

HOW TO PREVENT & HANDLE CHILDHOOD EMERGENCIES



A handbook for parents and people who care for children





In your city or town, the phone number to call
in an emergency is:

In your city or town, the phone number to call to reach the
nearest Poison Control Center is:

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To Jacob, who reminds me daily of the importance of what we are trying to do. To Cindi for giving us Jacob, and to Rocky for being his big brother. — RL



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About This Handbook

Are you a parent, big brother, or big sister? Do you have grandchildren? Do you provide child care? Do you work with children? Do children visit your home? Do children live in your building or next door? If you answered “yes” to any of these questions, this handbook is for **you!** Why?

We all want children to be healthy. Too often, though, children become very sick or sustain injuries. **You** can take some basic steps to make the places where you live and work safer and prevent serious injuries. Would you know what to do if a child needed care right away? All of us need to **know how to call for help and what to do until help arrives.**

This handbook can prepare you to help a child if an emergency does occur. It provides information about children of all ages, from newborns to teens. By reading it, you will learn:

In Section 1: How to Get Help for a Sick or Injured Child (page 8):

How to decide if an ill or injured child needs help right away; how to get help.

In Section 2: What to Do Until Help Arrives (page 11):

What will happen, what to do, and what not to do while you are waiting for emergency help.

In Section 3: How to Prevent Childhood Emergencies (page 16):

What to do today and every day to protect the health of children; how to support the people and places that provide emergency medical services for children, or **EMS-C.**

In Section 4: Additional Information & Safety Tips (page 29):

At the back of this handbook, you will find tabs that tell you more about some of the topics covered in each section; how to obtain free, low-cost items; and the names of groups that can help you keep the children you care about safe and well. The more you read, the more you will know. The more you know, the more you can do to prevent and handle childhood emergencies!

Teach your children about safety too! Let them color the pictures throughout this handbook. It will be a fun way to get your children involved.

You will also find in this handbook:

1. A folded strip of cardboard in a plastic case, called the “Broselow-Luten Emergency Tape.” In words and drawings, it shows you what to do in some kinds of health emergencies. It is small enough to keep in your wallet or purse so you will have it close by when you need it. If you prefer, you can keep it in a drawer in your home or workplace or in this handbook.
2. A place for you to write down emergency numbers. Fill it in right away and place it near your phone. If you have more than one phone, make a copy to post next to every phone in your home or workplace.

SECTION 1

HOW TO GET HELP FOR A SICK OR INJURED CHILD

This section explains what a childhood emergency is and what you should do if you have to handle one.

What is *not* a health emergency?

Sometimes a health problem needs a doctor's advice or help promptly but does not require the speed, special equipment, and training of emergency medical services (EMS) providers. These nonemergency problems may include small cuts, some fevers, diarrhea or constipation, stomachaches, earaches, minor bruises, nosebleeds, rashes, or sprains.

You can handle some of these problems yourself if you have basic first-aid skills and a first-aid kit (see the list on page 29, **Tab A**). If you are not sure about what to do for a health problem that is not an emergency, call the child's doctor.

What *is* a child health emergency?

A child health emergency is **an illness or injury that may threaten a child's life** if action is not taken right away; for instance:

- Loss of consciousness (the child cannot wake up or respond to you).
- Seizures or convulsions (bad shaking that will not stop).
- Choking on food, drink, or an object.
- Falls from high places.
- Severe burns.
- Breathing trouble.
- Eating or drinking something poisonous.
- Heavy bleeding that will not stop.
- Injuries from a car or bike crash.

It takes a trained person to know if these or other health problems are emergencies. Some day, though, you may have to decide and act quickly. Any time you think a child's life may be in danger, do not delay. If you are not sure, play it safe; call for emergency help right away!

Dial 911 or your local emergency phone number!

In some places, 911 is not the right number to call in an emergency. Check to see if 911 is the correct number to call where you live and work. If not write down the correct number now on the first page of this handbook. In most places, you can get help by dialing just three numbers — 911. You can do this from any phone with a dial tone and an outside line. In most cities and towns, you can also reach 911 from a pay phone without using a coin. By calling 911, you can get help from police, the fire department, or EMS providers.

Be sure that all adults and children in your home and all persons in your workplace know the right emergency number to call, and when to use it. Remind them that this number is only for emergencies. Calling this number when there is no emergency can delay help for someone whose life may depend on it. If you need to reach the police or fire department for other reasons, use the nonemergency phone numbers. They are listed in your local phone book.

Keep your local emergency number posted next to all phones in your home or workplace. In an emergency, each second counts. When you need help right away, you will not want to lose the time it takes to look up that number!

No matter where you live and work, someone will answer your local emergency phone number . . .

EACH DAY OF THE YEAR, 24 HOURS A DAY!

What happens when you call the emergency phone number?

The person who answers your call is trained to find out what you need and get help to you quickly. Try to stay calm. You will be asked for your name, your address, and information about the child who needs help. **Listen to the questions and provide brief, clear answers.**

There may be steps you can take while you are waiting for help. In some places, the person who answers your call is trained to explain them. In such a case, that person will stay on the phone to tell you what to do while help is on the way. Actions you might take while you wait for help with some emergencies are described in **Section 2; What to Do Until Help Arrives**, starting on page 11.

The trained **EMS** providers will arrive as soon as they can. They may provide some medical help on the spot. If needed, they will then take the child to the nearest hospital emergency room that is able to handle the problem. Let them take over the care of the child. They will tell you what will happen next and what you should do.

What should you do for poison emergencies?

With the phone help of the Poison Control Center that serves your city or town, you can handle most poison emergencies yourself. The number for this free call should be posted near all phones in your home or workplace. Look it up now in your local phone book and write it down on the first page of this handbook. To learn more about poison emergencies you can handle yourself, read **Tab B**, page 31.

In a poison emergency, **if you think a child's life is in danger, the first thing to do is to call 911** or the correct emergency number in your city or town. For most poison emergencies, though, the best thing to do is to **call the Poison Control Center right away**. Take the child and the poison with you to the phone if you can. Stay calm. Be ready to describe the poison that the child ate or drank, how much, and at what time. The person who answers the phone is trained to ask the right questions and to tell you what to do.

All of us can prevent many of these emergencies by poison-proofing the places where we live and work. Read **Section 3; How to Prevent Childhood Emergencies**, starting on page 16, to learn ways to keep all poisons away from children.

To sum up this section

- Learn what kinds of illness and injury require (or do not require) **EMS** assistance.
- Know the **EMS** phone number and Poison Control Center number to call in your city or town.
- Let the trained people who answer emergency phone numbers and provide emergency help take the lead and tell you what you should (and should not) do.

What can all of us do about childhood emergencies?

Take Steps to Prevent Them and Be Prepared



Section 2

WHAT TO DO UNTIL HELP ARRIVES

When something happens that puts a child's life in danger, getting help right way is the right thing to do first. While you wait for help to arrive, minutes tick away. In those few minutes, you could save a child's life by taking some basic steps.

Choking

One of the biggest threats to an infant or toddler is inhaling something down the windpipe. If this happens, the child is likely to cough and sputter. Let the child cough. Coughing is the best way to remove most objects. As long as the child is coughing and breathing, he or she is not in immediate danger. **If the child is not coughing or breathing**, however, you will need to take immediate action. Follow the steps outlined on the Broselow-Luten Emergency Tape that you received with this handbook.

CPR

CPR, which stands for cardiopulmonary resuscitation, is a skill that all of us should have. Some people do not learn CPR because they are afraid they may not do it the right way and may even cause more problems for a child. CPR is really very simple, though, and it is a vital skill for parents and other people who care for children.

Think of CPR as having two parts. The first is rescue breathing: you breathe for the child. The second is chest compressions: you push down on the breastbone to help the heart pump until it can do so itself. Rescue breathing is the most likely part of CPR to save a child's life because breathing problems are such a big threat to a child's health. Chest compressions are most helpful for adults who are having a heart attack. The pictures and instructions on the Broselow-Luten Emergency Tape explain how to do rescue breathing and chest compressions (CPR) for infants and older children.

Many community groups offer courses that allow you to learn and practice these skills. Most of the courses last 6 to 8 hours and teach first-aid and ways to prevent emergencies, along with CPR and what to do for a choking child.

There are things you can do for a child in many other kinds of health emergencies until help arrives. Sometimes people without the needed skills try to help but, without meaning to, do more harm than good. The boxes below describe **what you should do** and **what you should *not* do** in other types of emergencies: choking, eating or drinking something poisonous, drowning, severe bleeding, breathing problems, seizures, burns, loss of consciousness, and falls and crashes. Be sure to keep your Broselow-Luten Emergency Tape handy as an aid in an emergency.

FOR A CHILD WHO IS CHOKING

WHAT WILL HAPPENThe child will not be able to cough or make a sound.

WHAT TO DOCall for emergency help right away. If the child *can* cough or make any sound, do *nothing* until help arrives. If the child cannot make any sound, follow the steps outlined in the Broselow-Luten Emergency Tape

WHAT NOT TO DOIf the child *can* make a sound, do *not* put your finger into the child's mouth if you cannot see the object. You may cause it to get stuck further down the windpipe.

FOR A POISONED CHILD

WHAT WILL HAPPENThe child may become ill, or you may notice a change in behavior. Sometimes, though, children who eat or drink something poisonous look fine.

WHAT TO DOIf the child becomes ill, call for emergency help right away. During that call, find out what to do for the child's symptoms, which may include a seizure, loss of consciousness, or breathing trouble. If the child shows no signs or symptoms, call the Poison Control Center right away.

Always have what the child ate or drank with you when you call and when you go to the hospital so you can answer questions about what and how much the child swallowed.

WHAT NOT TO DODo not forget to take the medication or substance that the child swallowed to the phone when you call and to the hospital.

Do not give the child something to make him or her vomit unless advised to do so by the Poison Control Center or the child's doctor.

FOR A DROWNING CHILD

WHAT WILL HAPPENThe child may sink out of sight under water or may thrash about trying to stay afloat.

WHAT TO DOHave someone call for help right away while you get the child out of the water. If the child is not breathing, begin rescue breathing and, if needed, chest compressions. (Refer to the Broselow-Luten Emergency Tape included with this handbook).

WHAT NOT TO DODo not enter the water if you can reach the child without doing so. Do not let the child grab you.

FOR A CHILD WHO IS BLEEDING SEVERELY

WHAT WILL HAPPEN Bleeding will not stop even when you raise the part of the body that is bleeding above chest level and apply gentle pressure to the wound.

WHAT TO DO Apply direct pressure with your hand, a gauze pad, or a clean cloth.

WHAT NOT TO DO Do not remove any object that is in the wound. Do not probe or put any object into the wound.

FOR A CHILD WHO IS HAVING TROUBLE BREATHING

WHAT WILL HAPPEN The child's chest will rise and fall, and the child is likely to seem anxious.

WHAT TO DO Call for help right away. Allow the child to get into the position that the child prefers.

