First Aid Merit Badge

Requirement 1

Satisfy your counselor that you have current knowledge of all first-aid requirements for Tenderfoot, Second Class, and First Class ranks.

Tenderfoot

12a. Demonstrate how to care for someone who is choking.

If the person can cough or make sounds, let him or her cough to try to get the object out. If you are worried about the person’s breathing, call 911. If the person can’t breathe, cough, or make sounds, then:

- Stand or kneel behind the person and wrap your arms around his or her waist. If the person is standing, place one of your legs between his or her legs so you can support the person if he or she faints.
- Make a fist with one hand. Place the thumb side of your fist against the person's belly, just above the belly button but well below the breastbone, as pictured.

- Grasp your fist with the other hand. Give a quick upward thrust into the belly, as pictured on the next page. This may cause the object to pop out. You may need to use more force for a large person and less for a child or small adult.
• Repeat thrusts until the object pops out or the person faints.

12b. **Show first aid for the following:**

| Simple Cuts and Scrapes | • Apply direct pressure on the area to stop any bleeding.  
| • Clean the area with warm water and gentle soap.  
| • Apply an antibiotic ointment to reduce the chance of infection.  
| • Put a sterile bandage on the affected area.  
| • Call a health care provider if the cut is deep or over a joint, if you cannot get the cut clean, if the injury is a deep puncture wound, or if the cut is from a human or animal bite. |

| Blisters on the Hand or Foot | • Wash the person's hands and the blister with soap and warm water.  
| • Swab the blister with iodine or rubbing alcohol.  
| • Sterilize a clean, sharp needle by wiping it with rubbing alcohol.  
| • Use the needle to puncture the blister. Aim for several spots near the blister's edge. Let the fluid drain, but leave the overlying skin in place.  
| • Apply an antibiotic ointment to the blister and cover with a bandage or gauze pad.  
| • Cut away all the dead skin after several days, using tweezers and scissors sterilized with rubbing alcohol. Apply more ointment and a bandage. |
| Minor (heat/thermal) burns or scalds (superficial or first-degree) | • First, stop the burning to prevent a more severe burn.  
• Heat Burns: Smother any flames with a blanket or water. If your clothing catches fire, **stop, drop, and roll** on the ground to smother the flames.  
• Cold temperature burns: Small areas can be warmed by blowing warm air on them, tucking them inside your clothing, or putting them in warm water.  
• Liquid scald burns: Run cool tap water over the burn for 10 to 20 minutes. Do not use ice.  
• Use cool cloths on burned areas.  
• Take frequent cool showers or baths. |
|---|---|
| Bites and Stings of Insects and Ticks | • Move to a safe area to avoid more stings.  
• Remove the stinger, especially if it’s stuck in the skin. This will prevent the release of more venom. Wash area with soap and water.  
• Apply a cold pack or cloth filled with ice to reduce pain and swelling.  
• Apply hydrocortisone cream, calamine lotion or a baking soda paste to the bite or sting several times a day until symptoms subside.  
• Take an antihistamine containing diphenhydramine (Benadryl, Tylenol Severe Allergy) or chlorpheniramine maleate (Chlor-Trimeton, Actifed).  
• For tick bites:  
  o Remove the tick promptly and carefully. Use tweezers to grasp the tick near its head or mouth and pull gently to remove the whole tick without crushing it.  
  o If possible, seal the tick in a jar. A doctor may want to see the tick if the person develops signs or symptoms of illness after a tick bite.  
  o Use soap and water to wash hands and the area around the tick bite after handling the tick.  
  o Call a doctor if you aren’t able to completely remove the tick. |
| Venomous Snakebites | Prevent a second bite or second victim. Snakes can continue to bite and inject venom with successive bites until they run out of venom.  
Wash the wound with large amounts of soap and water.  
Identify or be able to describe the snake, but only if it can be done without risk for a second bite or a second victim.  
Safely and rapidly transport the victim to an emergency medical facility.  
DO NOT cut and suck, use ice, use alcohol, or use a tourniquet or other constriction band. |
|---|---|
| Nosebleed | Sit up straight and tilt your head slightly forward.  
Use your thumb and forefinger to firmly pinch the soft part of your nose shut. Using a medicated nasal spray such as Afrin before applying pressure may help stop a nosebleed.  
Keep pinching for a full 10 minutes to stop the flow of blood, using a watch or clock. If it is still bleeding, pinch for 10 more minutes.  
Apply an ice pack to your nose and cheeks. Cold will constrict the blood vessels and help stop the bleeding.  
Put a light coating of moisturizing ointment such as Vaseline or an antiseptic nasal cream inside your nose.  
Do not blow your nose or put anything else inside your nose for at least 12 hours after the bleeding has stopped. |
| Frostbite                  | • Call 911 if a part of the person’s body or skin is turning white and hard, or black; or the person has lack of feeling in the area; or the person shows signs of hypothermia.  
• Get the person to a hospital.  
• Until the person can be seen by a doctor, get them to a warm place. Do not rewarm the skin until you can keep it warm. Warming and then exposing the frostbitten area to cold air can cause worse damage.  
• Gently warm the area in warm water or with wet heat until the skin appears red and warm.  
• If no water is nearby, breathe on the area through cupped hands and hold it next to your body.  
• Do not use direct heat from heating pads, a radiator, or fire.  
• Do not rub or massage the skin, or break blisters.  
• Bandage the area with loose, dry, sterile dressings.  
• Put gauze or clean cotton balls between fingers or toes to keep them separated. |
| Sunburn                   | • Use cold cloths on sunburned areas.  
• Take frequent cool showers or baths.  
• Apply soothing lotions that contain aloe vera.  
• Topical steroids such as hydrocortisone cream may help with pain and swelling.  
• If sunburn causes a mild fever or headache, lay down in a cool, quiet room to relieve the headache.  
• Skin will peel after a sunburn. Lotion may help relieve the itching associated with peeling skin. |
## Second Class

