



# First Aid Protocols



## Monkey Business Camp

**ALWAYS COMMUNICATE WITH SUPERVISORS RE: MORE COMPLICATED SITUATIONS**

**SITE DIRECTOR COMMUNICATES WITH PARENTS ABOUT ANY MINOR DETAILS RELATED TO 1<sup>st</sup> AID AT THE END OF THE DAY AT PICK UP OR ASKS STAFF WHO ARE CHECKING OUT TO DO SO.**

**If needed, call emergency # on 1<sup>st</sup> page of this binder. Phone # varies based on camp location.**

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**MINOR CUT/SCRAPE/BUMP**

EVERY TIME – **Counselor or YL** comfort camper (“Have you had a cut/scrape before? Had a scab? It’s amazing how your skin heals itself.”)

1. If bump only, apply ice sponges or pack from cooler for anywhere from 5-20 min.
2. If scrape or very minor cut, try to wash with water and soap. Not all kids are into this, just try. Cold water will help sometimes.
3. **Staff** Check OTC sheet and if okay for camper, **Staff/YL** apply Neosporin and band-aid.
4. **Write note on Daily Log. Lead Staff tell parent at pick-up**, or relay to staff who will check out.

IF camper is in a lot of pain over time, **Lead Staff Check OTC sheet** and if okay for camper, give appropriate dosage of Ibuprofen, read label. **Write note about Ibuprofen on Daily Log, tell parents** at pick-up.

**CUT/DEEP WOUND/PUNCTURE WOUND**

EVERY TIME – **Lead Staff** comfort camper (“I can help you. We’ll do it together. Let’s help your body make a scab to help new skin grow here.”)

1. Apply pressure with a new, sterile gauze pad for 15 minutes (use timer, as can feel like long time). If blood comes through the first pad, *apply additional on top of the first, so you don’t accidentally pull off any scab that may be forming to stop bleeding.*

**DO NOT** administer ibuprofen, as that can increase bleeding.

**Lead Staff, depending on severity, call parents and/or emergency number.** Describe wound, what caused it, what you have done since, what happening now. If puncture wound, for example, you would call parents and explain and see if they can come take child to doctor to evaluate.

**Call EMERGENCY NUMBERS on 1<sup>st</sup> page of Binder 911 immediately:** If wound is spurting blood, wound is to chest, abdomen or neck, there is severe pain, fast breathing or trouble breathing, vomiting, dizziness, or unconsciousness, or wound is to the eye or in the throat. If wound caused by object that is still in body, leave the object in place and keep camper calm. Then call parent or emergency contacts and MBC ops/admin team.

**FEVER**

Report in end day e-mail

EVERY TIME – **Counselor or YL** comfort camper

1. Drink some water & sit down for a bit (YL read a book) & Take temperature

IF camper has a temperature over 100°F (100.4 and up is considered a fever) - **Lead Staff CALL PARENT**

1. Ask parent to come pick up camper as soon as possible to help child get comfy at home
2. Have camper rest away from others, but nearby with wet paper towel or reading to camper if helpful
3. Remind parent, children should be fever-free without meds for 24 hours before returning to camp

IF camper is in a lot of pain/discomfort over time, **Lead Staff Check OTC sheet** and if okay for camper, give appropriate dosage of Ibuprofen, read label. **Write note on Daily Log, tell parents.**

**Call EMERGENCY NUMBERS on 1<sup>st</sup> page of Binder 911 immediately:** IF camper has trouble breathing, is incoherent, losing consciousness, having seizure. Then call parent or emergency contacts & MBC ops/admin team.

**SPLINTER**

EVERY TIME – **Counselor or YL** comfort camper (Have you had a splinter before? It often feels better after it's taken out. It can feel weird coming out, but it's quick. Your body will help push it out, too. It doesn't belong in.)

1. If camper will let you, take out splinter with tweezers quickly and wash skin where splinter came out
2. If not, just wash area and cover with a band-aid for a parent to take out later, be sure to tell parent at pickup
3. **Staff Check OTC sheet** and if okay for camper, apply Neosporin and put on band-aid
4. **Write note on Daily Log** and Lead Staff be sure to **tell parent at pick-up.**

IF camper is in a lot of pain over time, **Lead Staff Check OTC sheet** and if okay for camper, give appropriate dosage of Ibuprofen, read label. Write note about Ibuprofen on Daily Log, **tell parents at pick up.**

**POISON OAK EXPOSURE (for programs that use areas like Tilden Park, for example)**

EVERY TIME - Counselor or YL comfort camper

1. **Staff Check OTC sheet** and if okay for camper, use Technu and wash well under cold running water
2. **Write note on Daily Log** and Lead Staff be sure to **tell parent at pick-up**

IF camper has swelling or is in pain, **Lead Staff CALL PARENT**

Ask parent about giving camper Benadryl (allergic reaction) (use only w/ parent permission)

IF camper has trouble breathing, **Lead Staff**, call ambulance. Then call parent or emergency contacts & MBC ops/admin team.

