# Emergency First Aid Practice Test

(See answers below. The official Emergency test is multiple choice and around 40 questions)

## High-Quality CPR

1. When do you do CPR?
2. How many compressions per minute for ADULT, CHILD, and INFANT CPR?
3. How deep are the compressions for ADULTS?
4. How deep are the compressions for CHILDREN?
5. How deep are the compressions for INFANTS?
6. Why should you allow full chest recoil during CPR?
7. How do you perform CPR on an ADULT?
8. How do you perform CPR on a CHILD?
9. How do you perform CPR on an INFANT?
10. After how many minutes should you alternate the compressor role?
11. Why is it extra important to give breaths to children and infants during CPR?
12. What is the full sequence of events for an adult who is unconscious and not breathing, starting from checking the scene?

## Breaths

1. How do you know if the breath goes into the lungs?
2. How do you open an infant’s airway to give breaths?
3. What happens if you force too much air into a patient?

## Pocket masks

1. How do you create a seal with a pocket mask during CPR?
2. How do you use a pocket mask during CPR?

## Age Range

1. What age are you an ADULT?
2. What age are you a CHILD?
3. What age are you an INFANT?

## Choking

1. What should you do if a conscious adult or child is choking and still coughing?
2. What should you do if a conscious infant is choking and coughing?
3. What should you do if a conscious adult or child is choking and can no longer cough?
4. What should you do if a conscious infant is choking and can no longer cough?
5. What should you do if a pregnant woman is choking and can no longer cough?
6. What should you do if a person in a wheelchair is choking and can no longer cough?
7. What should you are alone and choking?
8. What should you do if a choking adult, child, or infant becomes unconscious?

## AED

1. Where do you place the AED pads on an ADULT?
2. Where do you place the AED pads on an CHILD?
3. Where do you place the AED pads on an INFANT?
4. What does the AED do to the heart during shockable rhythms?
5. How can you use an AED if someone is submerged underwater?
6. What should you do during AED analyzing phase? What should you do during AED shock phase?
7. What are some common complications with applying the AED pads?
8. How do you use AED on someone with a pacemaker?

## Cardiac arrest

1. What is cardiac arrest?
2. What does cardiac arrest look like?
3. What should you do when someone is in cardiac arrest?

## Agonal respirations

1. What are agonal respirations?
2. When do agonal respirations occur?
3. What should you do when you see agonal respirations?

## Opioids

1. What does opioid overdose look like?
2. How do you die from opioid overdose?
3. What do you give someone who is overdosing?

## Adult Chain of Survival

1. What is the adult chain of survival?
2. What is the child chain of survival?
3. What is the infant chain of survival?

## Scene Survey

1. What is the main function of the scene survey?
2. How do you perform a scene survey?

## Primary Survey

1. What is the main function of the primary survey?
2. How do you perform a primary survey?

## Personal Protective Equipment

1. What some examples of personal protective equipment?
2. When should you wear gloves?

## Shock

1. What is shock in first aid?
2. What are the signs and symptoms of shock?
3. Can shock be life threatening?

## Recovery position

1. When do you put someone into the recovery position?
2. How do you put someone into the recovery position?

## Spinal injury

1. What are some mechanisms of injury that can result in spinal injury?
2. What are some signs and symptoms of spinal injury?
3. What should you do if you suspect someone has a spinal injury?

## Seizure

1. What is a seizure?
2. What is a tonic-clonic seizure?
3. What is a febrile seizure? How do you treat a febrile seizure?
4. What do you do for someone having a seizure?

## Asthma

1. What is asthma?
2. What are the signs and symptoms of asthma?
3. How do you treat an asthma attack?

## Allergy & Anaphylaxis

1. What is allergy? What is anaphylaxis?
2. What are the signs and symptoms of allergy? What are the signs and symptoms of anaphylaxis?
3. How do you treat allergy? How do you treat anaphylaxis?

## Diabetes

1. What is diabetes?
2. What are the signs and symptoms of hypoglycemia? Of hyperglycemia?
3. How do you treat hypoglycemia?
4. How do you treat hyperglycemia?

