

First aid for parents

Brought to you by Savlon. Created with First Aid Brigade's founder Anna Webb

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Savlon Antiseptic Cream to cleanse and help prevent infection. Savlon Dual Action Gel and Savlon Bites & Stings Pain Relief Gel (12+ years) are indicated for topical relief of pain, itching, irritation and antiseptic protection for use on bites, stings and skin reactions. Always read the label.



Welcome!

We want to champion the spirit of adventure in all children and help you to treat the inevitable bumps and scrapes that happen along the way, so that's why we've created this handy guide with the First Aid Brigade's Anna Webb, to help you tackle the basics of children's first aid with confidence and care.

This guide covers the basics of common childhood mishaps, such as: **Cuts and grazes, Burns, Choking and Treating an unconscious child.**

Anna Webb is a qualified first aid instructor with over 4 years of teaching experience. She started The First Aid Brigade to encourage people to learn skills that could save the life of a loved one or even a stranger. Anna is a mother of three and also works for an airline!



Annais TOP TIP

Keep this guide in an easily accessible place, ideally with your first aid kit, so you can quickly refer to it when tending to your child's first aid needs.

Before we get started, let's go back to the very beginning...

Remember, first aid is all about the 3 P's:

Preserving life

Preventing the situation from getting worse
 3 Promoting recovery

Whether you're tackling a particularly tricky splinter, or something more serious, remember these four top tips to help you on your way

Try and stay calm

This is always easier said than done, especially if it's a family member that needs help, but take a moment for a few big breaths before getting started to help you focus and steady your nerves.

Note the time

A small but important tip, always try and note the time that an incident occurs as it could be really important down the line, particularly if the casualty is bleeding, having a seizure or is falling unconscious.

Make sure you have the right supplies

It's really important to invest in a first aid kit with products that meet your family's needs. Make sure you check the use-by dates from time to time, you don't want to find yourself in a situation where you have the products but can't use them! Reference our first aid checklist if you're not sure what you need.

Note down important details

There is a handy section in the back of this booklet where you can fill in all the important names, numbers and information that you may need to reach for in an emergency. This might include your doctor's name and telephone number, as well as any medications that family members take.

First aid checklist

A basic first aid kit for your little one, may contain:

- Plasters in a variety of different sizes and shapes
- Small, medium and large sterile gauze dressings
- < At least 2 sterile eye dressings
- Triangular bandages
- Crêpe rolled bandages
- Safety pins
- Disposable sterile gloves
- Tweezers
- Scissors
- Alcohol-free cleansing wipes
- 🗸 Sticky tape
- Thermometer (preferably digital)



Hand sanitiser

- 🗸 Skin rash cream, such as hydrocortisone or calendula
- 🗸 Cream or spray to relieve insect bites and stings
- Antiseptic cream, such as Savlon Antiseptic Cream
- Painkillers such as paracetamol (or infant paracetamol for children), aspirin (not to be given to children under 16), or ibuprofen
- Cough medicine
- < Antihistamine cream or tablets
- Distilled water for cleaning wounds
- Eye wash and eye bath
- < A small mirror

Cuts and grazes

We believe that skin is for living in and that bumps and grazes are all part of your child's little adventures.

Though treating your child's first cut or graze might be upsetting, unfortunately, as your child begins to explore the world around them, the odd cut or graze is to be expected so you will soon get used to treating them. If your little one comes to you with a bump or graze, follow the next 5 steps to treat it:

1. Clean the wound thoroughly

It is important to clean the wound to make sure that there isn't anything in it that could cause the wound to become infected. You can clean a wound by rinsing it under running water, using a sterile wipe.

2. Dry the wound properly

Pat the wound dry using a gauze swab and cover it with sterile gauze. If you don't have these, use a clean, non-fluffy cloth, like a tea towel.

3. Stem bleeding by raising the cut above the heart

For a deep cut, raise and support the injured part above the level of the heart. Avoid touching the wound.

4. Remove the cloth or gauze covering the wound and apply a sterile dressing or a large plaster.

You can also use an antiseptic cream to help soothe your child and ensure that the wound is properly clean and to reduce the risk of infection.

5. Seek medical help if:

- A wound won't stop bleeding
- A foreign object is embedded in the wound – like a splinter of wood or glass
- The wound is from a human or animal bite
- You think the wound might be infected
- You are unsure whether the casualty has been immunised against tetanus.



Though burns and scalds are less common in very young children as they tend to not be in the kitchen, cooking in the way that adults do, accidents happen.

If your child gets a burn, follow the next three steps to treat it:

1. Cool the burn under cool running water for at least ten minutes.

Cooling the burn will reduce pain, swelling and the risk of scarring. The faster and longer a burn is cooled with cold running water, the less the impact of the injury.

2. After the burn has been cooled, cover it with cling film or a CLEAN plastic sandwich bag.

This helps prevent infection by keeping the area clean. Cling film or plastic won't stick to the burn and will reduce pain by keeping air from the skin's surface. If you have to go to hospital, it will also assist medical staff to look at the burn clearly without having to remove bandages or plasters which may stick to and have left debris within the burn.

3. Call 999.

If you can't call 999, get someone else to do it. The burn may need urgent medical treatment.

Always seek medical advice for a baby or child who has been burned.

