue direct pressure with a clean cloth until help arribes.

Scrapes Ringe with soop and water to remove dist and germs. Do not use detergents, alcohol, or perceids. Use antiseptic solar, Apply an ambitroic continent and a bandage that well not stock to the evolund.

Splintary Remove small aptimizes with towarders, then wash and apply local antiseptic. If you are unable to remove the splinter completely, call the pediatrician.

Paractizere: Mountails: Do not remove large objects such as a knife or stick from a wound.
Call for emergency medical assistance (SI 1), Such objects must be removed by a doctor.
Call the pediatrician for all puncture wounds. The child may need a tetanus booster.

ANTHORIS IN

HEAD INJURIES

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

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 verniting
- Clumsiness or inability to move any body part
 Occing of blood or watery fluid from ears or nose
- Convulsions (seizures)
- Abnormal speech or behavior

Fames, Gases, or Smoke

loison Center for further advice.

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

POISONS

If the child has been expresed to or inquised a poison, call the Poison Center at 805/222-1222.
Swallbored Poisons Any nonfood substance is a potential poison. Call the Poison Center immediately, to not induce vorsiting except on professional advice. The Poison Center will give you further instructions.

Cet the victim into fresh air and call \$11 or the five department, if the child is not breathing, start cardio-polinomary resuscitation (CPR) and continue until help arrives. Skile Exposurer if acids, live, peoploides, chemicals, poisonous plants, or any potentially poisonous substance comes in contact with a child's skin, eyes, or hair, brush off any residual material while securing nubber gioves, if possible. Bemove contaminated clothing, Wash skin, eyes, or hair with

large quantities of water or mild soap and water. Call the

if a child is unconscious, becoming drowns, having convulsions, or having trouble breathing, call \$11 or an emergency number. Bring the possenous substance (safely-contained) with you to the hospital.

NOSEBLEEDS

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

Does your community have 9117 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

PEDIATRIC DENTIST

AMBULANCE

PEDIATRICIAN

EMERCENCY DEPARTMENT

POLICE



Turn Over for Choking and CPR Instructions

American Academy of Pediatrics

First Aid Printable Guide

Minjie Lin

First Aid Printable Guide:

Comprehensive First Aid Guide Adil Hussain, Mamta Bhandari, 2025-06-25 Provides comprehensive and in depth coverage of all essential first aid topics from minor injuries to major emergencies Content is thoroughly based on updated medical guidelines and evidence based practices for safe and effective care Written in clear simple language to ensure easy understanding by students teachers and the general public Includes informative illustrations and diagrams to visually support learning and practical application Organized in a quick reference format to help readers access vital information rapidly during emergencies Each chapter concludes with concise summaries and key points to reinforce learning and aid in revision Real life case studies and practical examples are integrated to demonstrate real world application of first aid skills

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