## Burns

1. How do you treat burns?
2. What is a first-degree burn? Second-degree burn? Third-degree burn?
3. What are some rules to measure burns (Rule of …)?
4. What do you do for chemical burns to the eye?

## Wound care

1. What do we do when a wound bleeds through the first bandage?
2. What do we do when direct pressure is not enough to stop the EXTERNAL bleeding?
3. What are the signs and symptoms of internal bleeding?
4. What do we do when the person has life threatening INTERNAL bleeding?
5. When do you apply a tourniquet?
6. How do you apply a makeshift tourniquet?

## Impaled objects

1. What is an impaled object?
2. How do you treat an impaled object?
3. What do you do for a impaled object in one eye?

## Poisons

1. What do you do when someone has swallowed a poison?
2. What are some good questions to ask someone who has swallowed a poison?
3. Should you always induce vomiting for poisons?
4. What should you do regarding inhaled poison?
5. What should you do for absorbed poisons?
6. What should you do for injected poisons?

# Answers

**High-Quality CPR**

1. **When do you do CPR?**
	* CPR (Cardiopulmonary Resuscitation) is performed when a person is unresponsive, not breathing, or only gasping for air, indicating cardiac arrest.
2. **How many compressions per minute for ADULT, CHILD, and INFANT CPR?**
	* The recommended rate is at least 100 to 120 compressions per minute for adults, children, and infants.
3. **How deep are the compressions for ADULTS?**
	* Compressions should be at least 2 inches (5 cm) deep for adults.
4. **How deep are the compressions for CHILDREN?**
	* Compressions should be about 2 inches (5 cm) deep, or one-third the depth of the chest, for children.
5. **How deep are the compressions for INFANTS?**
	* Compressions should be about 1.5 inches (4 cm) deep, or one-third the depth of the chest, for infants.
6. **Why should you allow full chest recoil during CPR?**
	* Full chest recoil allows the heart to refill with blood between compressions, which is essential for creating the blood flow needed to deliver oxygen to the body's organs, including the brain.
7. **How do you perform CPR on an ADULT?**
	* Ensure the scene is safe. Check for responsiveness. Call for emergency help and retrieve an AED if available. Start chest compressions in the center of the chest, pushing down at least 2 inches deep at a rate of 100-120 per minute. After 30 compressions, open the airway with a head-tilt, chin-lift maneuver and give 2 breaths, watching for chest rise. Continue the cycle of 30 compressions and 2 breaths.
8. **How do you perform CPR on a CHILD?**
	* Follow the same steps as for an adult. Use one or two hands for compressions depending on the size of the child, ensuring compressions are about 2 inches deep.
9. **How do you perform CPR on an INFANT?**
	* Use two fingers to deliver compressions just below the nipple line. Press down about 1.5 inches deep. After 30 compressions, use a head-tilt, chin-lift maneuver to open the airway, and cover the infant's mouth and nose with your mouth to give 2 gentle breaths.
10. **After how many minutes should you alternate the compressor role?**
	* It is recommended to switch the compressor role every 2 minutes to prevent fatigue and ensure the quality of compressions remains high.
11. **Why is it extra important to give breaths to children and infants during CPR?**
	* Because respiratory issues often cause cardiac arrest in children and infants, providing breaths is critical to ensure they receive adequate oxygen to their lungs and organs, which can be more crucial for their survival compared to adults.
12. **What is the full sequence of events for an adult who is unconscious and not breathing, starting from checking the scene?**
	* Check the scene for safety.
	* Check the person for responsiveness and breathing.
	* Call or have someone call for emergency help and retrieve an AED.
	* Begin CPR with chest compressions (30 compressions to 2 breaths).
	* Open the airway using the head-tilt, chin-lift maneuver for breaths.
	* Continue CPR until the person shows signs of life, an AED is ready to use, you are too exhausted to continue, or professional help takes over.