WHAT NOT TO DO If the child can talk or cough, do not take steps to relieve choking. Do not force the child to lie down.

FOR A CHILD WHO IS NOT BREATHING

WHAT WILL HAPPEN The child will not be breathing and may be pale, gray, or even blue.

WHAT TO DO If you know how, do rescue breathing and chest compressions (cardiopulmonary resuscitation, or CPR). The right way to do this for infants and children is shown on the Broselow-Luten Emergency Tape included with this handbook. If you are alone, call for emergency help after about a minute, even if you have to stop briefly to do so.

WHAT NOT TO DO If you are alone with the child, do not call for emergency help first. Instead, start rescue breathing and chest compressions (CPR) before you call for emergency help.

FOR A CHILD WHO IS BADLY BURNED

WHAT WILL HAPPEN The skin will change color and become either red, pale, or charred. The skin may or may not have blisters.

WHAT TO DO Place a clean, cool cloth gently over the burn, then cover the child with a clean sheet and blanket for warmth.

WHAT NOT TO DO Do not put ice, butter, or any cream or ointment on the burn.

FOR A CHILD WHO IS HAVING A SEIZURE

WHAT WILL HAPPENThe child will not be able to respond to you. It is likely that the child will be shaking. The child's eyes may be rolled back.

WHAT TO DOClear away any objects that could harm a shaking child. Prevent the child from falling. If the child is not breathing, perform rescue breathing. If the child is breathing, lay the child on his or her side. Let the seizure run its course; it will stop.

WHAT NOT TO DODo not do rescue breathing on a child during the active part of the seizure. Do not restrain the child in an effort to stop the shaking. Do not put any objects in the child's mouth.

FOR A CHILD WHO IS UNCONSCIOUS

WHAT WILL HAPPENThe child will appear to be asleep, but you will not be able to arouse the child.

WHAT TO DOCall for emergency help right away. Keep the child lying down. If possible, raise the child's legs 6 to 12 inches. If the child vomits, turn the child's head to the side, or roll the child onto his or her side.

WHAT NOT TO DODo not move the child unless the child is in a dangerous place. Do not give the child any food or drink.

FOR A CHILD WHO IS INJURED IN A FALL OR CRASH

WHAT WILL HAPPENSometimes, but not always, a bone may look out of place.

WHAT TO DOKeep the child still. For warmth, gently cover the child with a light blanket or clothing.

WHAT NOT TO DODo not move the child unless the child is in a dangerous place.

To sum up this section

- There are steps you can take to help a child who is choking, drowning, poisoned, bleeding, struggling to breathe or not breathing, having a seizure, burned, unconscious, or hurt in a fall or crash.
- **Choking relief maneuvers** and **CPR** are vital skills for all parents and people who care for children.



SECTION 3

HOW TO PREVENT CHILDHOOD EMERGENCIES

How common are childhood emergencies?

Unfortunately, very common. According to the U.S. Surgeon General's Office, more than 22,000 children under the age of 20 will die in 1997 as a result of an injury. The Children's Safety Network estimates that for each of these deaths, 40 more children will have to stay in a hospital and more than 1,100 will visit an emergency room because of an injury.

What are the ten leading causes of injury-related deaths among children under the age of 20? The National Center for Health Statistics tells us that they are:

1. Car crashes.
2. Homicide.
3. Crashes with motor vehicles other than cars.
4. Suicide.
5. Drowning.
6. Pedestrians hit by motor vehicles.
7. Fire/burns.
8. Unintended firearm deaths.
9. Children on bicycles in crashes with motor vehicles.
10. Poisoning.

This section outlines a series of steps you can take inside and outside your home to protect both your own children and others in your care. The actions you need to take will depend on where you live or work and the age of the children. They do not take much time or cost much money; in fact, most are free!

Prevention means taking action to keep children from getting sick or injured.

The power to prevent many childhood emergencies is in your hands. Begin by taking the following steps to protect children:

- Step 1:** Make your home and workplace as safe as you can.
- Step 2:** Practice good safety habits at all times.
- Step 3:** Teach good safety habits to children.
- Step 4:** Be prepared to handle an emergency.
- Step 5:** Support the people and places that provide emergency medical services for children (EMS-C).

Specific strategies to help you assure safety in each of these areas are presented on pages 17 through 27. By following these and other steps outlined in this handbook, you can prevent the top ten leading causes of injury-related deaths in children, as well as many other causes of severe illness and injury. **Tab C**, starting on page 33, provides age-specific safety tips for children from infancy through age 12. For a list of holiday safety tips, turn to **Tab D**, starting on page 39. Each step you take can help keep children safe and well!

Do your children sometimes stay with other people?

If so, do all you can to be sure that your children are safe with them, as well. This means not only that the place is safe, but also that the people there put safety first. Be sure the people who care for your child:

- Are at least 13 years old and mature.
- Can be trusted. If you do not know them well or at all, check their references before you leave your children with them. Ask for the names and numbers of parents whose children they have cared for in the past. Talk with these parents about the kind of care their children received. Find out if they have had any problems or concerns.

Look over the home, day care center, or workplace where your children may spend time to be sure it is safe. If your child goes to school or day care, be sure to provide complete and correct family and health information for use in case of an emergency. A sample form for this purpose is included in **Tab E**, on pages 41 and 42.

Step 1:

Make your home and workplace as safe as you can.

Children like to explore and try new things. Young children may not know what is unsafe; even older children sometimes forget. Risks that adults avoid can pose dangers to children.

What can you do? Now, or very soon, take the time to look at your home or workplace through a child's eyes. Identify the things inside and outside that might harm children and correct them.

Start with the following safety checklist. The list may seem long, but it does not take much time to make this safety check. If your children are old enough, invite them to help. It can be fun and a good safety lesson, too! Mark changes you need to make in this handbook.

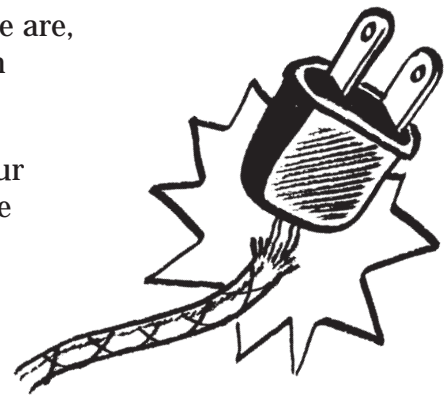
Inside your home

- Install smoke detectors on each floor of your home or workplace. Place a smoke detector in each room or, at least, in each room where someone sleeps. Most detectors use batteries. Once a month, check to make sure they all work! Once a year (maybe on your birthday or your child's birthday), put in new batteries. When smoke detectors are 10 years old, replace them with new ones.



- Keep these things locked up at all times:
 - Guns (unload them first!) and bullets.
 - Household products and cleaning supplies that might poison a child.
 - Matches and lighters.
 - Medicines and drugs, prescription and over-the-counter (use childproof caps!).
 - Tobacco products and alcohol (beer, wine, and liquor).
 - Power tools.
 - Sharp objects, such as scissors, knives, needles, and saws.
- Keep heaters and all open flames far away from drapes, rugs, furniture, towels, clothes, gas cans, and other items that can catch fire.
- Install guards or shields around fireplaces, radiators, hot pipes, and wood stoves.
- Have a working fire extinguisher in the kitchen and in any other room where there is a risk of fire.
- Set your hot water heater at or below 120 degrees Fahrenheit. If you do not know how, call your gas/electric company. You can find the number in your local phone book or on your monthly utility bill. You can also install devices in bathtub faucet and shower heads that prevent scald burns from hot water. Ask about them at your local hardware store.

- Plan what to do in case of a fire. Have all the people in your home and workplace practice the fire escape plan.
- Install safety latches on all cabinets and drawers holding items that could harm children.
- Put outlet covers in all electrical outlets within a child's reach when the outlets are not in use. Hardware stores sell them.
- Make sure children cannot reach cords for window shades, blinds, curtains, and electrical appliances — as well as lamps, pictures, and hot items, such as stoves and radiators — from places where they sleep or play.
- Make sure there is no lead-base paint on your walls. Cover lead-base paint with a sealant or hire a professional abatement company to remove it. Also, ask your doctor to test your child for lead exposure.
- If you have an automatic garage door opener, be sure it has an automatic reverse feature that keeps it from closing if it touches any object. Also, be sure the switch is placed high enough so it is out of a child's reach.
- If you have plants, find out if any are poisonous. If some are, throw them away or place them out of reach so children cannot chew on them.
- Put a non-skid mat or rubber stickers on the floor of your bathtub and shower and a mat or rug that does not slide on the floor outside the tub or shower.
- Make sure that rugs and runners cannot slip or slide.
- Replace worn or frayed electrical cords.
- Keep stairs and hallways well lit and clear of things that might cause someone to trip.



Outside your home

- If you own or live near a swimming pool, make sure that there is at least a 4 or 5 foot fence that a child cannot climb over around all four sides of it. The gate should close and latch on its own and should be kept locked at all times.
- Make sure that yard and playground equipment is sturdy and well-anchored to the ground. It should be placed in a safe spot on a soft surface, such as mulch or pea gravel. Provide handrails and guardrails near stairs and high places.
- Install play equipment that is low enough to the ground to prevent falls from heights.

Step 2:

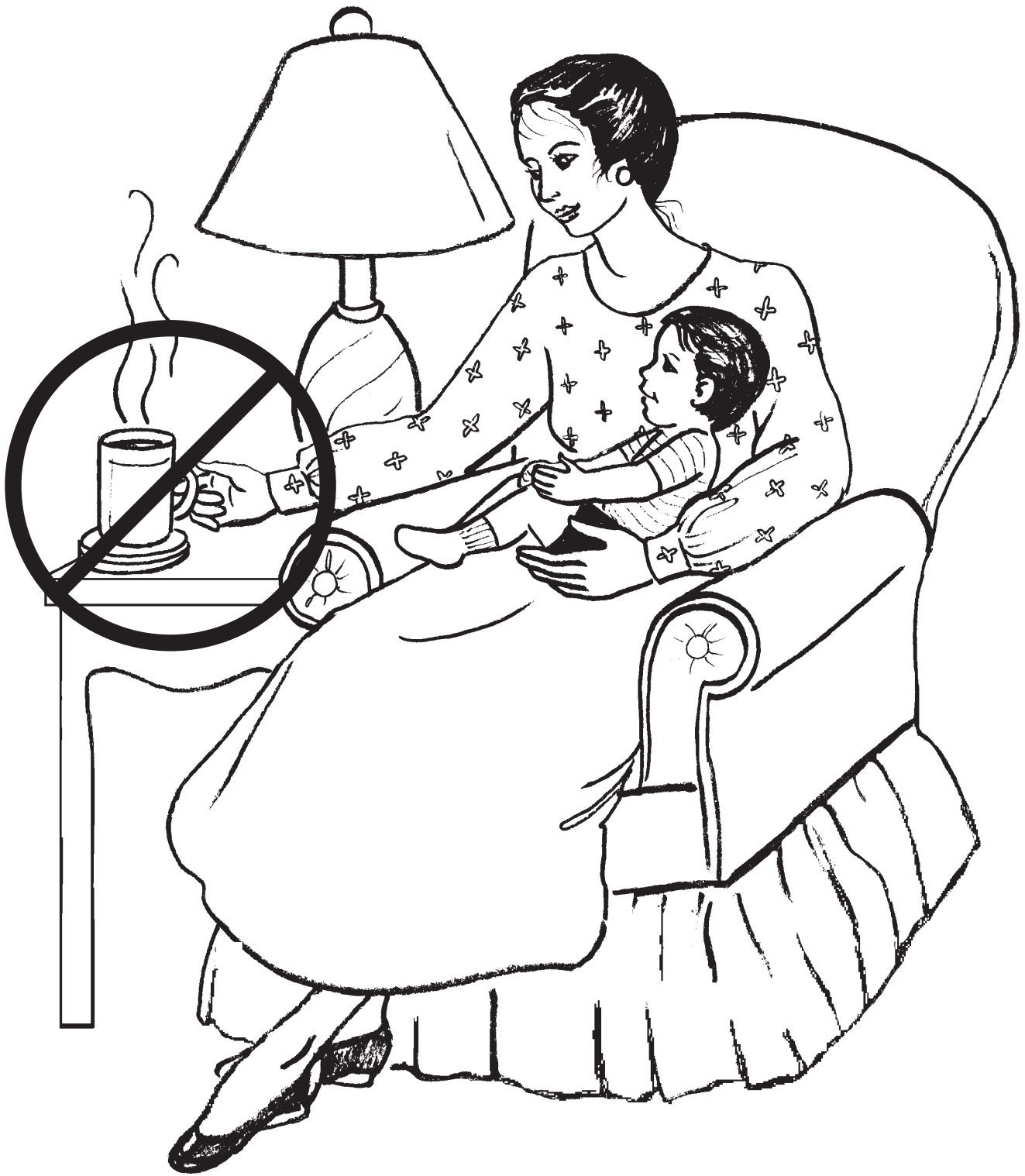
Practice good safety habits at all times.

Most of the tips in Step 1 are actions you only have to take once. In some ways, the tips in Step 2 are more of a challenge because they require you always to be careful. A single slip can lead to an emergency! Which of these good safety habits do you already practice? How can you improve?

Inside your home

- ✓ Keep children away from hot objects such as stoves, and unsecured items or furniture they can push or pull down or tip over.
- ✓ Keep cooking pots on back burners with handles turned inward so they cannot be reached by small hands.
- ✓ Place hot cups and dishes where they cannot be grabbed or knocked over.
- ✓ Unplug electrical appliances when not in use. Store them away from tubs and sinks.
- ✓ Never leave a child alone in the bathroom or near water; an adult should always be watching. If you must leave for any reason, take the child with you wrapped in a towel.
- ✓ Before bathing or washing children, make sure the water in sinks and tubs is not so hot that it might burn their skin. Put your hand in the water and move it around to check for hot spots.
- ✓ After a bath, drain all the water from the tub right away.
- ✓ When the toilet is not in use, keep the toilet seat and cover down or install a potty latch.
- ✓ Make sure that no poisons, small objects or pieces of food, sharp items such as razor blades, or glass are in trash cans that children can reach into or tip over.
- ✓ Keep cabinets and drawers closed and latched.
- ✓ Keep medicines, drugs, and vitamins in their own labeled bottles and locked up.
- ✓ Throw away medicines, drugs, and foods with expired dates. Flush old medicines and drugs down the toilet.
- ✓ Lock doors to keep children inside and strangers outside.





Do not drink or carry hot liquids or foods when a child is in your arms or lap.

- ✓ When you are not in the same room as a small child, have a working intercom or monitor that lets you listen for signs of trouble.
- ✓ When you use a fireplace, make sure the flue is fully open.
- ✓ Use secure fireplace doors or screens when fires are lit or embers are still hot.
- ✓ Never leave a child alone in a room where there is a lit fire.
- ✓ Never use a barbecue grill indoors.
- ✓ Never let your car run in the garage, even with the door open.
- ✓ It is most healthy for you to be a nonsmoker. If you must smoke, do not do so indoors. Keep tobacco products and hot ashes out of a child's reach.
- ✓ Keep purses and briefcases out of a child's reach.
- ✓ Put away exercise equipment after you use it.
- ✓ Buy only safe, nontoxic toys and furniture.
- ✓ Buy only pajamas and nightgowns that are labeled as fire-resistant.
- ✓ Keep children at a distance when a hot iron is in use.



Outside your home

- ✓ For all car rides (even short ones), make sure that children always use their seat belts or an approved safety seat or child restraint that is right for their age and size. Safety seats and child restraints must be used the right way all the time. Read and follow all directions.
- ✓ Never place a car seat in the front seat of a car with a passenger-side airbag.
- ✓ Keep car doors locked at all times, whether you are moving, stopped, or parked.
- ✓ When a child is in or near water, an adult should always be watching.
- ✓ Keep a phone and list of emergency numbers by the pool when children are in it. Never use a phone while you are wet.
- ✓ Insist that children always wear helmets when biking; when riding on motorcycles, snowmobiles, jet skis, and horses; and when playing sports such as football and hockey. They should also wear safety gear when using inline skates, skateboards, and skis, as well as other sports equipment.
- ✓ Before using power tools or yard or farm equipment, be sure that children are a safe distance away. Do not leave them alone with the equipment when you walk out of sight.
- ✓ Insist that children always wear Coast Guard-approved life jackets or vests in boats and on jet skis.
- ✓ Keep children away from hot charcoal and gas grills.
- ✓ Check play equipment often to be sure it is not broken or badly worn.
- ✓ Never let children play in the street or near parked cars.
- ✓ Never leave young children alone outdoors, in a restaurant or store, or in a car.
- ✓ Never allow a child to be an extra rider on farm vehicles such as tractors, all-terrain vehicles, or lawn mowers, or in the back of pick-up trucks.
- ✓ Keep children away from farm equipment.
- ✓ Always use the safety features of farm equipment.

Step 3:

Teach good safety habits to children.

How do children learn? They learn by watching and hearing. They learn by practicing and getting praise when they do well. They learn not just from listening to what you say but also from seeing what you do. Be a good role model for safety and health!

Take the time to help children learn, when you feel they are ready:

- ★ **To have healthy habits:** Instruct children always to wash hands with soap and water, especially before meals and after using the toilet; to brush and floss teeth regularly; to eat nutritious foods that make and keep them healthy and strong; and to be active. Warn children never to smoke, drink, or use other drugs.
- ★ **To be safe in traffic:** This includes the safest way to cross streets and ride bikes where cars and other motor vehicles are present. Do not allow children to cross the street alone until at least age 10. They should learn to look left, right, then left again before crossing the street and to obey all signs and signals. When teens are old enough to drive, take an active role in teaching them the safe use of a car. Make sure that teen drivers follow strict rules, including not driving after drinking, not speeding, and always wearing seat belts.
- ★ **To use toys, equipment, and appliances safely.**
- ★ **To exercise and play sports with safety and skill:** For instance, giving swimming lessons to children can promote healthy exercise and reduce the risk of drowning.
- ★ **To take action in an emergency:** For instance, teach your children not to run if their clothes catch fire. Instead, they should: Stop moving; drop to the ground; and roll around until the fire is out. **Practice with them — stop, drop, and roll.**
- ★ **To watch out for the health and safety of others:** Safety-smart children can teach safety to other children through their words and actions. They can also learn what to do if they ever see an emergency happen. Children can be lifesavers!



★ **To stay away from people, places, and things that might hurt them.** For instance:

- **Teach your children about “stranger danger.”** When they are not with you or with other adults they know, children should never speak to or go off with any stranger. If a stranger tries to force a child to get into a car or go with him or her, the child should scream loudly and run to the nearest person who can help.
- When they are old enough, teach your children how to be safe when staying home alone or when watching younger children. Tell them to keep doors locked and never to open them to strangers. Instruct them **never to tell a stranger on the phone that no adult is home.** Show them what to do in case of an emergency. Be sure they know where to find the list of emergency numbers to call. Leave the name of someone for them to call and someplace for them to go if they feel scared or if something about the house looks wrong.
- Child abuse takes many forms and, sadly, too many children are hurt by other people. Adults can harm children by hitting them; by shaking them; by not giving them enough to eat or drink; by keeping them where it is too cold or too hot; by tying them up or locking them in a closet or room; or by leaving them alone when they are too young to care for themselves. It is **never** okay to hurt children to correct or control what they do. If you think you know someone who has done any of these things, there are people you can call who will find help for any children who have been hurt this way. Right now, make a free call to the **Clearinghouse on Child Abuse and Neglect Information at 800-FYI-3366.**



Step 4:

Be prepared to handle an emergency.

- ✦ The time to learn what to do in an emergency is before it happens! One way to learn some of these skills is to read this handbook. Keep it in a place where you and others in your home or workplace can find it fast. Also, keep your Broselow-Luten Emergency Tape with you or in the same place as this handbook
- ✦ Teach your children how to use the phone to dial 911 or your town emergency number in case of an emergency.
- ✦ Have the name, address, and phone number of your child's doctor always at hand. Know the hours when the doctor's office is open and what to do if you need advice when the office is closed. Find out which hospital emergency room the doctor prefers in case one is ever needed. If you have health insurance, ask about the rules for getting help in an emergency.
- ✦ If you want to feel even more prepared, take courses that will help you respond effectively to a serious illness or injury. Many communities offer classes on child safety and techniques for handling common emergencies. Look for courses on topics such as first-aid, basic life support for children, and cardiopulmonary resuscitation (CPR) for infants and children. Local papers often list safety courses that are given in schools or hospitals. Most of these classes cost little or nothing. Many are short, lasting only a few hours. You do not need any prior health training to learn ways to save lives.
- ✦ For minor emergencies, keep a first-aid kit in your home or workplace. For a list of items to include in your kit, turn to **Tab A** on page 29.
- ✦ In this handbook, read **Section 4; Additional Information & Safety Tips**, starting on page 29. It lists places to call or write for free and low-cost safety items, and groups that promote child safety.



Step 5:

Support the people and places that provide emergency medical services for children (EMS-C).

Emergency medical services (EMS) systems are set up to help people who are very sick or badly hurt. The people who work in the EMS system include emergency medical technicians (EMTs), firefighters, physicians, nurses, and social workers.

More adults need EMS than children, so EMS providers most often work with grown-ups. Caring for childhood emergencies is often not the same, though, as treating adult emergencies. For instance, children may need special equipment and techniques as well as smaller drug doses. To do a good job, EMS providers must be trained to meet the needs of children of all ages who are very ill or badly injured.