### 6a Show what to do for “hurry” cases of:

<table>
<thead>
<tr>
<th>Stopped Breathing</th>
<th>Serious Bleeding</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you see no rise and fall chest movement or the face becomes bluish-gray, perform mouth-to-mouth ventilation.</td>
<td>Lay the victim down and if possible raise the injured area to reduce the flow of blood from the wound.</td>
</tr>
<tr>
<td>• Open and clear the airway by carefully removing any objects from the mouth with your finger.</td>
<td>• Press hard on the wound with a clean pad. IF the wound is gaping, hold its edges together firmly.</td>
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<tr>
<td>• Place two fingers under the point of the chin and place your other hand on the victim’s forehead. At the same time, lift the chin and gently tilt the head back.</td>
<td>• If there is a foreign body in the wound (e.g. glass), apply pressure alongside.</td>
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<tr>
<td>• Close the victim’s nostrils, then take a deep breath and seal your mouth around his/her mouth. Blow into the mouth until his/her chest rises.</td>
<td>• Bind a firm pad over the whole wound so that pressure is maintained.</td>
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<tr>
<td>• Remove your mouth and allow the chest to fall. Give 10 breaths and then check the person’s pulse. If the pulse is not present, CPR may be needed.</td>
<td>• If blood soaks through the bandage, do not remove it. Continue to apply pressure to the wound for 7-10 minutes.</td>
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<tr>
<td>• Continue the process at the rate of 10 breaths per minute.</td>
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</tbody>
</table>
### Internal Poisoning

Call 911 if the person has taken poison and:

- Is not breathing properly or is having trouble breathing
- Is unconscious or not alert
- Has collapsed
- Is having seizures
- Poison has splashed on his/her face or eyes
- Is acting unusually

Call the Poison Control Center at 800-222-1222 if you think someone has taken poison, is alert, and:

- Swallowed too much medicine or the wrong kind
- Has pieces of pills on clothes or lips
- Has a strange smell
- Is vomiting
- Is drooling
- Is alert but acting unusually
- Is confused
- Has no energy

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**6b** Prepare a personal first aid kit to take with you on a hike.