**Breaths**

1. **How do you know if the breath goes into the lungs?**
	* You will see the chest rise with each breath given. If the chest does not rise, recheck the airway to ensure it is properly opened and reattempt the breath.
2. **How do you open an infant’s airway to give breaths?**
	* Use the head-tilt, chin-lift maneuver, but be careful not to tilt the head too far back, as this can block the airway. A slight tilt is sufficient for infants.
3. **What happens if you force too much air into a patient?**
	* Forcing too much air can lead to gastric inflation, which increases the risk of vomiting and aspiration. It can also cause damage to the lungs and decrease the effectiveness of ventilation by not allowing enough air to enter the lungs.

**Pocket Masks**

1. **How do you create a seal with a pocket mask during CPR?**
	* Place the mask over the patient's face, ensuring the pointed end of the mask is on the nose and the rounded end is on the chin. Use the bridge of your hand on the mask's top (over the nose area) and your fingers to lift the jaw into the mask, creating a tight seal. Ensure your hand's position does not obstruct the mask's valve.
2. **How do you use a pocket mask during CPR?**
	* After creating a seal with the mask on the patient's face, take a normal breath, and blow into the one-way valve for about 1 second to make the chest visibly rise. Maintain the seal and allow for passive exhalation before giving the next breath. Continue chest compressions and ventilation as per CPR protocol.

**Age Range**

1. **What age are you an ADULT?**
	* In the context of CPR, an individual is considered an adult at puberty (around 12 years) and above. For an AED, anyone above 8 years old should use adult pads.
2. **What age are you a CHILD?**
	* A child is considered to be anyone from 1 year of age up to but not including puberty (around 12 years of age). For an AED, anyone above 8 years old should use adult pads.
3. **What age are you an INFANT?**
	* An infant is defined as a child under 1 year of age.

**Choking**

1. **What should you do if a conscious adult or child is choking and still coughing?**
	* Encourage them to continue coughing. Coughing is the most effective way to dislodge the object. Monitor closely and be ready to act if the situation worsens.
2. **What should you do if a conscious infant is choking and coughing?**
	* Keep a close eye on the infant and encourage coughing if they are able to do so. Be prepared to take action if the coughing is not effective in clearing the airway.
3. **What should you do if a conscious adult or child is choking and can no longer cough?**
	* Perform the Heimlich maneuver (abdominal thrusts) for adults and children old enough to stand. Stand behind them, wrap your arms around their waist, place a fist above their navel, and pull inward and upward sharply. Alternatively, you can perform 5 abdominal thrusts and 5 back blows.
4. **What should you do if a conscious infant is choking and can no longer cough?**
	* Perform back slaps and chest thrusts. Hold the infant face down on your forearm, supported by your thigh, and give 5 back slaps between their shoulder blades. Then, turn the infant over and give 5 chest thrusts using two fingers in the center of their chest.
5. **What should you do if a pregnant woman is choking and can no longer cough?**
	* Perform chest thrusts instead of abdominal thrusts. Place your hands in the center of her chest and press hard and fast until the obstruction is cleared.
6. **What should you do if a person in a wheelchair is choking and can no longer cough?**
	* If the person can stand, assist them to do so and perform the Heimlich maneuver. If they cannot stand, lean them forward as much as possible and give back blows or try chest thrusts if back blows are not effective.
7. **What should you do if you are alone and choking?**
	* Attempt to perform the Heimlich maneuver on yourself by using a firm surface like the back of a chair, edge of a table, or countertop. Thrust your abdomen against the edge to dislodge the object.
8. **What should you do if a choking adult, child, or infant becomes unconscious?**
	* Call for help, lay the person flat on their back, and begin CPR. Look inside the mouth before giving breaths and remove any visible obstruction. If the breath does not make the chest rise, reposition the head, try another breath, and continue CPR.
9. **Where do you place the AED pads on an ADULT?**
	* Place one pad on the right upper chest, just below the collarbone, and the other pad on the left side of the chest, below the armpit. The pads should be positioned so that they do not touch each other.
10. **Where do you place the AED pads on a CHILD?**
	* Use the same placement as for adults: one pad on the right upper chest and the other on the lower left side of the chest. For very small children or infants, if the pads risk touching, place one pad in the center of the chest and the other on the back between the shoulder blades.
11. **Where do you place the AED pads on an INFANT?**
	* Place one pad on the center of the chest and the other pad on the back, between the shoulder blades. This is known as the anterior-posterior placement.
12. **What does the AED do to the heart during shockable rhythms?**
	* The AED delivers an electrical shock to the heart, which can terminate a chaotic, abnormal rhythm and allow the heart's natural pacemaker to resume a normal rhythm.
13. **How can you use an AED if someone is submerged underwater?**
	* You cannot use an AED while the person is in water. Remove the person from the water, dry the chest area thoroughly, and ensure that you, the patient, and the AED are not in standing water before attaching the pads and using the device.
14. **What should you do during AED analyzing phase? What should you do during AED shock phase?**
	* During the analyzing phase, ensure no one is touching the patient, and say "STAND CLEAR." During the shock phase, confirm everyone is clear of the patient, announce the shock, and press the shock button if the AED is manual. For automatic AEDs, ensure everyone remains clear of the patient.
15. **What are some common complications with applying the AED pads?**
	* Complications can include pad misplacement, inadequate skin contact (due to hair, moisture, or medical patches), and interference from jewelry or clothing. Removing hair, drying the skin, and removing obstacles can mitigate these issues.
16. **How do you use AED on someone with a pacemaker?**
	* If the person has a pacemaker, avoid placing the AED pad directly over the pacemaker site (usually visible as a small lump under the skin on the upper chest). Place the pad at least one inch away from the pacemaker if possible.