In some cities and towns, EMS providers do not have what they need to give the best care to children. This is why an **emergency medical services for children (EMS-C)** movement began within the EMS system. The main goal of the EMS-C movement is to make sure that children who have medical emergencies receive the right care. EMS-C supporters also want to reduce the number of childhood emergencies. They work in many ways:

- To improve access to EMS-C where and when they are needed.
- To give good care in the places where childhood emergencies happen.
- To give good care to children in emergency rooms and trauma centers.
- To give good care to children who must stay in a hospital due to an emergency.
- To help children get better after a health emergency.

Do you know that you are also a vital part of EMS-C? What roles can you play?

- You can do all you can to prevent childhood emergencies.
- You can know how to get help fast.
- You can learn what to do in an emergency until help arrives.
- You can talk to health care professionals, community leaders, and employers about EMS and EMS-C. You can find out if your local EMS providers have the staff, training, and equipment they need to take care of children. If there are problems, you can work with others in your city or town to help improve the system. Your child, or other children you care about, may need EMS-C some day!

To sum up this section

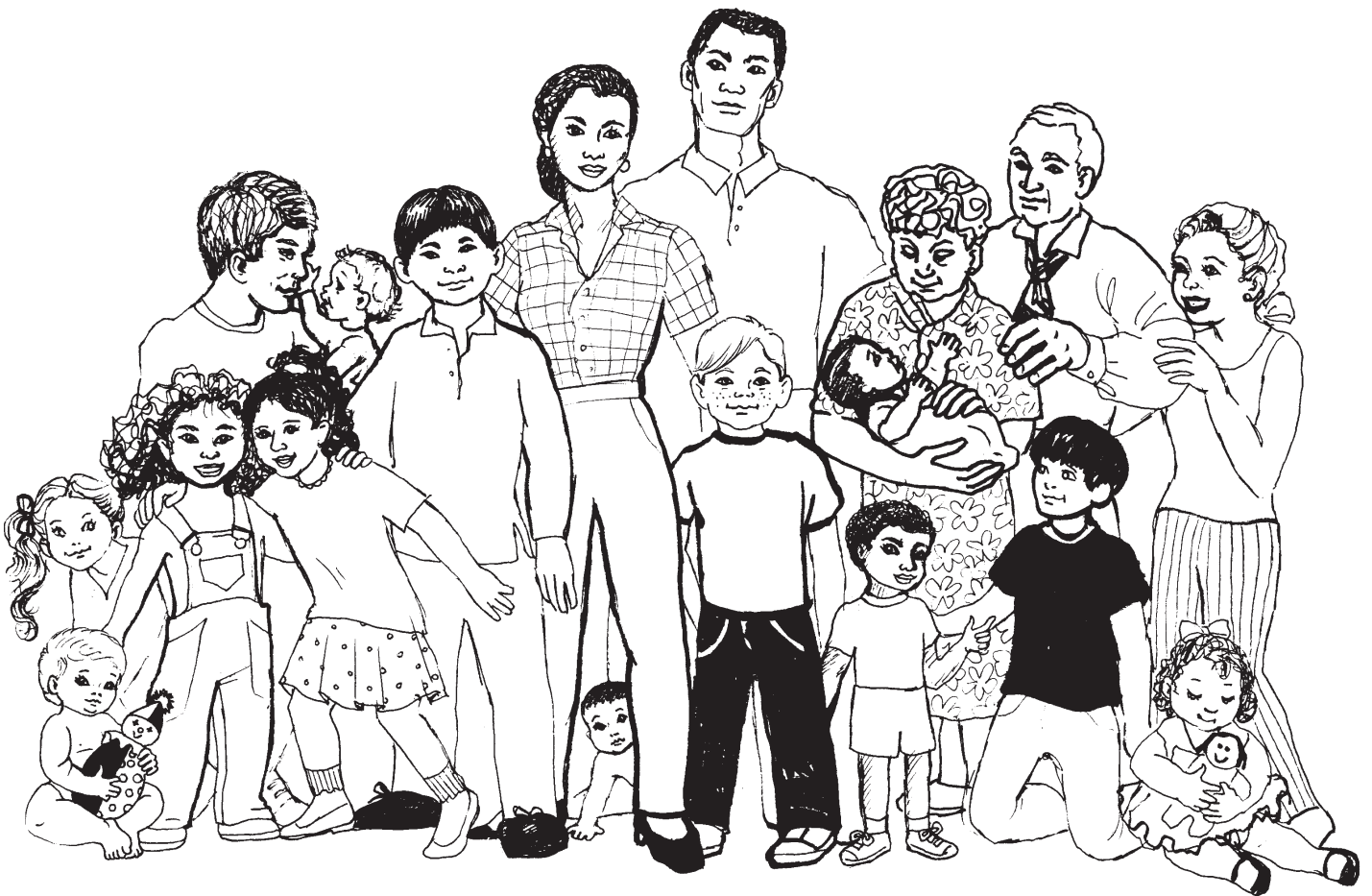
Step 1: Make your home and workplace safer inside and outside.

Step 2: Keep child safety in mind and practice good safety habits at all times.

Step 3: Teach good safety habits to children through your words and your actions.

Step 4: Be prepared to handle a childhood emergency.

Step 5: Support EMS-C where you live and work.



Section 4

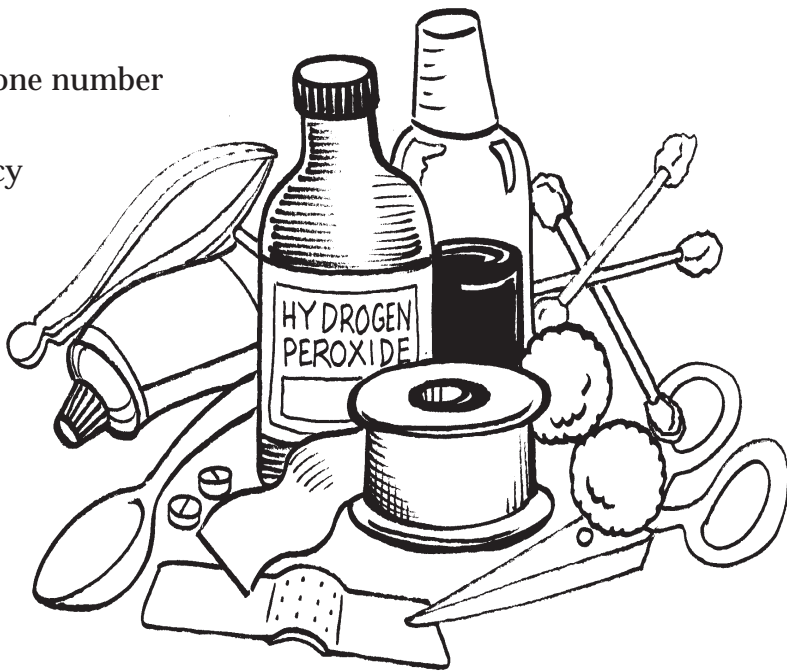
ADDITIONAL INFORMATION & SAFETY TIPS

Your First-Aid Kit

Sometimes you can take care of minor emergencies yourself if you have a well-stocked home or workplace first-aid kit. You can buy all the items you need at your local drugstore. None of the medications on this list requires a prescription. If you have any questions about what an item is for, your pharmacist (druggist) can explain. For safety, always keep medications and sharp items in a box that locks!

What to have in your **first-aid kit**:

- A copy of your emergency phone number list.
- The Broselow-Luten Emergency Tape you received with this handbook.
- The following medications
 - Hydrogen peroxide
 - Antibiotic ointment
 - Ibuprofen
 - Calamine lotion
 - Acetaminophen
- Cotton tipped applicators
- Ready-to-use cold packs
- A sling
- Adhesive strips
- Gauze
- Bandage rolls
- Bandage tape
- Cups or spoons to measure medications
- Syrup of ipecac and activated charcoal (give these to a child only if told to do so by a Poison Control Center).
- Scissors
- Sterile cotton balls
- Tweezers
- Antiseptic wipes
- Elastic bandages



If you have or care for a child who is severely allergic to insect stings or certain foods, you should always have an insect sting kit or food allergy kit nearby. These children can become very ill if they are not treated quickly. You can buy these kits at your local drugstore with a doctor's prescription.



How to Handle Poison Emergencies

If the child is not conscious, call 911 or your local emergency number before you call the Poison Control Center.

If poison is swallowed

1. Never try to make the child vomit unless you are told to do so by a doctor or the Poison Control Center.
2. Give the child nothing by mouth until you talk with the Poison Control Center or your child's doctor.
3. Keep syrup of ipecac on hand at all times (see **Tab A; Your First-Aid Kit**, page 29), but never use it without the advice of an expert.

If poison is inhaled

1. Move the child into fresh air. Avoid breathing fumes.
2. Open doors and windows wide.
3. If needed, start rescue breathing (the Broselow-Luten Emergency Tape included in this handbook can guide you).

For poison on the skin

1. Remove any clothing that has the poison on it.
2. Flood the skin with water for 15 minutes.
3. Wash the skin gently with soap and water, then rinse.

For poison in the eye

1. Fill a large glass with lukewarm water.
2. Flood the eye with water from the glass held 2 or 3 inches above the eye. Do this for 15 minutes.

After you have taken any first steps, call the Poison Control Center for more help, or call your local emergency number. Once the emergency has been handled, call the child's doctor to ask whether any follow-up care may be needed.



Age-Specific Health & Safety Tips

From late pregnancy through baby's first birthday

Prenatal health care

Before your baby is born, choose your child's pediatrician or family doctor. Make an appointment to talk with one or more doctors whom you are considering, then select the provider you feel is best.

Newborn care

Before leaving the hospital after your baby's birth, ask to be shown how to bathe and feed your baby. Also, find out about normal patterns of feeding, sleeping, stooling, and crying for a newborn.

Bath

- Use lukewarm bath water. Have the water ready and soap and towels close at hand before you bring your baby to the bath.
- Never leave the baby alone in or near water, even if it is shallow. A baby can drown in as little as 2 inches of water!

Sleep/ Cribs

- Always put babies to sleep on their backs or sides until they can turn over by themselves. Always keep crib sides up when the baby is in the crib.
- Use only cribs that have slats spaced no more than $2\frac{3}{8}$ inches apart.
- Make sure the crib mattress fits snugly against all four sides of the crib.
- Keep all objects that could smother a child, such as pillows, stuffed toys, and plastic bags, out of cribs.
- Be sure any mobiles or toys hung above cribs are lightweight, securely attached, and out of the baby's reach. Remove them when the child can stand up and reach them.

Toys

- Keep toys with strings longer than 7 inches away from babies and infants.
- Throw away toys with sharp points, jagged edges, or small loose parts that children might swallow.

Small, round objects

Babies and young children can choke on items such as beads and coins and foods such as grapes, nuts, meat chunks, hard candy, popcorn, peanut butter chunks, raisins, and raw carrots. Keep these and other similar objects away from young children.





Car safety

Before your baby is born, buy an infant car seat. Learn the right way to install the seat in your car. The safest place in the car is the center of the rear seat.