A first aid kit might contain:

<table>
<thead>
<tr>
<th>adhesive tape</th>
<th>adhesive bandages</th>
<th>small flashlight</th>
<th>personal medications</th>
</tr>
</thead>
<tbody>
<tr>
<td>4x4 gauze pads</td>
<td>oral antihistamine</td>
<td>ibuprofen (Advil)</td>
<td>plastic resealable</td>
</tr>
<tr>
<td>antacid</td>
<td>(Benadryl or Claritin)</td>
<td>insect repellent</td>
<td>bags</td>
</tr>
<tr>
<td>antidiarrheal</td>
<td>First Aid book</td>
<td>knife (multitool)</td>
<td>safety pins</td>
</tr>
<tr>
<td>(Imodium)</td>
<td>lighter (to sterilize instruments)</td>
<td>moleskin (for blisters)</td>
<td>scissors</td>
</tr>
<tr>
<td>antihistamine cream</td>
<td>cough medication</td>
<td>nasal decongestant</td>
<td>sunscreen</td>
</tr>
<tr>
<td>antiseptic (liquid soap)</td>
<td>dental kit</td>
<td>non-adhesive wound pads (Telfa)</td>
<td>thermometer</td>
</tr>
<tr>
<td>aspirin</td>
<td>exam gloves</td>
<td>polysporin antibiotic</td>
<td>tweezers</td>
</tr>
</tbody>
</table>

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### Demonstrate first aid for the following

| Object in the Eye | • Don’t let the victim rub the eye, it could damage the cornea (outer surface).
| | • Wash your hands before touching the victim’s eye.
| | • If the object is over the pupil (dark center) or the iris (colored part) try to gently flush it out with water. If the object doesn’t come out, put on dark glasses and call a doctor.
| | • If the object is over the sclera (white part) or inside the lower lid, wet a cotton swab (Q-tip) and touch the end to the object. The object should cling to it.
| | • An object under the upper eyelid can be removed by lifting the upper lid away and flushing gently with water from an eyedropper.
| | • Never use tweezers, toothpicks, or other hard items to remove any object.

| Bite of a Suspected Rabid Animal | • Immediately clean the wound or area of contact thoroughly with soap and water.
| | • If the animal is a dog, cat, or other domestic animal, try to locate and contact the owner.
| | • If the animal is wild, do not attempt to capture or kill it. Identify the species and try to notice whether its behavior is unusual.
| | • If the animal is dead, keep the head but do not touch the brain, which may transmit the virus.
| | • Contact your local health department.
### Puncture Wounds From a Splinter, Nail, and Fishhook

**Splinter:**
- Wash your hands well with soap and water.
- Grasp the end of the splinter with clean tweezers and gently pull it out.
- If the splinter is embedded in the skin, clean a needle with alcohol and make a small hole in the skin over the end of the splinter.
- Lift the splinter with the tip of the needle until it can be grasped with the tweezers and pulled out.
- Do not we or soak the splinter because it will be harder to remove in one piece.
- After the splinter has been removed, clean the wound and watch for any signs of infection.

**Nail:**
- If the wound will not stop bleeding after 5 minutes of direct pressure, get emergency medical help.
- If it has been more than 10 years since the person’s last tetanus shot, or if it has been more than 5 years and the wound has been contaminated with dirt, a tetanus shot is needed.
- Clean the wound area with soap and water.
- Cover with a sterile bandage.