**BEE STING/WASP STING OR BITE**

Report in end day e-mail

EVERY TIME – Comfort camper (“Have you been stung/bitten before? Hurts at first, but will feel better. Where you’ve been stung, if they’re up for conversation.”)

1. Move away from where bees/wasps are, they attract others when they sting or bite.
2. Ask someone to look at SNA list while you are removing stinger, to see if had former allergic reaction to bee/wasp stings.
3. Remove Stinger w/ finger/credit card/tweezers asap (with wasp bite there won’t be a stinger)
4. Use ice on sting/bite area, always letting camper know why doing and why important.
5. Mix water w/ baking soda in baggie and apply to sting/bite area.
6. **Write note on Daily Log** and S.D. be sure to **tell parent at pick-up**. Add to end day e-mail.

IF camper is in a lot of pain over time, **Lead Staff Check OTC sheet** and if okay for camper, give appropriate dosage of Ibuprofen, read label. Write note about Ibuprofen on Sign in sheet, tell parents.

IF camper is miserable or swelling/rash, **Lead Staff CALL PARENT**

Ask parent about giving Benadryl (allergic reaction) (use only w/ parent permission)

**IMPORTANCE TO TRACK FOR ALLERGIC REACTION**-usually happens within minutes or within an hour.

*IF camper has any two of the signs of anaphylaxis (severe allergic reaction) listed below, **Lead Staff** use EpiPen if parents have provided and immediately **call ambulance if you do**. Then call parent or emergency contacts & MBC ops/admin team.*

Signs of Anaphylaxis (severe allergic reaction):

- Skin reactions, like hives
- Difficulty breathing
- Swelling throat and tongue
- Weak, rapid pulse
- Nausea, Vomiting, Diarrhea
- Dizziness/Fainting
- Loss of Consciousness

## NOSEBLEED

Report in end day e-mail

EVERY TIME – Comfort camper (“Good your blood is red. That’s healthy. Let’s sit together and we’ll get this bleeding to stop, I know some ways to help.”)

- Sit camper upright (maybe on your lap) and tilt their head slightly forward.
- Pinch their nose on the soft part for 5-10 minutes. Remind them to breathe through their mouth. Repeat until bleeding stops.



- If it ends before 30 minutes, write note on Daily Log and **Lead Staff** be sure to **tell parent at pick-up**.

IF bleeding last longer than 30 minutes or camper was injured in the face **Lead Staff call parent** to see if they can come, may need medical help or be a broken nose.

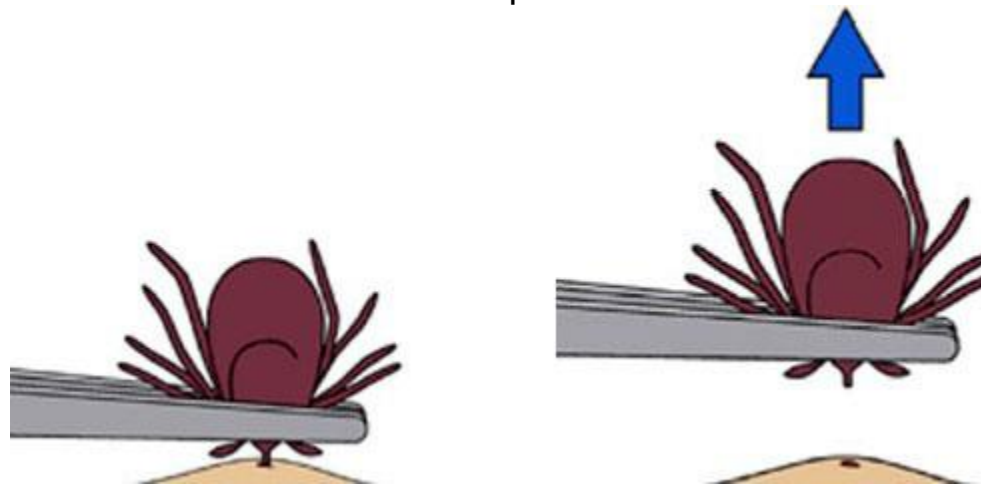
**DO NOT** administer ibuprofen, as that can increase bleeding.

## TICKS

Report in end day e-mail

EVERY TIME – Comfort camper (“Ticks are regular part of environment. Let’s look to see what we can do to remove that. We use tweezers, to encourage it to come out.”)

1. Take a photo of it, so can share with parents and office to identify what kind of tick it is.
2. Use tweezers to grasp the tick firmly at its head or mouth, next to the skin.
3. Pull upward with steadily and firmly until the tick lets go of the skin.
  - *Do not twist the tick or rock it from side to side.*
  - Parts of the tick might stay in the skin, but eventually will come out on their own.
4. Wash your hands and the site of the bite with soap and water.



5. Once removed, never crush a tick with your fingers. Keep it to give to parents, ideally, if possible.
  - Tape it firmly to a piece of paper and/or place it in a sealed bag/container.