Changing tables

Never leave babies alone on tables or counters, even for a brief moment. Babies wiggle and squiggle from the day they are born and could fall if not watched at all times!

Balloons and plastic bags

Keep these items away from infants and small children. They can cause an infant to choke or stop breathing.

Infant walkers

Never place your child in a walker with wheels.

Furniture

Make sure that the children's furniture and strollers you buy are approved for safety by the Juvenile Products Manufacturers Association.

Pacifiers and jewelry

Never put anything around a baby's neck; cords, strings, and necklaces may strangle the baby.



Bicycle safety

- Do not carry children less than 12 months old on bicycles.
- Do not use frontpacks or backpacks to carry infants on bicycles.

From ages 1 through 4

Choking

- Keep children younger than age 4 away from foods on which they might choke. Examples include hot dogs, nuts, meat chunks, grapes, hard candy, popcorn, peanut butter chunks, raisins, and raw carrots. Children can also choke on small objects like beads and coins.
- **Insist that children eat only when sitting down.** They should never run, walk, or play with food in their mouths.

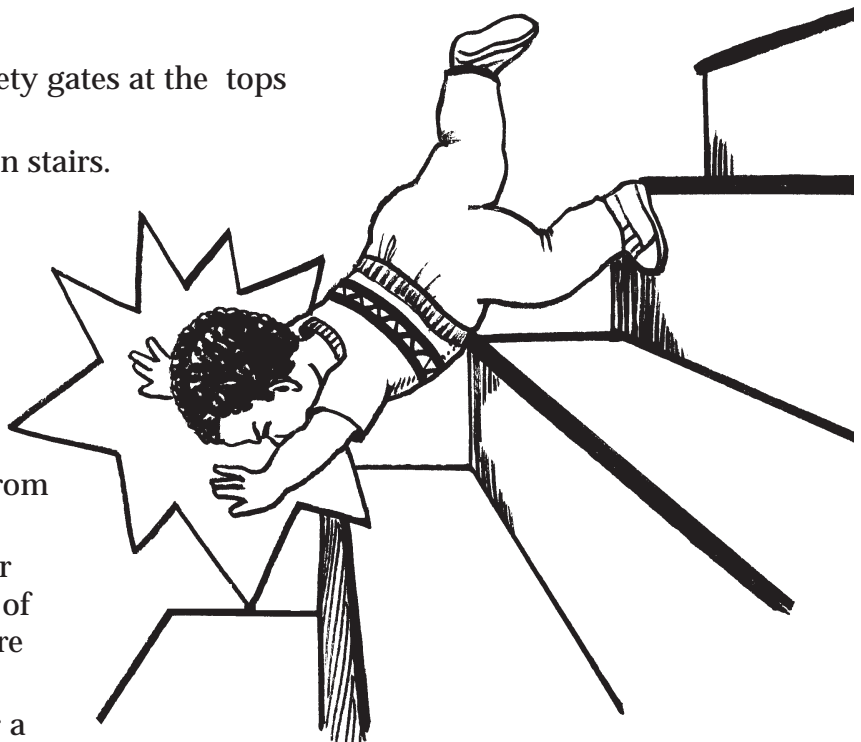


Home alone

Never leave children under 4 home alone. **Babysitters should be at least 13 years old and mature.** Leave them the phone number of an adult they can call if they need help.

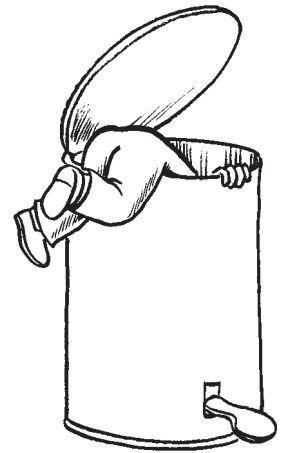
Falls

- Until children are age 3, use safety gates at the tops and bottoms of all stairs.
- Never let children run or play on stairs.
- Keep stairs and halls free of items that could cause children to trip or fall.
- Be certain that booster seats and highchairs are secure before placing children in them.
- Position children's beds away from windows.
- Install secure guardrails, bars, or window guards in all windows of upper floors except those that are fire exits.
- Install latches that limit how far a window can open.



Preventing other home injuries

- Keep trash cans in places where children cannot reach into them or tip them over.
- Install locks on outside doors high enough to be above a young child's reach.
- Make sure children cannot lock themselves inside rooms.
- Place rubber stoppers under doors so they cannot slam shut.
- Put stickers on sliding glass doors at approximately the same height as your children so they know when doors are closed and do not run into or through them.
- Remove breakable items from shelves that children can reach.
- Place corner guards or soft pads on sharp furniture edges.
- If you are storing unused refrigerators, freezers, or other large appliances, remove their doors.
- When children are playing in the sand or sandbox, an adult should always be watching. Cover the sandbox when it is not being used. Once a year, empty the sandbox and refill it with sterilized sand.

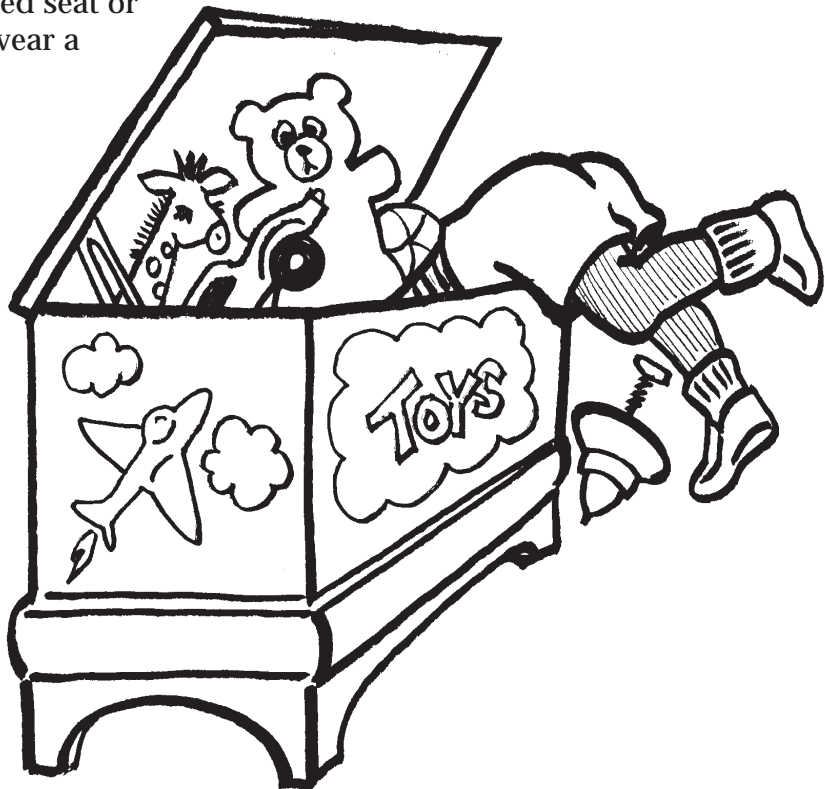


Bicycle and tricycle safety

- Children riding in a rear-mounted seat or riding tricycles should always wear a safety helmet approved by the American National Standards Institute (ANSI) or the Snell Memorial Foundation or an (ASTM) bike helmet.
- Use an approved child carrier on your bicycle.

Toys

- Make sure toy chests close slowly and cannot slam shut, trapping a small child inside.
- If children are given toys they are too young to play with safely, put the toys away until the children are old enough to use them.



Healthy habits

- Make sure your children get shots (immunizations) that can prevent some childhood illnesses. Talk with your doctor about which shots your children need and at what ages.
- Wash your hands and your children's hands with soap often to prevent the spread of germs, even when you feel healthy.

From ages 5 through 9

Water safety

- Set rules for safety when around water, and enforce them.
- Teach children about safe swimming, diving, and boating.
- While boating, use personal flotation devices (life jackets or vests).

Motor vehicle safety

- Children weighing from 40 to 60 pounds (ages 4 to 8) should use booster seats until they are big enough to use a seat belt with a shoulder restraint.
- Install shoulder belt restraints in the back seats of cars that do not have them.

Bicycle safety

- Teach and enforce bike safety rules.
- Always wear an ANSI/Snell-approved or ASTM bike helmet.
- Never allow children this age to ride in the street alone.
- Be a good role model by wearing your bike helmet, too.



From ages 10 through 12

Bicycle safety

- Teach children this age never to ride with others on their bikes.
- Instruct them never to do stunts or tricks on their bikes.
- Emphasize the importance of always wearing a helmet when riding a bike.

Sports safety

- Be sure children always wear protective gear during sports.
- Purchase and always have children wear an approved equestrian helmet when riding a horse.