**Cardiac Arrest**

1. **What is cardiac arrest?**
	* Cardiac arrest occurs when the heart suddenly stops beating effectively, leading to a cessation of blood flow to the brain and other vital organs.
2. **What does cardiac arrest look like?**
	* Signs include sudden loss of responsiveness, no normal breathing (the victim may have absent or abnormal breathing such as agonal respirations), and no signs of circulation (e.g., no pulse).
3. **What should you do when someone is in cardiac arrest?**
	* Immediately call for emergency medical services, start CPR with chest compressions, and use an AED as soon as it is available. Continue CPR until emergency help arrives or the person shows signs of life.

**Agonal Respirations**

1. **What are agonal respirations?**
	* Agonal respirations are irregular, gasping breaths that can occur after cardiac arrest. They are not effective breaths and are a sign of severe distress.
2. **When do agonal respirations occur?**
	* They typically occur shortly after cardiac arrest as a reflexive action of the body, not effective breathing.
3. **What should you do when you see agonal respirations?**
	* Recognize it as a sign of cardiac arrest, begin CPR immediately, and use an AED as soon as possible. Treat agonal respirations as if the person is not breathing at all.

**Opioids**

1. **What does opioid overdose look like?**
	* Symptoms include pinpoint pupils, unconsciousness or inability to wake up, weak or no breathing, limp body, and pale, blue, or cold skin.
2. **How do you die from opioid overdose?**
	* Death from an opioid overdose typically results from respiratory failure. Opioids depress the body's urge to breathe, potentially leading to hypoxia, brain damage, and death.
3. **What do you give someone who is overdosing?**
	* Administer naloxone (Narcan) if available. Naloxone is an opioid antagonist that can rapidly reverse the effects of an opioid overdose. Follow up with emergency medical care immediately.

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**Adult Chain of Survival**

1. **What is the adult chain of survival?**
	* The adult chain of survival includes the following steps:
		1. Recognition of cardiac arrest and activation of the emergency response system.
		2. Early cardiopulmonary resuscitation (CPR) with an emphasis on chest compressions.
		3. Rapid defibrillation.
		4. Advanced resuscitation by Emergency Medical Services and other healthcare providers.
		5. Post-cardiac arrest care.
		6. Recovery, including additional treatment, observation, rehabilitation, and psychological support

**Child Chain of Survival**

1. **What is the child chain of survival?**
	* The child chain of survival is similar to the adult chain but emphasizes the importance of prevention and includes:
		1. Early access and prevention.
		2. Early cardiopulmonary resuscitation (CPR).
		3. Rapid defibrillation.
		4. Advanced resuscitation.
		5. Pediatric post-cardiac arrest care.
		6. Recovery, including additional treatment, observation, rehabilitation, and psychological support