Tick Prevention: As a general practice, it is a good idea to do a tick check daily after camp, and if you have a dryer, you can throw laundry in for 15 minutes. Also, before camp, an application of essential oils or apple cider vinegar solution to skin or a spray to clothing can be helpful. Find out more details online.

**BURNS (hot coffee/tea, hot bbq, sun)**

EVERY TIME – **Lead Staff** comfort camper and determine severity of burn

**First-Degree Burns**, the mildest of the three, are limited to the top layer of skin:

- *Signs and symptoms:* These burns produce redness, pain, and minor swelling. The skin is dry without blisters.
  1. Run cool (**not** cold) water over the burned area (if water isn't available, any cold, drinkable fluid can be used) **or** hold a clean, cold compress on the burn for approximately 3-5 minutes (**do not use ice, as it may cause more destruction to the injured skin**).
  2. **Do not** apply butter, grease, powder, or any other remedies to the burn, as these can make the burn deeper and increase the risk of infection.

IF camper is in a lot of pain/discomfort over a period of time, **Lead Staff** call Parents to come pick up child and **Check OTC sheet** and if okay for camper, give appropriate dosage of Ibuprofen, read label. Write note about Ibuprofen on Sign in sheet, tell parents at pick-up.

IF **Lead Staff** thinks the burn is a 2<sup>nd</sup> or 3<sup>rd</sup> degree burn, **call emergency number listed on front page of this binder**. Then call parent or emergency contacts.

**Second-Degree Burns** are more serious and involve the skin layers beneath the top layer:

- *Signs and symptoms:* These burns produce blisters, severe pain, and redness. The blisters sometimes break open and the area is wet looking with a bright pink to cherry red color.

**Third-Degree Burns** are the most serious type of burn and involve all the layers of the skin and underlying tissue:

- *Signs and symptoms:* The surface appears dry and can look waxy white, leathery, brown, or charred. There may be little or no pain or the area may feel numb at first because of nerve damage.

**Seek Medical Help Immediately When:**

- You think camper has a second- or third-degree burn.
- The burned area is large (2-3 inches in diameter), even if it seems like a minor burn. For **any** burn that appears to cover more than 10% of the body, call for medical assistance. And don't use wet compresses or ice because they can cause the child's body temperature to drop. Cover the area with a clean, soft cloth or towel.
- The burn comes from a fire, an electrical wire or socket, or chemicals.
- The burn is on the face, scalp, hands, joint surfaces, or genitals, Or looks infected, red streaks, pus.

**TROUBLE BREATHING**

EVERY TIME – **Lead Staff call emergency number listed on 1<sup>st</sup> page of this binder.** Do not wait.

**Lead Staff** check to see if camper has medication to help with breathing, for example, an inhaler.

If so, administer their medication immediately while waiting for help.

1. Then call parent or other emergency contacts until you can speak to someone.
2. Do not give food or drink to camper with breathing trouble.
3. Do not have camper lie down with head on pillow/raised surface, can block airway.

**DENTAL EMERGENCY**

EVERY TIME – **Lead Staff** comfort camper (“I can help you. We’ll do it together. This happens.”)

1. Tooth Knocked Out – *Adult Teeth Only, not baby teeth*

Don’t touch the nerve.

If debris, run under water for only 10 seconds, no longer.

Putting tooth in child’s own saliva or milk, if they happen to have in their lunch or if someone else has unopened bottle they can share. Use clean Ziploc.

2. **Lead Staff CALL PARENT immediately.** *If you can get to the dentist in an hour, a tooth has a much better chance of being re-implanted.* Call emergency contacts if parent not available so someone can take the camper to the dentist ASAP.

IF camper is in a lot of pain, **Lead Staff Check OTC sheet** and if okay for camper, give appropriate dosage of Ibuprofen, read label. Write note about Ibuprofen on Sign in sheet, tell parents.

1. Cracked Tooth – rinse mouth, keep swelling down with ice on cheek, **Lead Staff CALL PARENT immediately.** Call emergency contacts if parent not available so someone can take the camper to the dentist ASAP.

IF camper is in a lot of pain, check in with parents/emergency contacts if they okay ibuprofen (do not only rely on the OTC list). *Ibuprofen can exacerbate bleeding, so make extra call in this case.* If parents or emergency contacts okay, read label and administer.

**SEIZURE**

EVERY TIME – **Lead Staff** help keep camper safe, keep voice calm, don't hold or grab. Direct other staff to 1 – look in SNA for helpful information, and 2 - keep other campers out of the area. (To other campers – keep calm – “We know how to help them. They need a little time. It's ok let's give them some space.”)

**Learn about Seizure First Aid**



**Lead Staff CALL PARENT** to describe seizure, see if they can give you information and come soon. If it's the first time their child has had a seizure they may want you to call for an ambulance.

Seizures do not usually require emergency medical attention. If one of the bullets below are true, call for an ambulance. You may have already called a parent, if not, do that now after calling for an ambulance.

- The camper has difficulty breathing or waking after the seizure.
- The seizure lasts longer than 5 minutes.
- The camper has another seizure soon after the first one.
- The camper is hurt during the seizure.
- The seizure happens in water.