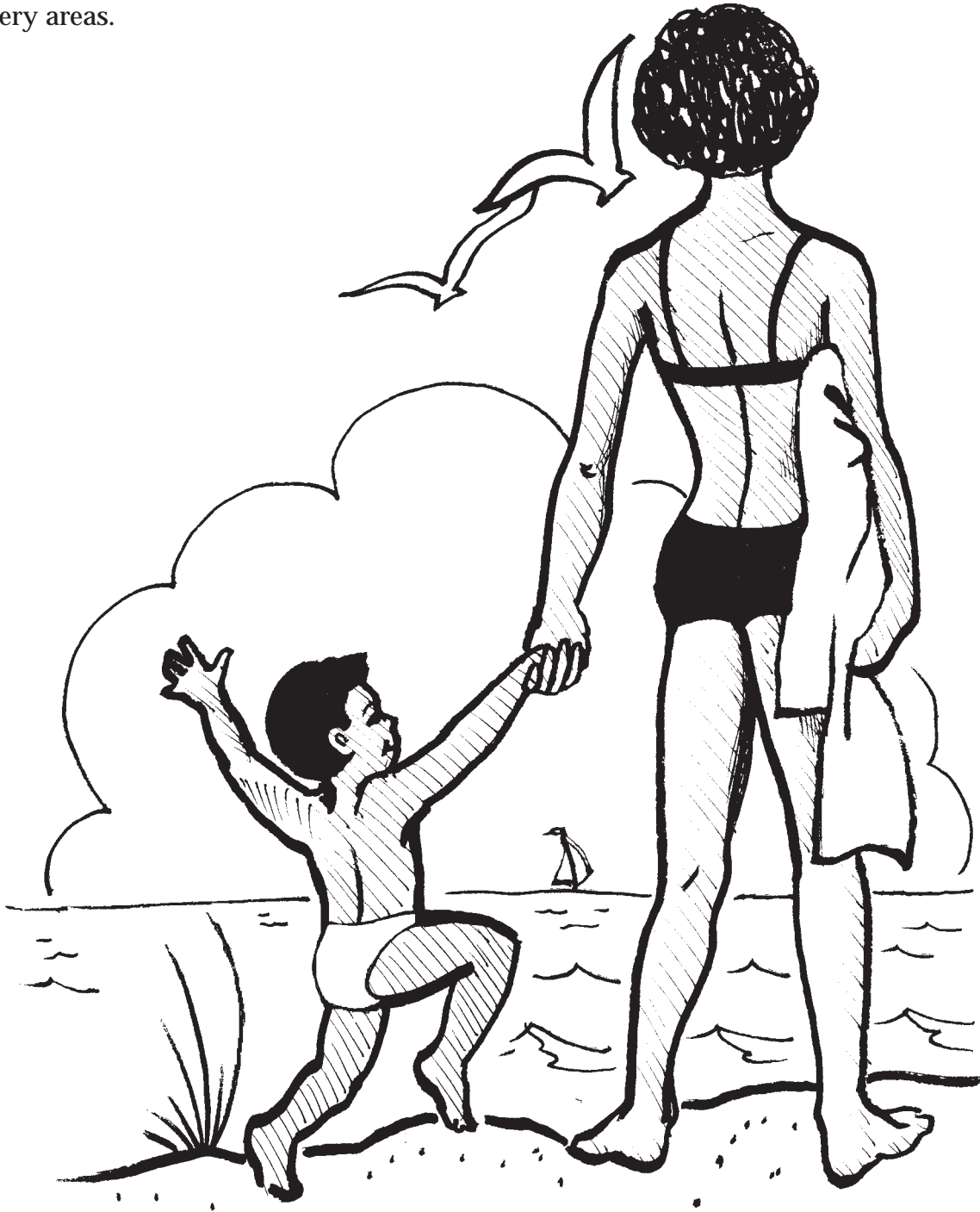
Farm safety

- Learn the right way to use farm tools and machinery, and teach children the right way, too.
- When teens begin to use machinery, supervise them closely.



Water safety

Even if children are good swimmers, an adult should always be with them when they go near bodies of water that may present special danger, such as beaches, lakes, rivers, rapids, waterfalls, rough seas with rip tides or strong currents, cliffs, dangerous rocks, or slippery areas.



Holiday Safety Tips



Fourth of July

The safest way to enjoy the Fourth of July is to have all people — adults *and* children — avoid handling fireworks. Instead, find a place where trained persons provide a fireworks display so you can have a safe, fun time!

If you do bring fireworks home:

- Store them in a place where nothing can set them off and where no child can reach them.
- Never let young children handle fireworks.
- If fireworks are legal, light them outdoors on the ground in a clear area away from other fireworks, glass, houses, other people, and any item that might catch fire.
- Never light more than one device at a time.
- Remain a safe distance from fireworks once they are lit.
- Keep a bucket of water close by to douse and soak any fireworks that do not work the way they are supposed to (“duds”).
- Never try to relight a dud. Soak it with water, then throw it away.

Halloween

- Dress children so they “glow in the dark.” Put reflective tape on costumes and trick-or-treat bags. You can also buy reflective bracelets.
- Buy costumes labeled “fire resistant.”
- Use face paint instead of masks, which can be unsafe if they limit a child’s vision. For added safety and fun, use make-up that glows.
- Go out while it is still light.
- Use flashlights when trick-or-treating at night.
- Explain to your children in advance that for safety reasons, you must inspect the treats they collect before they can eat them. Throw away any unwrapped candy or any other candy whose wrappings look cut, torn, or tampered with.
- Only go trick-or-treating in familiar neighborhoods where you know the people.
- Never let children go trick-or-treating without an adult. Before they go, talk to them about traffic safety, such as walking, not running, stopping at driveways and corners, and waiting for an adult before they cross a street.



Winter Holidays

- Some holiday plants, such as poinsettias and holly (berries), are poisonous when chewed or eaten. If you have them in your home, keep them out of a child’s reach.
- Keep lit candles out of a child’s reach and away from drapes, wood window frames, or any other object that might catch fire.
- Christmas trees and other greens can pose a fire hazard. Keep them away from heat and fire sources such as the fireplace. If you have a live tree, keep the base sitting in plenty of water. Trim back tree branches that are at a child’s eye level to protect the eyes and skin of young children. Also, place objects such as “angel hair” (which is made of glass) and items that can break out of a child’s reach.
- Check for worn or broken wires before you hang Christmas lights. Do not connect more than three sets of lights to one extension cord. Unplug the lights each night.
- Children can choke on small items, such as popcorn pieces and cranberries. Keep them out of children’s reach.
- Make sure that children’s gifts are safety-approved, nonpoisonous, and appropriate for their ages and skill levels. Brightly colored gift wrap may contain lead, copper, or zinc; it should not be burned in the fireplace.
- If people visit, make sure they keep purses, bags, and medications out of a child’s reach.
- A small amount of alcohol can poison a child. Be sure that children cannot help themselves to drinks that contain alcohol.



Your Child's Personal & Medical Record

Child's name: _____ Date of birth: _____

Address: _____ Home phone: _____

Father's phone at work: _____ Mother's phone at work: _____

If parents are divorced, who has legal custody? _____

Nearest relative or adult friend's name and phone: _____

Names of those who have permission to pick up your child from school (other than parents):

Name _____ Relationship _____

Name _____ Relationship _____

Password to be used by adult (other than parent) who picks up the child from school:

Doctor's name: _____ Office phone: _____

Dentist's name: _____ Office phone: _____

Medical insurance company: _____

Phone: _____

Policyholder's name: _____ Policy number: _____

Group number: _____

Immunizations and dates:

Diphtheria, Pertussis, & Tetanus (DPT): _____ Oral Polio: _____

Haemophilus influenza type B: _____ Measles, Mumps, & Rubella (MMR): _____

Hepatitis B: _____ Varicella: _____

Diphtheria & Tetanus (DT): _____ Other: _____

Has your child had any of the following illnesses?

(Mark with an X.)

Chickenpox (Varicella)Measles Mumps Hepatitis

Allergies:

(List any medications, foods, insect bites, etc. that cause an allergic reaction.)

1. _____
2. _____
3. _____

Past or present medical problems:

(List any problems requiring treatment by a doctor; for example, asthma, allergies, anemias, broken bones, diabetes, psychiatric counseling, seizures, surgeries.)

1. _____
2. _____
3. _____

Medicines taken regularly:

If your child needs his or her medicine in school, bring a note of instruction from your doctor with a correct label for the prescription(s).

Medication: _____	Medication: _____
Given for: _____	Given for: _____
How much: _____	How much: _____
How often: _____	How often: _____

Have you signed and returned a consent form for emergency medical treatment? _____

Resource List

Places to Call:

American Academy of Pediatrics	800-433-9016
American College of Emergency Physicians	800-798-1822
American Nurses Association	202-554-4444
Children's Safety Network, National Public Services Research Institute	301-731-9891
Consumer Product Safety Commission Hotline	800-638-2772
Emergency Medical Services for Children National Resource Center ...	202-884-4927
Farm Safety 4 Just Kids	800-423-5437
Health Resources & Services Administration, Maternal & Child Health Bureau	301-443-2250
Healthy Mothers, Healthy Babies groups	Check your phone book
Kiwanis Clubs and Districts	Check your phone book
Lion's Clubs	Check your phone book
National EMSC Resource Alliance (NERA)	310-328-0720
National Highway and Transportation Safety Administration, Auto Safety Hotline	800-424-9393
National Institute of Environmental Health Services	919-541-3345
National Safe Kids Campaign	202-662-0600
National Safety Council	Check your phone book
Parent Teacher Associations	Check your phone book

Regional Poison Control Centers	Check your phone book
Religious organizations	Check your phone book
State, county, and local medical societies	Check your phone book
United States Fire Administration, Federal Emergency Management Agency, Public Information, Education, and Relations Programs	Check your phone book
Women's junior leagues	Check your phone book

Books to Read:

Alber, John and Dolores, *Baby Safe Houseplants and Cut Flowers* (Genus Books, 1990).

American Academy of Pediatrics (Stephen P. Shelov, Ed.), *Caring for Your Baby and Young Child* (Bantam Books, 1991).

American Red Cross National Headquarters, *Standard First-Aid and Personal Safety* (2nd ed.) (Doubleday & Co., 1979).

American Red Cross and American Academy of Pediatrics, *American Red Cross Child Care Course*, health and safety units (American Red Cross, 1990).

Clark County EMS, *When Every Second Counts — Call 911* (Available by writing to: P.O. Box 5000, Vancouver, WA 98666).

Fise, Mary Ellen R., and Jack Gillis, *The Childwise Catalog: A Consumer Guide to Buying the Safest and Best Products for Your Children* (Harper & Row, 1993).

Green, Martin I., *A Sigh of Relief — The First-Aid Handbook for Childhood Emergencies* (Bantam Books, 1994).

Household Hazardous Waste Project, *Guide to Hazardous Waste Products Around the Home* (Available by writing to: 901 South National Avenue, P.O. Box 87, Springfield, MO 65804).

Illinois Department of Public Health, *Teenage Drinking and Driving — A Fatal Attraction* (Available by calling: 217-785-2080).

Lansky, Vicki, *Child Proof Your Home* (Safety First, 1991).

Miller, Jeanne, *The Perfectly Safe Home* (Simon & Schuster, 1991).

Schmidt, B. D., *Your Child's Health: The Parents' Guide to Symptoms, Emergencies, Common Illnesses, Behavior, and School Problems* (Bantam Books, 1991).

Smith, B., and G. Stevens, *The Emergency Book: You Can Save a Life* (Simon & Schuster, 1991).

Tyson, Rae, *Kidsafe: Everything You Need to Know to Make Your Child's Environment Safe* (Times Books/Random House, 1995).

Wilson, Modena Hoover, *Saving Children* (Oxford University Press, 1991).

Videos to Watch:

“Baby Alive”

To order, call: The American Academy of Pediatrics at800-433-9016
(ext. 6776)

“Baby Proof Home”

To order, call:201-808-1144

“Baby Talk”

To order, call: The American Academy of Pediatrics at800-433-9016
(ext. 6776)

“Bicycle Safety Camp”

To order, call: The American Academy of Pediatrics at800-433-9016
(ext. 6776)

“Child Safety Outdoors”

To order, call: The American Academy of Pediatrics at800-433-9016
(ext. 6776)

“Home Safe”

To order, call:800-338-BABY

“Infant and Toddler Emergency First-Aid”

To order, call: The American Academy of Pediatrics at800-433-9016
(ext. 6776)

“Safe Kids Cycle Smart Video: Jello in a Jar”

To order, call:612-295-4135
(item #0087)

“Swim Lessons for Kids”

To order, call: The American Academy of Pediatrics at800-433-9016
(ext. 6776)

Computer Software to Explore:

“Safety First: A Guide to Safe Childcare for Baby-sitters”

To order, call:800-530-5607

A Child Health Resource List

Prepared by EMSC National Resource Center

Children's Mental Health

Publications List, National Mental Health Services Knowledge Exchange Network, P.O. Box 42490, Washington, DC 20015; 1-800-789-2647.