**Infant Chain of Survival**

1. **What is the infant chain of survival?**
	* The infant chain of survival focuses on:
		1. Early access and prevention.
		2. Early pediatric cardiopulmonary resuscitation (CPR).
		3. Rapid defibrillation.
		4. Advanced pediatric resuscitation.
		5. Pediatric post-cardiac arrest care.
		6. Recovery, including additional treatment, observation, rehabilitation, and psychological support

**Scene Survey**

1. **What is the main function of the scene survey?**
	* The main function of the scene survey is to ensure the safety of the rescuer, the victim, and bystanders. It involves assessing the environment for potential hazards before providing first aid.
2. **How do you perform a scene survey?**
	* To perform a scene survey, you:
		1. Look for hazards that could pose a risk to yourself or the victim (e.g., traffic, fire, electricity, chemicals). Find possible mechanism of injury MOI
		2. Determine if the scene is safe to enter.
		3. Assess the number of victims and the nature of their condition as part of deciding on further actions. Identify bystanders

**Primary Survey**

1. **What is the main function of the primary survey?**
	* The main function of the primary survey is to identify and immediately address any life-threatening conditions, following the ABCDE approach: Airway, Breathing, Circulation, Disability, and Exposure/Environment.
2. **How do you perform a primary survey?**
	* To perform a primary survey, you:
		1. Check the Airway to ensure it is open and clear.
		2. Assess Breathing and start rescue breathing if necessary.
		3. Check Circulation and start CPR if there's no pulse.
		4. Quickly assess Disability (level of consciousness).
		5. Manage Exposure/Environment by ensuring the victim is in a safe location and managing their body temperature.

**Personal Protective Equipment**

1. **What some examples of personal protective equipment?**
	* Examples of personal protective equipment (PPE) in first aid include gloves, masks, eye protection, and gowns.
2. **When should you wear gloves?**
	* You should wear gloves whenever you anticipate contact with blood, bodily fluids, mucous membranes, non-intact skin, or potentially contaminated surfaces.

**Shock**

1. **What is shock in first aid?**
	* In first aid, shock is a life-threatening condition that occurs when the body is not getting enough blood flow, leading to inadequate oxygen supply to the body's tissues.
2. **What are the signs and symptoms of shock?**
	* Signs and symptoms of shock include pale, cold, and clammy skin; rapid breathing and pulse; weakness or dizziness; nausea or vomiting; and sometimes, confusion or loss of consciousness.

57. **Can shock be life threatening?**

* + Yes, shock can be life-threatening and requires immediate medical treatment to address the underlying cause and prevent organ damage or death.

**Recovery Position**

1. **When do you put someone into the recovery position?**
	* You put someone into the recovery position when they are unconscious or low level of awareness but breathing, to keep the airway open and clear of obstructions and to prevent aspiration.
2. **How do you put someone into the recovery position?**
	* To put someone into the recovery position:
		1. Ensure the person is lying on their back, then kneel beside them.
		2. Place the arm nearest to you above their head.
		3. Move the other arm across their chest, and position the back of their hand against their cheek nearest you.
		4. With your other hand, grab the leg farthest from you and bend the knee.
		5. Keeping their hand pressed against their cheek, pull on the bent leg to roll them towards you onto their side.
		6. Tilt the head back to ensure the airway remains open.
		7. Adjust the upper leg so both the hip and knee are bent at right angles to stabilize the position.

**Spinal Injury**

1. **What are some mechanisms of injury that can result in spinal injury?**
	* Mechanisms of injury that can result in spinal injury include:
		1. Motor vehicle accidents (as a driver, passenger, or pedestrian).
		2. Falls from a height or slips and trips, especially if landing awkwardly.
		3. Sports injuries, particularly in contact sports or activities with a risk of falling.
		4. Diving into shallow water.
		5. Blows to the head or body, which directly affect the spine.
		6. Gunshot or knife wounds.
2. **What are some signs and symptoms of spinal injury?**
	* Signs and symptoms of spinal injury include:
		1. Pain or tenderness along the spinal column.
		2. Loss of movement or sensation, including the inability to move limbs.
		3. Numbness, tingling, or loss of sensation in the hands, fingers, feet, or toes.
		4. Loss of bladder or bowel control.
		5. Impaired breathing after the injury.
		6. An oddly positioned or twisted neck or back.
3. **What should you do if you suspect someone has a spinal injury?**
	* If you suspect someone has a spinal injury:
		1. Do not move the injured person unless it's absolutely necessary (e.g., danger of further injury).
		2. Call emergency services immediately.
		3. Keep the person still; place heavy towels or clothes on both sides of the neck or hold the head and neck to prevent movement.
		4. Provide reassurance, keeping them calm and still until help arrives.
		5. Do not remove a helmet if worn.
		6. Monitor their breathing and be prepared to perform CPR if needed but try not to move their neck or spine.

