How to Do Basic First Aid

User Reviewed

Four Methods: Performing the Three Cs Caring for an Unconscious Person Treating Common Problems In First Aid Scenarios

Treating Rarer Cases in First Aid Scenarios

Basic first aid refers to the initial process of assessing and addressing the needs of someone who has been injured or is in physiological distress due to choking, a heart attack, allergic reactions, drugs or other medical emergencies. Basic first aid allows you to quickly determine a person's physical condition and the correct course of treatment. You should always seek professional medical help as soon as you are able, but following correct first aid procedures can be the difference between life and death. Follow our entire tutorial, or find specific advice by checking out the sections listed above.

Method 1

Performing the Three Cs

- **Check the surroundings.** Evaluate the situation. Are there things that might put you at risk of harm? Are you or the victim threatened by fire, toxic smoke or gasses, an unstable building, live electrical wires or other dangerous scenario? Do not rush into a situation where you could end up as a victim yourself.^[1]
 - If approaching the victim will endanger your life, seek professional help immediately; they have higher levels of training and know how to handle these situations. First aid becomes useless if you can't safely perform it without hurting yourself.
- **2** Call for help. Call authorities or emergency services immediately if you believe someone to be seriously injured. If you are the only person on the scene, try to establish breathing in the patient before calling for help. Do not leave the victim alone for an extensive amount of time.
- **3** Care for the person. Caring for someone who has just gone through serious trauma includes both physical treatment and emotional support. Remember to stay calm and try to be reassuring; let the person know that help is on its way and that everything will be alright.

Method 2

Caring for an Unconscious Person

- **Determine responsiveness.** If a person is unconscious, try to rouse them by gently tickling their bare hands and feet or by speaking to them. If they do not respond to activity, sound, touch, or other stimulation, determine whether they are breathing.
- **2** Check for breathing and a pulse. [2] If unconscious and unable to be roused, check for breathing: look for a rise in the chest area; listen for the sound of air coming in and out; feel for air using the side of your face. If no signs of breathing are apparent, check for a pulse.
- **1** If the person remains unresponsive, prep for CPR. Unless you suspect a spinal injury, carefully roll them onto their back and open their airway. [3] If you suspect a spinal injury, leave the person where they are, provided they are breathing. If the person begins to vomit, move them over to their side to help prevent choking. [4]
 - Keep the head and neck aligned.
 - Carefully roll them onto their back while holding their head.
 - Open the airway by lifting the chin.
- **Perform 30 chest compressions and two rescue breaths as part of CPR.** In the center of the chest, just below an imaginary line running between the nipples, put your two hands together and compress the chest down approximately 2 inches (5.1 cm) at a rate of 100 compressions per minute. After 30 compressions, give two rescue

1 of 5

breaths and check vitals. If the breaths are blocked, reposition the airway. Make sure the head is tilted slightly back and the tongue is not obstructing it. Continue this cycle of 30 chest compressions and two rescue breaths until someone else relieves you.^[5]

- **5** Remember your ABCs of CPR. The ABCs of CPR refer to the three critical things you need to look for. [3] Check these three things frequently as you give the person first aid CPR.
 - Airway. Does the person have an unobstructed airway?
 - · Breathing. Is the person breathing?
 - Circulation. Does the person show a pulse at major pulse points (wrist, carotid artery, groin)?
- Make sure the person is warm as you wait for medical help. Drape a towel or a blanket over the person if you have one; if you don't remove some of your own clothing (such as your coat or jacket) and use it as a cover until medical help arrives. However if the person has a heatstroke, do not cover him or keep him warm. Instead try to cool him by fanning him and damping him.
- Pay attention to a list of don'ts. As you administer first aid, be sure to be aware of these things that you should not do in any case:
 - Do not feed or hydrate an unconscious person. This could cause choking and possible asphyxiation.
 - Do not leave the person alone. Unless you absolutely need to signal or call for help, stay with the person at all times.
 - Do not prop up an unconscious person's head with a pillow.
 - Do not slap or splash with water an unconscious person's face. These are movie gimmicks.