Publications List, National Technical Assistance Center for Children's Mental Health, Georgetown University Child Development Center, 3307 M Street, N.W., Washington, DC 20007-3935; 202-687-5000, fax: 202-687-1954.

Publications List, Research and Training Center, Regional Research Institute for Human Services, P.O. Box 751, Portland, OR 97207-0751.

Claiming Children, newsletter of the Federation of Families for Children's Mental Health, 1021 Prince Street, Alexandria, VA 22314-2971; 703-524-7600.

Focal Point: A National Bulletin on Family Support and Children's Mental Health, Regional Research Institute for Human Services, Portland State University, P.O. Box 751, Portland, OR 97207-0751; National Clearinghouse: 1-800-628-1696.

Research on Children and Adolescents with Mental, Behavioral and Developmental Disorders, Institute of Medicine, National Academy Press, 2101 Constitution Avenue, Washington, DC 20418; 1-800-624-6242.

Psychosocial Issues for Children and Families in Disasters (DHHS [SMA] 95-3022), National Mental Health Services Knowledge Exchange; 1-800-789-2647.

National Plan for Research on Child and Adolescent Mental Disorders (DHHS [ADM] 90-1683, ISBN 0-16-021851-9), National Advisory Mental Health Council.

Mental Health Directory (DHHS [SMA] 95-3048, \$35.00), a directory of providers available from the Government Printing Office: 202-783-3238.

Organizations Addressing Suicide, National Center for Education in Maternal and Child Health, 2000 15th Street North, Suite 701, Arlington, VA 22201-2617; 703-524-7802.

Adolescent Suicide Prevention: A Bibliography of Selected Resources, National Center for Education in Maternal and Child Health, 2000 15th Street North, Suite 701, Arlington, VA 22201-2617; 703-524-7802.

Children with Special Health Care Needs

Emergency Medical Services for Children: Coordinating Care for Children with Special Health Care Needs, EMSC National Resource Center, 111 Michigan Avenue, N.W., Washington, DC 20010; 202-884-4927.

Encyclopedia of Disability and Rehabilitation, edited by Arthur E. Dell Orto and Robert Marinelli; Simon & Schuster, 866 Third Avenue, New York, NY 10022.

Children with Special Health Needs: Bibliography of Selections from the NCEMCH Reference Collection and Database of Organizations (\$5.00), National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265, fax: 703-821-2098.

Disability in America: Toward a National Agenda for Prevention, edited by Andrew Pope and Alvin Tarlov; Institute of Medicine, National Academy Press, 2101 Constitution Avenue, Washington, DC 20418; 1-800-624-6242.

Directory of National Information Sources on Disabilities, National Institute on Disability and Rehabilitation Research, Office of Special Education and Rehabilitation Services, U.S. Department of Education, 400 Maryland Avenue, S.W., Washington, DC 20202.

Directory of National Genetic Voluntary Organizations and Related Resources, Alliance of Genetic Support Groups, 35 Wisconsin Circle, Suite 440, Chevy Chase, MD 20815-7015; 1-800-336-GENE or 301-652-5553.

Publications List, National Information Center for Children and Youth with Disabilities, P.O. Box 1492, Washington, DC 20013-1492; 1-800-695-0285.

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Collaboration in Child Health

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Publications List, Office of Minority Health Resource Center, P.O. Box 37337, Washington, DC 20013-7337; 1-800-444-6472.

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Publications List, National Coalition of Hispanic Health and Human Services Organizations, 1501 Sixteenth Street, N.W., Washington, DC 20036-1401.

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EMERGENCY!, factsheet for parents, EMSC National Resource Center, 111 Michigan Avenue, N.W., Washington, DC 20010; 202-884-49270.

Emergency Medical Services for Children, Ten Year Report, National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265, fax: 703-821-2098.

EMSC Product Catalogue, National EMSC Resource Alliance; 310-328-0720.

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Publications Catalogue, American Red Cross, Health and Safety Services; 1-800-667-2968 or from local chapters of the American Red Cross.

Publications Catalogue, National Safety Council, P.O. Box 558, Itasca, IL 60143-0558; 1-800-621-7619, fax: 1-708-285-0797.

Publications Catalogue, American Heart Association, 7272 Greenville Road, Dallas, TX 75231; 214-373-6300.

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Fundraising for Children’s Health

Winning Grants: Step by Step, by Mim Carlson Support Centers of America; Jossey-Bass Inc., Publishers, 350 Sansome Street, San Francisco, CA 94104; 415-433-1740, fax: 1-800-605-2665.

The Foundation Center’s Guide to Proposal Writing, by Jane C. Geever and Patricia McNeill (1993, ISBN 0-87954-492-9, \$29.95), Foundation Center, 79 Fifth Avenue, New York, NY 10003-3076; 1-800-423-9863.

National Guide to Funding in Health, 4th ed. (March 1995, ISBN 0-87954-600-X, 1,142 pages, \$145.00), Foundation Center, 79 Fifth Avenue, New York, NY 10003-3076; 1-800-424-9836; available for use at cooperating collections of the Foundation Center.

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Managed Care

Publications List, The Kaiser Commission on the Future of Medicaid, 1450 G Street, N.W., Suite 250, Washington, DC 20005, 1-800-656-4KFF.

A Parent's Guide: Understanding the Basics of Managed Care, National Association of Children's Hospitals and Related Institutions, 401 Wythe Street, Alexandria, VA 22314; 703-684-1355.

A Parent's Guide: Choosing a Health Care Plan for Your Child, National Association of Children's Hospitals and Related Institutions, 401 Wythe Street, Alexandria, VA 22314; 703-684-1355.

America's Uninsured Children and the Changing Policy Environment: A Strategic Audit of Activities and Opportunities, The Children's Partnership, 5505 Connecticut Avenue, N.W., Suite 271, Washington, DC 20015-2601.

Nutrition

Publications List, Food and Nutrition Information Center, National Agricultural Library, USDA, 10301 Baltimore Boulevard, Room 304, Beltsville, MD 20705-2351; fnic@nal.usda.gov.

Eat for Life: The Food and Nutrition Board's Guide to Reducing Your Risk of Chronic Diseases, edited by Catherine E. Woteki and Paul R. Thomas; Institute of Medicine, National Academy Press, 2101 Constitution Avenue, Washington, DC 20418; 1-800-624-6242.

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The Food Pyramid Guide (HG-252), USDA Human Nutrition Information Service, 6505 Belcrest Boulevard, Hyattsville, MD 20782.

The Food Label, The Pyramid and You (HG-266, \$1.00), USDA Food and Consumer Information Service, 3101 Park Center Drive, Alexandria, VA 22302.

Ten Tips to Healthy Eating for Kids, International Food Information Council, 1100 Connecticut Avenue, N.W., Suite 430, Washington, DC 20036.

Eating for Health and Fun: Facts about Feeding Children, Ages 1 to 5, MSU Extension Bulletin E-2479; 517-355-2308.

Nutrition During Pregnancy: Summary (1990, 23 pages), Institute of Medicine, National Academy Press, 2101 Constitution Avenue, Washington, DC 20418; 1-800-624-6242.

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Publications List, National Heart, Lung, and Blood Institute; available from Government Printing Office; 202-783-3238.

Perinatal Care

Guidelines for Perinatal Care, 3rd ed. (296 pages, \$34.95 [members], \$39.95 [non-members]), American Academy of Pediatrics and American College of Obstetricians and Gynecologists, 1-800-433-9016.

Perinatal Health Strategies For the 21st Century, National Perinatal Information Center, One State Street, Suite 102, Providence, RI 02908; 401-274-0650.

Maternal and Child Health Publications Catalogue, National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265, fax: 703-821-2098.

My Health Diary, Myself, My Baby (DHHS Publ. No. HRSA-MCHB-92-4, ISBN 0-16-038208-4, \$6.00), available from the National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265.

Infant Mortality: Care for Our Children, Care for Our Future, National Commission to Prevent Infant Mortality, Switzer Building, Room 2006, 330 C Street, S.W., Washington, DC 20201; 202-472-1364.

The Healthy Start Initiative: A Community-Driven Approach to Infant Mortality Reduction, National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265.

Second Follow-up Report: The Surgeon General's Workshop on Breast-Feeding and Human Lactation, National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265.

Advances in the Prevention of Low Birthweight: An International Symposium, National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265.

Preconceptional Health: Selections from the NCEMCH Reference Collection, National Center for Education in Maternal and Child Health, 2000 15th Street North, Suite 701, Arlington, VA 22201-2617; 703-524-7802.

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Prevention of Childhood Illness

Publications Catalogue, American Academy of Pediatrics, P.O. Box 927, Elk Grove Village, IL 60009-0927; 1-800-433-9016.

Maternal and Child Health Publications Catalogue, National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265.

The Children's Vaccine Initiative: Achieving the Vision, (1993, 221 pages), Institute of Medicine, National Academy Press, 2101 Constitution Avenue, Washington, DC 20418; 1-800-624-6242.

Overcoming Barriers to Immunization: A Workshop Summary, edited by Jane S. Durch (81 pages, 1994), Institute of Medicine, National Academy Press, 2101 Constitution Avenue, Washington, DC 20418; 1-800-624-6242.

List of HIV/AIDS Materials, CDC National AIDS Clearinghouse, P.O. Box 6003, Rockville, MD 20849-6003; 1-800-458-5231.

Putting the Pieces Together: Controlling Lead Hazards in the Nation's Housing (ISBN 0-16-038208-4, \$14.00); 1-800-245-2691.

Prevention of Childhood Injury and Violence

Publications List, National Center for Education in Maternal and Child Health; 2000 15th Street North, Suite 701, Arlington, VA 22201-2617; 703-524-7802.

Publications List, Children's Safety Network; 617-969-7100.

Injury to Children and Teenagers: State-by-State Mortality Facts, edited by Susan P. Baker, Lois A. Fingerhut, Laura Higgins, Li-Hui Chen, and Elisa R. Braver; National Maternal and Child Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265.

Injury Prevention Measures in Households With Children in the United States, 1990, by Michelle Mayer and Felicia LeClere (May 1994, DHHS Publ. No. [PHS] 94-120), National Center for Health Statistics; 301-436-8500.

Injury-Related Visits to Hospital Emergency Departments: United States, 1992, by Catherine Burt (May 1995, DHHS Publ. No. [PHS] 95-1250), National Center for Health Statistics; 301-436-8500.

Children and Agriculture: Opportunities for Safety and Health, National Farm Medicine Center, 1000 North Oak Avenue, Marshfield, WI 54449-5790; 715-387-9298. Other publications on rural injury are also available.

Injury Prevention: Meeting the Challenge, prepared by The National Committee for Injury Prevention and Control (ISBN 0-19-506248-5), Oxford University Press, 200 Madison Avenue, New York, NY 10016.

Publications List, National Clearinghouse on Child Abuse and Neglect Information; 1-800-394-3366.