**Fishhook:**
- If only the tip, not the barb, is in the skin, gently pull out the hook.
- If the barb is stuck but you can see it, cut off the barb with pliers and pull out the ends.
- If the barb is stuck and you can’t see it, push the hook through the wound until the barb emerges, then cut and remove the barb and shaft.
- Apply steady pressure with sterile gauze or clean cloth until bleeding stops.
- Rinse the wound under clean water for several minutes. Then wash the area with mild soap and water, and rinse again.
- Cover with sterile bandage.
Serious Burns (second degree)

- Rinse burned skin with cool water until the pain stops, usually within 15-30 minutes. The cool water lowers the skin temperature and stops the burn from becoming more serious. Do Not use ice or ice water, which can cause tissue damage.
- Remove any jewelry or clothing which could become too tight if the skin swells.
- Clean the burn area with mild soap and water. Some of the burned skin may come off with washing. Pat the area dry with a clean cloth or gauze.
- Apply an antibiotic ointment such as Bacitracin Polysporin. Do Not apply sprays or butter as this traps heat inside the burn.
- If the burned skin or blisters have not broken open, a bandage may not be needed. If the area is likely to become dirty or irritated by clothing, apply a bandage.
- Wrap the burn loosely to avoid putting pressure on the burned skin.
- If the burn is on an arm or leg, keep the limb raised for the first 24 to 48 hours to decrease swelling.
| Heat Exhaustion | Call 911 if:  
| | • The person has a very high, weak pulse rate and rapid shallow breathing, especially if combined with a high or low blood pressure.  
| | • The person is unconscious, disoriented, or has a high body temperature.  
| | Lower body temperature:  
| | • Get the person out of the heat and into a cool environment.  
| | • If air conditioning is not available, fan the person.  
| | • Spray the person with a garden hose, get the person into a cool shower, apply cool compresses, or give the person a sponge bath.  
| | Rehydrate  
| | • Give cool, nonalcoholic beverages as long as the person is alert.  
| | Rest  
| | • Have the person avoid physical activity for the rest of the day.  
| | • Give acetaminophen in case of a headache.  
| | • See a doctor if the person is nauseated or vomiting, if symptoms get worse, if symptoms last more than an hour.  
| Shock | Symptoms of shock include pale, cool, clammy skin; rapid pulse; sweating; nervousness or agitation; disorientation; thirst; rapid breathing or gasping for air; nausea or vomiting; blue-tinged skin; weakened pulse.  
| | • Call 911.  
| | • Look for any injuries such as bleeding which you may be able to treat.  
| | • Loosen any constrictive clothing around the neck, waist, and chest.  
| | • Lay the person down on his back and elevate the legs about a foot.  
| | • Maintain normal body temperature.  
<p>| | • Keep the person comfortable until medical help arrives. |</p>
<table>
<thead>
<tr>
<th>Condition</th>
<th>Description</th>
</tr>
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</table>
| Heatstroke  | - Call 911.  
- Get the person out of the heat and into a cool environment.  
- If air conditioning is not available, fan the person.  
- Spray the person with a garden hose, get the person into a cool shower, apply cool compresses, or give the person a sponge bath.  
- Apply ice packs to the armpits, groin, neck, and back.  
- Immerse the person in a tub of cool or cold water. |
| Dehydration | - Call 911 if the person has extreme thirst; dry skin, mouth, and mucous membranes; little or no urination for 12 hours or more; increased heart rate and breathing, fatigue, dizziness or confusion.  
- Get the person to drink 2 quarts of water, juice, or sports drinks in 2 to 4 hours, unless the person is elderly, in which case the rehydration should be done more slowly.  
- If the person is vomiting, try ice chips, popsicles, and small sips of fluid. |
| Hypothermia | - Call 911.  
- Get the person indoors.  
- Remove wet clothing and dry the person off, if needed.  
- Warm the trunk first, not the hands and feet, by wrapping him/her in blankets or with dry clothing.  
- Use hot water bottles or chemical hot packs wrapped in cloth.  
- Give warm fluids but avoid caffeine or alcohol. |
| Hyperventilation             | • Call 911 if the person has chest pain or difficulty breathing.  
|                             | • Calm the person to reduce anxiety.  
|                             | • Have the person breathe through pursed lips as if blowing out a candle.  
|                             | • Cover the mouth and one nostril and breathe only through the other nostril.  
|                             | • Breathe slowly, taking one breath every 5 seconds.  
|                             | • Take deep, slow breaths from the abdomen.  |
8b Demonstrate bandages for:

<table>
<thead>
<tr>
<th>A Sprained Ankle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assemble the necessary equipment: a roll of 1- to 2-inch-wide athletic tape and a pair of scissors.</td>
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<tr>
<td>Wrap one piece of athletic tape under the heel of the foot and bring both ends up the ankle to either side of the leg. The tape should form a “U,” like the stirrup on a horse’s saddle.</td>
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<tr>
<td>Affix the tape to the skin just behind the knobby bone that juts out on either side of the ankle, pressing the tape firmly along the little groove behind the bone.</td>
</tr>
<tr>
<td>Wrap a second piece of tape around the base of the heel, bringing the ends of the tape along either side of the foot, heading for the toes. It should form a 90-degree angle with the first piece of tape.</td>
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<tr>
<td>Wrap a third piece of tape under the heel and up either side of the foot and ankle in the same manner as you wrapped the first piece of tape. Position the tape so that it runs adjacent to the first piece of tape - it should fall right over the knobby anklebone that juts out.</td>
</tr>
<tr>
<td>Wrap a fourth piece of tape around the heel, running just above and adjacent to the second piece of tape, with the ends again heading for the toes along both sides of the foot. You now have the basic structure for the “basket weave” - overlapping pieces of tape that wrap around the heel, extend to the toe, wrap under the heel and climb up to the ankle.</td>
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<tr>
<td>Apply about eight more pieces of tape in this manner - four adjacent strips of tape that wrap around the heel pointing toward the toes, and four adjacent strips that wrap under the heel and head up the ankle. Alternating between strips that run along the foot and strips that run up the ankle will give you a weave that limits mobility and supports the entire ankle.</td>
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</table>
Injuries on the Head

A triangular bandage can be made by folding a large handkerchief diagonally. The longest side of the triangular bandage is called the base; the corner directly opposite the middle of the base is called the point; and the other two corners are called ends.

The triangular bandage is useful because it can be folded in a variety of ways to fit almost any part of the body. Padding may be added to areas that may become uncomfortable. This bandage is used to retain compresses on the forehead or scalp. Fold back the base about 2 inches to make a hem. Place the middle of the base on the forehead, just above the eyebrows, with the hem on the outside. Let the point fall over the head and down over the back of the head. Bring the ends of the triangle around the back of the head above the ears, cross over the point, carry them around the forehead, and tie.

The Upper Arm and The Collarbone

1. Fold a large square piece of cloth diagonally into a triangle.
2. Place the person’s elbow at the top point of the triangle, and the wrist midway along the triangle’s bottom edge. Bring the two free points up around the front and back of the same (or opposite) shoulder.
3. Adjust the sling so the arm rests comfortably, with the hand higher than the elbow. The elbow should be bent at a right angle.
4. Tie the sling together at the side of the neck and pad the knot for comfort.
5. If the sling was placed correctly, the person’s arm should rest comfortably against his or her chest with the fingertips exposed.

http://www.wonderhowto.com/how-to-make-sling-150872/
8c  Show how to transport by yourself, and with one other person: a person from a smoke-filled room; a person with a sprained ankle for at least 25 yards.


8d  Tell the five most common signs of a heart attack.

1. Pain in the center of the chest
2. Nausea
3. Strange sweating
4. Feeling of weakness
5. Shortness of breath

Explain the steps (procedures) in cardiopulmonary resuscitation (CPR):