Method 3

Treating Common Problems In First Aid Scenarios

- Protect yourself from bloodborne pathogens. Bloodborne pathogens can threaten your health and wellbeing by causing sickness and disease. If you have a first aid kit, sanitize your hands and put on sterile gloves. If sterile gloves and sanitizer are not available, protect your hands with extra gauze or cotton. Avoid direct contact with the other person's blood. If you do end up making contact, make sure to clean yourself off as soon as possible. Eliminate any remaining sources of contamination.
- 2 Stop the bleeding first. After you have established that the victim is breathing and has a pulse, your next priority should be to control any bleeding. Control of bleeding is one of the most important things you can do to save a trauma victim. Use direct pressure on a wound before trying any other method of managing bleeding. Read the linked article for more detailed steps you can take.
 - Treat a bullet wound. Bullet wounds are serious and unpredictable. Read on for special considerations when treating someone who has suffered a gunshot wound.
- Treat shock next. Shock, often caused a loss of blood flow to the body, frequently follows physical and occasionally psychological trauma. A person in shock will frequently have cool, clammy skin, be agitated or have an altered mental status, and have pale color to the skin around the face and lips. Untreated, shock can be fatal. Anyone who has suffered a severe injury or life-threatening situation is at risk for shock.
- Provide first aid for a broken bone. A broken bone, however common, can be treated with the following steps:
 - Immobilize the area. Make sure that the broken bone doesn't have to move or support any other body parts.
 - Numb the pain. Often, this can be done with an ice-pack covered by a towel.
 - Make a splint. A bundle of newspapers and sturdy tape will do just the trick. A broken finger, for example, can
 also use another finger as a stabilizing splint.
 - Make a sling, if necessary. Tie a shirt or a pillowcase around a broken arm and then around the shoulder.
- **Help a choking victim.** Choking can cause death or permanent brain damage within minutes. Read this article for ways to help a choking victim. The article addresses helping both children and adult choking victims.

2 of 5 1/10/2017 2:06 PM

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- One of the ways to help a choking victim is the Heimlich maneuver. The Heimlich maneuver is performed by straddling the victim from behind and bear-hugging them with your hands interlocked above their belly-button but beneath their breastbone. Thrust upward to expel air from the lungs and repeat until you are successful in clearing the object from the windpipe.
- **6** Learn how to treat a burn. Treat first- and second-degree burns by immersing or flushing with cool water (no ice). Don't use creams, butter or other ointments, and do not pop blisters. Third degree burns should be covered with a damp cloth. Remove clothing and jewelry from the burn, but do not try to remove charred clothing that is stuck to burns.
- **T** Look out for a concussion. If the victim has suffered a blow to the head, look for signs of concussion. Common symptoms include:
 - · Loss of consciousness following the injury
 - · Disorientation or memory impairment
 - Vertigo
 - Nausea
 - · Lethargy.
- **Treat a Spinal Injury Victim.** If you suspect a spinal injury, it is especially critical that you not move the victim's head, neck or back *unless they are in immediate danger*. You also need to take special care when performing rescue breathing or CPR. Read this article to learn what to do.

Method 4

Treating Rarer Cases in First Aid Scenarios

- **Help someone who is having a seizure.** Seizures can be scary things for people who've never experienced them before. Luckily, helping people with seizures is relatively straightforward.
 - Clear the surroundings to protect the person from hurting themselves.^[6]
 - Activate emergency medical services if the seizure lasts more than 5 minutes or if the person is not breathing
 afterwards.
 - After the episode has ended, help them to the floor and and put something soft or flat under their head. Turn them onto their side to ease breathing, but **do not** hold the person down or try to stop their movements.
 - . Be friendly and reassuring as their consciousness returns and do not offer food or water until fully alert.
- **Help someone survive a heart attack.** It helps to know the symptoms of heart attack, which include rapid heartbeat, pressure or pain in the chest, and general unease or nausea. Rush the person to the hospital immediately while giving them an aspirin or a nitroglycerin, which the person should chew.
- 3 Identify someone having a stroke. Again, knowing the symptoms of stroke is important. They include temporary inability to talk or understand what is being said; confusion; loss of balance or dizziness; and severe headache with no precursor, among others. Rush a person you suspect has had a stroke to the emergency room immediately.
- **Treat poisoning.** Poisoning can occur as a result of natural toxins (i.e. snake bite) or chemical combinations. If an animal may be responsible for poisoning, try to (safely) kill it, bag it, and bring it with you to poison control.

Community Q&A

With loes CPR stand for?

CPR = Cardio Pulmonary Resuscitation.

Donas DeMuro,
M.D.