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Firearm Mortality Among Children, Youth and Young Adults 1-34 Years of Age, Trends and Current Status: United States, 1985-90, by Lois A. Fingerhut, (DHHS Publ. No. [PHS] 93-1250, 20 pages), National Center for Health Statistics, 6525 Belcrest Road, Hyattsville, MD 20782; 301-436-8500.

Preventing Crime and Promoting Responsibility (\$8.00), The President's Crime Prevention Council; available from Government Printing Office: 202-783-3238.

Understanding and Preventing Violence, edited by Albert J. Reiss, Jr. and Jeffrey A. Roth; Institute of Medicine, National Academy Press, 2101 Constitution Avenue, Washington, DC 20418; 1-800-624-6242.

Publications Catalogue, American Academy of Pediatrics, P.O. Box 927, Elk Grove Village, IL 60009-0927; 1-800-433-9016.

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What Works in Preventing Rural Violence: Strategies, Risk Factors, and Assessment Tools, Amherst Wilder Foundation; 1-800-274-6024.

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Primary Care: America's Health in a New Era, edited by Molla S. Donaldson, Karl D. Yordy, Kathleen N. Lohr, and Neal A. Vanselow (1996), Institute of Medicine, National Academy Press, 2101 Constitution Avenue, Washington, DC 20418; 1-800-624-6242.

Models That Work: The 1995 Compendium of Innovative Primary Health Care Programs for Underserved and Vulnerable Populations (177 pages), Bureau of Primary Health Care, 4350 East-West Highway, 7th Floor, Bethesda, MD 20814.

Assessing and Developing Primary Care for Children: Reforms in Health Systems, edited by Holly Allen Grason and Bernard Guyer (243 pages), National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265.

Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents, National Maternal and Child Health Clearinghouse, 2070 Chain Bridge Road, Suite 450, Vienna, VA 22182-2536; 703-821-8955, ext. 254 or 265; fax: 703-821-2098.

Publications Catalogue, American Academy of Pediatrics, P.O. Box 927, Elk Grove Village, IL 60009-0927; 1-800-433-9016.

Rural Health Issues

Publications List, Office of Rural Health Policy, Global Exchange, Inc., 7910 Woodmont Avenue, Suite 400, Bethesda, MD 20814-3015; 301-656-3100.

School Health

School Health: Findings From Evaluated Programs (1993, \$8.50), National Coordinating Committee on School Health; available from Government Printing Office; 202-783-3238.

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Healthy People 2000 Review, National Center for Health Statistics; 301-436-8500.

Health of Our Nation's Children (December, 1994, DHHS Publ. No. [PHS]95-1 519, \$4.75), National Center for Health Statistics; 301-436-8500; Caution: Data is from 1988.

Youth Risk Behavior Surveillance, United States, 1993, National Center for Health Statistics; 301-436-8500.

Kids Count Data Book, Annie E. Casey Foundation, Attn: KIDS COUNT Data Book, 701 St. Paul Street, Baltimore, MD 21202.

Substance Abuse Prevention

Publications Catalogue, National Clearinghouse for Alcohol and Drug Information; 1-800-729-6686.

Publications List, Join Together, 441 Stuart Street, 6th floor, Boston, MA 02116; 617-437-1500, <http://www.jointtogether.org>.

Responding to Drug Use and Violence: Helping People, Families and Communities (ISBN 0-16-045524-3, \$12.00), Office of National Drug Policy; available from Government Printing Office: 202-783-3238.

Teen Drinking Prevention Program, National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847-2345; 1-800-729-6686.

Campaign Safe and Sober, National Highway Traffic Safety Administration, 400 7th Street, S.W., NTS-13, Washington, DC 20590.

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INFANT CHOKING

1 FIVE BACK BLOWS

2 FIVE CHEST THRUSTS

ALTERNATING

INFANT CPR

1 OPEN AIRWAY

- LOOK FOR MOVEMENT OF THE CHEST AND SHOULDERS
- LISTEN FOR SOUNDS OF BREATHING
- FEEL FOR BREATH ON YOUR CHEEK

2 RESCUE BREATHING

- PLACE YOUR MOUTH OVER MOUTH & NOSE
- BLOW GENTLY ENOUGH AIR TO MAKE CHEST RISE & FALL
- 2 PUFFS

3 FEEL FOR PULSE AS SHOWN

- PULSE PRESENT, CONTINUE 1 PUFF EVERY 2 SECONDS
- NO PULSE, START COMPRESSION (PICTURE 4)

4 CHEST COMPRESSION

- COMPRESSION DEPTH 1/2" TO 1"
- 5 FAST COMPRESSIONS FOLLOWED BY 1 BREATH
- 30:2 COMPRESSIONS PER MINUTE

Check for Return of Pulse and Breathing Every Minute.

CHILD CHOKING

1 QUICK UPWARD THRUST, JUST ABOVE THE NAVEL.

OR

2 THRUST GENTLY UPWARDS IN MIDLINE JUST ABOVE THE NAVEL.

CHILD CPR

1 OPEN AIRWAY

- LOOK FOR MOVEMENT OF THE CHEST AND SHOULDERS
- LISTEN FOR SOUNDS OF BREATHING
- FEEL FOR BREATH ON YOUR CHEEK

2 RESCUE BREATHING

- SEAL YOUR MOUTH OVER MOUTH & NOSE
- PINCH THE VICTIM'S NOSE
- BLOW ENOUGH AIR TO MAKE VICTIM'S CHEST RISE & FALL
- 2 BREATHS

3 FEEL FOR PULSE AS SHOWN

- PULSE PRESENT, CONTINUE 1 BREATH EVERY 2 SECONDS
- NO PULSE, START COMPRESSION (PICTURE 4)

4 CHEST COMPRESSION

- COMPRESSION DEPTH 1" TO 1 1/2"
- 5 SMOOTH COMPRESSIONS TO 1 BREATH
- 30:2 COMPRESSIONS PER MINUTE

If No Rise Or Fall, Repeat 1 & 2. No Response, Treat for Obstructed Airway (See Choking).

ABDOMINAL THRUST HAND POSITION

JUST ABOVE THE NAVEL.

PATIENT STANDING.

JUST ABOVE THE NAVEL.

PATIENT ON BACK.

F I R S T A I D

Directions for determining your child's weight and emergency color

STEP 1
Place Red End of Tape even with top of child's head

STEP 2
Look to see in which color zone the child's heel lies.

WHAT WILL HAPPEN

WHAT TO DO

WHAT NOT TO DO

FOR A CHILD WHO IS DROWNING

The child might disappear and be found under water or the child may be floating about trying to stay afloat.

If there is someone else around, have him call EMS while you or someone else rescues the child. If the child is not breathing, begin rescue breathing and chest compressions if needed.

Do not enter the water to rescue your child if you can reach him/her without doing so. Don't let him/her grab you.

FOR A CHILD WHO IS BLEEDING

For serious bleeding — the kind that is a large quantity and does not stop with simple elevation and gentle pressure.

Apply direct pressure with your hand, gauze, or clean cloth.

Do not probe the wound, or remove any imbedded object.

FOR A CHILD WHO IS HAVING A SEIZURE

The child will not be able to respond to you. It is likely that the child will be shaking. The child's eyes may be rolled back.

Clear away any objects that could harm the child while shaking. Prevent the child from falling. If the child is not breathing, perform rescue breathing. If breathing, lay the child on his/her side. Let the seizure run its course; it will stop.

Do not restrain the child in an effort to stop the shaking. Do not put any objects in the child's mouth.

FOR A CHILD WHO IS BADLY BURNED

The skin will change color, either become red, or pale or charred. The skin may or may not have blisters.

Place a clean, cool cloth gently over the burn, then cover the child with a clean sheet and blanket for warmth.

Do not put ice, butter, or any cream or ointment on the burn.

FOR A CHILD WHO EATS OR DRINKS SOMETHING POISONOUS

Either the child will become ill or change his/her behavior, or in many cases you will find out the child ate or drank something and he or she looks fine.

Treat any serious emergency if it is present. Example: seizure, unconsciousness, breathing difficulties. Call 911 immediately if the child has no symptoms, call The Poison Control Center immediately.

Do not leave medications or substances that your child swallowed at home. Do not give your child anything to make him/her vomit unless advised to do so by the Poison Control Center.

FOR A CHILD WHO IS CHOKING

The child will not be able to cough or make a sound.

If the child can cough or make any sound do nothing until help arrives. If the child cannot make any sound, follow the steps on the other side of the Broselow-Luten Emergency Tape.

If the child can make any sound do not let him/her on the back to try to stop the choking.

FOR A CHILD WHO IS NOT BREATHING

The child will not be breathing and his/her may be pale, gray or even blue.

If you know how, do rescue breathing and chest compressions (CPR). The right way to do this for infants, children, and adults is shown on the other side of the Broselow-Luten Emergency Tape. If you are alone, get help after about a minute, even if you have to stop briefly to do so.

Do not get help first if you are alone.

FOR A CHILD WHO IS BILLY HURT IN A FALL OR CLIMB

Sometimes, but not always, a bone may look out of place.

Keep the child still. Gently cover the child with a light blanket or clothing for warmth.

Do not move the child, even if the child is hurt or in an awkward position, unless the child will be in further danger by staying in place.

FOR A CHILD WHO IS HAVING DIFFICULTY BREATHING

Your child will have difficulty breathing — his/her chest will rise and fall and his/her will appear anxious.

Allow your child to assume the position he/she desires. Get help immediately.

Do not initiate choking relief maneuvers if your child can talk or cough. Do not force your child to lie down.

FOR A CHILD WHO IS UNCONSCIOUS

The child will appear to be asleep but you will be unable to arouse him/her.

Get help! Keep the child lying down, elevate legs, if possible, 6-12 inches. If he/she vomits turn his/her head to the side or roll the child on his/her side.

Do not move the child unless necessary. Do not attempt to give him/her anything to drink.

Call 911 or your local
Emergency Number.
Poison Control Center
Pediatrician or Family Doctor
Fire
Police
(Complete List In Manual)

Newborn

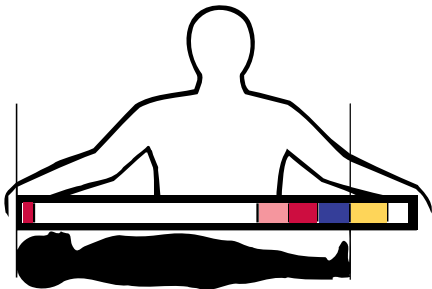
Pink (13-16 lbs.)

Red (17-21 lbs.)

Purple (22-25 lbs.)

Yellow (26-32 lbs.)

White (33-40 lbs.)



BROSELOW-LUTEN EMERGENCY TAPE

AN IMMEDIATE REFERENCE FOR CHOKING EMERGENCIES, FIRST AID AND CPR IN INFANTS AND CHILDREN

This Tape also allows you to determine your child's weight and emergency color, information which may be useful when calling your poison control center or emergency number.

This tape is not a substitute for an approved CPR course. Learn CPR. Take an approved course today.

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