**Seizure**

1. **What is a seizure?**
	* A seizure is a sudden, uncontrolled electrical disturbance in the brain. It can cause changes in behavior, movements or feelings, and levels of consciousness.
2. **What is a tonic-clonic seizure?**
	* A tonic-clonic seizure, formerly known as a grand mal seizure, is a type of seizure that involves a loss of consciousness and violent muscle contractions. It's the type most people associate with epilepsy.
3. **What is a febrile seizure? How do you treat a febrile seizure?**
	* A febrile seizure is a convulsion in a child triggered by a fever, often from an infection. Treating a febrile seizure involves:
		1. Keeping the child safe by placing them on a soft surface, on their side, to maintain an open airway and prevent choking.
		2. Removing any objects that could injure them.
		3. Looking for signs of respiratory distress.
		4. Not placing anything in the child's mouth.
		5. Seeking medical advice after the seizure, especially if it's the first time, lasts longer than 5 minutes, or is accompanied by a stiff neck, vomiting, or breathing problems.
4. **What do you do for someone having a seizure?**
	* For someone having a seizure:
		1. Keep calm and reassure others.
		2. Remove objects that could cause injury.
		3. Cushion their head.
		4. After the seizure, turn them onto their side (recovery position).
		5. Stay with them until they are fully recovered.
		6. Do not restrain them or put anything in their mouth.
		7. Call for medical help.

**Asthma**

1. **What is asthma?**
	* Asthma is a chronic condition characterized by inflammation and narrowing of the airways, causing difficulty in breathing.
2. **What are the signs and symptoms of asthma?**
	* Signs and symptoms of asthma include:
		1. Wheezing (a whistling sound when breathing).
		2. Shortness of breath.
		3. Chest tightness or pain.
		4. Trouble sleeping caused by shortness of breath, coughing, or wheezing.
		5. Coughing or wheezing attacks that are worsened by a respiratory virus.
		6. Tripod positioning
3. **How do you treat an asthma attack?**
	* To treat an asthma attack:
		1. Have the person sit upright and try to keep calm.
		2. Give them their rescue inhaler to use and use as directed.
		3. If the person does not have an inhaler, is not improving, or if symptoms worsen, call emergency services immediately.
		4. Do not leave them alone; monitor their condition.

**Allergy & Anaphylaxis**

1. **What is allergy? What is anaphylaxis?**
	* Allergy is an immune system reaction to a foreign substance (allergen) that is not typically harmful to the body. Anaphylaxis is a severe, potentially life-threatening allergic reaction that can occur within seconds or minutes of exposure to an allergen.
2. **What are the signs and symptoms of allergy? What are the signs and symptoms of anaphylaxis?**
	* Signs and symptoms of an allergy can range from mild to severe and include hives, itching, rash, watery eyes, and congestion. Anaphylaxis symptoms include:
		1. Difficulty breathing, wheezing, or shortness of breath.
		2. Swelling of the lips, tongue, throat, or face.
		3. Rapid drop in blood pressure, leading to dizziness or fainting.
		4. Severe hives or a widespread rash.
		5. Nausea, vomiting, or diarrhea.
		6. Feeling of doom or anxiety.
3. **How do you treat allergy? How do you treat anaphylaxis?**
	* To treat an allergy, avoid the allergen and use antihistamines or other prescribed medications. For anaphylaxis:
		1. Call emergency services immediately.
		2. Use an epinephrine auto-injector (EpiPen) if available, injecting into the mid-outer thigh.
		3. If they are unconscious and breathing stops begin CPR immediately and continue until medical help arrives.