Flag as duplicate

Chat with this expert

3 of 5 1/10/2017 2:06 PM

Why shou	ıldn't you slap or throw water in an unconscious person's face?				
wikiHow Contributor	Such a method is actually a movie gimmick and has a low chance of waking up the victim could increase their sensitivity to cold, which could lead to hypothermia.	but if the vi	ctim is	s cold, it	
	Flag as duplicate	Not Helpful	4	Helpful	40
How do I t	treat a snake bite if you am a child all alone?				
wikiHow Contributor	First make sure you stay calm, because panicking can cause the blood to move through your body faster and the poison will spread. Call 911. Then, find a piece of clothing and tie it tightly directly above the place where you were bitten. Go and wash the bite with only warm water and no soap, and then wait for medical attention.				
	Flag as duplicate	Not Helpful	2	Helpful	26
How can I remove water from a drowned person?					
First, check to see if the person is breathing. Place your ear next to his mouth to listen for breathing. Look at the chest to see if it is rising and falling due to breathing. If you cannot see or hear breathing, check the person's pulse. Place your two first fingers on the wrist or neck to find a pulse. Hold there for 10 seconds. If you cannot detect a pulse, begin CPR. Place the heel of your hand in the center of the person's chest, in line with the nipples. Make sure not to press on the ribs. Begin chest compression by pressing down at the rate of at least 100 pulses per minute. Complete 30 compressions, and allow several seconds between pulses to allow the chest to rise. Check for breathing. If the person is not breathing, start CPR again. It is a good idea to take CPR classes through your local Red Cross so that you can practice this technique. Rot Helpful 5 Helpful 31					
What if th	e person I am trying to help wouldn't want me to touch her chest?				
wikiHow	It is more important to save the person's life than to worry about touching her chest if you		g first 8		20
Contributor	Flag as duplicate	Not Helpful	0	Helpful	20
HOW GO I	get rid of a nose bleed?				
Keep the person quiet. Walking, talking, and blowing the nose will increase the bleeding. Sit down and lean forward. Do not lean back, as the blood may flow down your throat and cause you to choke. Press on the bleeding nostril with a clean cloth/tissue. Keep the pressure on the nose for about 15 minutes.					
	Flag as duplicate	Not Helpful	0	Helpful	0
Can you answer these readers' questions?					
On How to Find Out if Someone Has a Life Insurance Policy, a reader asks:					
How can I find out if someone has taken out a life insurance policy on a relative?					
	Your answer			Rej	oly
On How to Transfer Photos from iPhone to Mac , a reader asks:					
	I am unable to transfer videos or photos from my iPhone to i that my device is locked, what should I do?	Photo. I g	et a	messa	ge
	Your answer			Rep	oly
On How to Create an Account on Ask.Fm , a reader asks:					
	Every time I sign up I get an error message saying my passv should I do?	word is ind	orre	ct. Wha	at
	Vour answer			D	

4 of 5

Tips

- If possible, use latex gloves or other barriers to protect yourself from others' bodily fluids.
- As much as this article can cover, you will only learn so much from reading steps on how to do this. As such, try to find training in first aid and/or CPR if at all possible this gives you, the reader, the ability to learn hands-on exactly how to bind fractures and dislocations, bandage moderate to severe wounds, and even perform CPR, and you will find yourself better prepared for treating those in need after the training. In addition, these certifications also protect you in the event of legal action while Good Samaritan laws will protect you in these cases, certifications simply bolster this.
- If a person is impaled on an object, do not remove it unless it is obstructing an airway. Removing the object is likely to cause additional injuries and increase the severity of bleeding. Avoid moving the person. If you *must* move them, you may shorten and secure the object.^[3]

Warnings

- · Moving someone with spinal cord damage may increase the likelihood of paralysis or death.
- Do not move the person. It could harm them even more; unless they are in immediate danger. Wait for the ambulance to arrive to take over treatment of the person.
- Never try to reset a broken or dislocated bone. Remember, this is first aid if you are doing this, you are preparing a
 patient for transport. Unless you are 110% sure of what you are doing, resetting a dislocation or broken bone runs a strong
 risk of making things worse.
- Never, ever put yourself in danger! As much as this seems to lack compassion, remember that being a hero, in this case, means nothing if you come back dead.
- Do not touch someone who is being shocked by an electrical current. Turn off the power or use a piece of non-conductive
 material (e.g., wood, dry rope, dry clothing) to separate him from the power source before touching him.
- It is dangerous to give aspirin to anyone under the age of 16 as it can cause potentially fatal damage to the brain and liver before this age.
- If you aren't sure what to do, leave it to the professionals. If it's not a life-critical injury, doing the wrong thing can endanger the patient. See the note about training, up above in tips.
- Before touching a victim or rendering any aid, get consent to treat! Check the laws in your area. Rendering aid without consent may lead to legal action. If someone has a "Do not resuscitate" order, respect it (only if you see proof). If the person is unconscious and at risk of death or injury, without any known "Do not resuscitate" order, go ahead and treat by implied consent. If consciousness is not yet known, tap them on the shoulder and say "Sir/Ma'am, are you alright? I know how to help you." before proceeding to render first aid.

Sources and Citations

- 1. http://www.ready.wv.gov/during/Pages/BasicFirstAid.aspx
- 2. http://www.nlm.nih.gov/medlineplus/ency/article/000022.htm
- 3. ↑ 3.03.13.2 Survival, Evasion and Recovery U.S. Military Field Manual FM 21-76-1 (1999)

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5 of 5 1/10/2017 2:06 PM