**Diabetes**

1. **What is diabetes?**
	* Diabetes is a chronic condition characterized by elevated levels of glucose (sugar) in the blood due to the body's inability to produce enough insulin or effectively use the insulin it produces. There are three main types: Type 1 diabetes, Type 2 diabetes, and gestational diabetes.
2. **What are the signs and symptoms of hypoglycemia? Of hyperglycemia?**
	* Signs and symptoms of:
		1. **Hypoglycemia** (low blood sugar) include shaking, sweating, hunger, dizziness, palpitations, confusion, irritability, or becoming unconscious.
		2. **Hyperglycemia** (high blood sugar) include frequent urination, increased thirst, dry mouth, blurred vision, fatigue, and nausea.
3. **How do you treat hypoglycemia?**
	* To treat **hypoglycemia**:
		1. Give the person 15 grams of fast-acting carbohydrates, such as glucose tablets, juice, regular (not diet) soda, or candy.
		2. Recheck their blood sugar; if it remains low, repeat the treatment.
		3. Once blood sugar is stabilized, if it will be a while before their next meal, they should also have a snack that includes protein and complex carbohydrates.
4. **How do you treat hyperglycemia?**
	* To treat **hyperglycemia**:
		1. The person should take prescribed medication as directed.
		2. Increase fluid intake to prevent dehydration.
		3. Monitor blood sugar levels closely.
		4. Seek medical care if levels cannot be lowered or if symptoms persist, as it may require adjustments in medication, diet, or exercise.

**Burns**

1. **How do you treat burns?**
	* To treat **burns**:
		1. Cool the burn under running water for at least 15 minutes.
		2. Remove any jewelry or clothing around the burn if possible before it swells.
		3. Cover the burn with a sterile, non-fluffy dressing or cloth.
		4. Avoid applying creams, ointments, or greasy substances for now.
		5. Seek medical help for severe burns, electrical burns, chemical burns, or if the burn covers a large area.
2. **What is a first-degree burn? Second-degree burn? Third-degree burn?**
	* **Burn Degrees**:
		1. **First-degree burn**: Affects only the outer layer of skin, causing redness, swelling, and pain.
		2. **Second-degree burn**: Affects both the outer and underlying layer of skin, causing redness, pain, swelling, and blisters.
		3. **Third-degree burn**: Affects the deep layers of skin and possibly tissues underneath, causing white or charred skin. Pain may be absent due to nerve damage.
3. **What are some rules to measure burns (Rule of …)?**
	* **Rules to Measure Burns**: The "Rule of Nines" is commonly used to estimate the total body surface area (TBSA) affected by burns. It divides the body into sections, each accounting for approximately 9% (or a multiple thereof) of the body surface, to help guide treatment decisions. The “Rule of Palm” states the palm is about 1% of body surface.
4. **What do you do for chemical burns to the eye?**
	* For **chemical burns to the eye**:
		1. Rinse the eye with clean water or saline solution for at least 15 minutes, lifting the upper and lower eyelids occasionally.
		2. Avoid rubbing the eye.
		3. Seek medical attention immediately after rinsing.

**Wound Care**

1. **What do we do when a wound bleeds through the first bandage?**
	* If a wound bleeds through the first bandage, do not remove it. Instead, add more layers of bandage on top and continue to apply pressure.
2. **What do we do when direct pressure is not enough to stop the EXTERNAL bleeding?**
	* If direct pressure is not enough to stop the external bleeding:
		1. Ensure you are applying pressure directly and firmly over the wound.
		2. If the wound is on a limb, elevate it above heart level if possible.
		3. If bleeding is severe and not controlled by these measures, a tourniquet may be necessary.
3. **What are the signs and symptoms of internal bleeding?**
	* Signs and symptoms of **internal bleeding** include:
		1. Pain and swelling in the affected area.
		2. Dizziness or fainting.
		3. Pale, clammy skin.
		4. Nausea or vomiting.
		5. Blood in urine or stool.
		6. Tight, swollen abdomen.
4. **What do we do when the person has life threatening INTERNAL bleeding?**
	* For life-threatening **internal bleeding**:
		1. Call emergency services immediately.
		2. Keep the person still and comfortable.
		3. Do not give them anything to eat or drink.
		4. Monitor their breathing and consciousness.
		5. Provide reassurance until help arrives.
5. **When do you apply a tourniquet?**
	* Apply a tourniquet when:
		1. There is severe bleeding from a limb that cannot be controlled with direct pressure.
		2. The situation is life-threatening, and medical help is delayed.
6. **How do you apply a makeshift tourniquet?**
	* To apply a makeshift tourniquet:
		1. Use a band or cloth at least 1 inch wide to avoid damaging the limb.
		2. Tie the material about 2 inches above the wound, not directly over it or on a joint.
		3. Use a stick or similar object to twist the tourniquet, tightening it until the bleeding stops.
		4. Secure the twisting object in place and note the time of application to inform medical personnel.
		5. Never loosen or remove a tourniquet once applied. Leave it for professionals to manage upon their arrival.

**Impaled Objects**

1. **What is an impaled object?**
	* An impaled object is an object that has penetrated and become stuck in the body. This could be anything from a piece of glass to a metal rod, and it can occur in any part of the body.
2. **How do you treat an impaled object?**
	* To treat an impaled object:
		1. Do not remove the object, as it may be acting as a plug to stop internal bleeding.
		2. Keep the victim calm and still to prevent further injury.
		3. Stabilize the object with bandages or clean cloths without applying pressure directly to the impalement site.
		4. Control any external bleeding around the object by applying pressure to the surrounding area, not on the impaled object.
		5. Cover the object and wound with a clean dressing if possible.
		6. Seek professional medical help immediately.
3. **What do you do for a impaled object in one eye?**
	* For an impaled object in one eye:
		1. Do not attempt to remove the object.
		2. Cover both eyes to prevent movement of the injured eye, which could cause further damage.
		3. Seek immediate medical attention.

**Poisons**

1. **What do you do when someone has swallowed a poison?**
	* When someone has swallowed a poison:
		1. Try to remain calm and reassure the person.
		2. Call your local poison control center or emergency services immediately for specific advice.
		3. Have the person spit out any remaining substance in their mouth.
		4. Do not induce vomiting unless instructed by a professional.
		5. Do as poison control or emergency services say.
		6. Collect any container or label of the substance swallowed to provide information to the medical personnel.
2. **What are some good questions to ask someone who has swallowed a poison?**
	* Good questions to ask someone who has swallowed a poison include:
		1. What substance did you swallow?
		2. How much did you swallow?
		3. When did you swallow it?
		4. How are you feeling now?
		5. Do you have any allergies?
		6. Are you on any medication?
3. **Should you always induce vomiting for poisons?**
	* You should not always induce vomiting for poisons. In many cases, inducing vomiting can cause more harm, especially if the substance is caustic or can cause injury on the way back up. Always seek advice from a poison control center or medical professional before taking action.
4. **What should you do regarding inhaled poison?**
	* For inhaled poison:
		1. Move the person to fresh air immediately, avoiding exposure to yourself.
		2. Open doors and windows if it's safe to do so.
		3. Monitor the person's breathing and consciousness.
		4. Call for emergency help.
		5. If the person stops breathing, begin CPR if you are trained to do so.
5. **What should you do for absorbed poisons?**
	* For absorbed poisons (substances that have come into contact with the skin):
		1. Remove any contaminated clothing carefully.
		2. Rinse the skin thoroughly with lukewarm, running water for at least 15 minutes.
		3. Avoid scrubbing the skin, which can cause further irritation.
		4. After rinsing, seek medical advice for further treatment.
6. **What should you do for injected poisons?**
	* For injected poisons (e.g., from a bite, sting, or needle):
		1. Do not attempt to suck out the poison.
		2. Keep the affected area still and lower than the heart if possible to slow the spread of the poison.
		3. Wash the area with soap and water.
		4. Apply a cold pack to reduce swelling, but avoid placing ice directly on the skin.
		5. Seek medical attention immediately, especially if symptoms of a severe reaction occur.

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