Visit our 'How to treat burns & scalds at home' guide on our website for more in depth information.

Burns FAQs 1

Why is cooling the burn important?

Cooling the burn is important because it helps reduce pain and lowers the risk of long-term scarring.

Can I use a shower or cold bath to cool a burn?

A shower is a good way of flooding the burn with cold water to help the cooling. Focus the water on the site of the burn rather than the whole limb or body.

The water should be cold and at low pressure. Avoid putting their whole body under a cold shower or in a cold bath as it could induce hypothermia.

Should I cool the burn for ten minutes first or should I go straight to hospital?

Cool the burn under cold running water immediately and for at least ten minutes.

If you think the burn is severe enough for medical assistance, call 999 while you are cooling the burn. Continue to cool the burn until the ambulance arrives.

If clothes are stuck to the burn, should I try to remove them?

No, don't try to remove anything that is stuck to the burn as it may cause more damage. You can remove clothing that is near the burn but not stuck to it.



Anna's' top tip: Keep a tube of Savlon Advanced Healing Gel handy if you need to apply it to a burn.

Burns FAQs 2

What should I do if the burn is still painful after I have cooled it for ten minutes and covered it with cling film?

Burns will often be painful even after cooling them. You can give an appropriate dose of painkillers (paracetamol-based syrup) and reassure them to help them remain calm.

Applying a soothing gel such as the Savlon Advanced Healing Gel will also help.

Always seek medical advice for a baby or child who has been burned.

How do I know when to go to hospital?

If a baby or child has been burnt, seek medical advice, making sure you cool their burn for at least 10 minutes first.

Even small burns can be potentially life-threatening to a baby or child, so always seek medical advice by calling 111 or 999 if you think the burn is serious enough.

Annais TOP TIP

Next time you're at the shops, let your child choose some plasters with their favourite superhero on them. If your child is particularly upset by the accident, try to distract them for the injury by getting them to choose their favourite plaster. You could also apply the Savlon Advanced Healing Gel to speed up the healing process and reduce the risk of scarring.

Choking in children over 1 years old

Young children will often put objects in their mouth, as it's their natural way of exploring the world around them.

You should always keep small objects such as buttons, coins or batteries out of reach of children but sometimes, it doesn't matter how careful you are, small enquiring hands will find something that they shouldn't and swallow it. If you suspect that your child is choking, follow the next three steps in order:

1. Give up to five back blows: hit them firmly on their back between the shoulder blades.

If back blows do not dislodge the object, move on to step 2.

Back blows create a strong vibration and pressure in the airway, which is often enough to dislodge the blockage.

Dislodging the blockage will allow them to breathe again.

2. Give up to five abdominal thrusts: hold the child around the waist and pull inwards and upwards above their belly button.

Abdominal thrusts squeeze the air out of the lungs and may dislodge the blockage.

3. Call 999 if the blockage does not dislodge.

Continue with cycles of back blows and abdominal thrusts until the blockage dislodges, help arrives or the child becomes unresponsive. If you can't call 999, get someone else to do it.

Choking FAQs 1

How hard should the back blows be?

You should change the force of the back blows depending on the size of the child. Be much gentler with a smaller child than with a larger child. The force you use to deliver the back blows should also be relative to your own strength. The back blows need to be hard enough to dislodge the blockage.

How will I know that the blockage has definitely cleared?

On most occasions, you will see it coming out of their mouth and the child will start to breathe again. You can also ask them if they are feeling better and they will let you know whether the blockage has cleared or not.

Is it a good idea to give a choking child a glass of water or something to eat?

No, it's not a good idea as it will not dislodge the blockage and may make the situation worse by causing a further blockage.

What happens if the blockage goes down into the lung rather than coming out of the mouth? This can be dealt with in hospital. It's not ideal, but the important thing is that the airway is clear so the child can breathe again.

Annais TOP TIP

If your child is regularly putting things in their mouth, they could be teething. If they are of teething age, encourage them to chew on sensory toys designed to help with the pain and distract them from chewing other objects that could be dangerous.

Choking FAQs 2

Should I try to pull the object out with my fingers?

Do not put your fingers into their mouth if you cannot see an object. You risk pushing any blockage further down or damaging the back of the throat, which could swell and cause further harm.

However, if you can clearly see an object in a child's mouth and you are able to pluck it out safely with your fingertips, you could do so.

What should I do if a child becomes unconscious and stops breathing?

If a child becomes unconscious and stops breathing normally or stops breathing completely you will need to begin CPR.

If a child is choking, should I hold them upside down by their feet?

No, this is not effective.

You may cause further injury if you happen to drop them.

The action of tipping them upside down may also move the object further down their throat.

Discovery of an UNCONSCIOUS Child who is breathing

If a child is not moving and does not respond when you call them or gently shake their shoulders, they are unresponsive.

This can be very scary but do your best to stay calm and call 999. Whilst you wait for an ambulance, follow the next important three steps:

1. Check their breathing by tilting their head back and looking and feeling for normal breathing.

- Tilting the child's head back opens their airway by pulling the tongue forward.
- If they are breathing normally, you will see their chest moving and you may hear their breath or feel it on your cheek.
- If they are breathing normally, move on to step two.
- Remember we don't want to hear any gasping, gurgling or rasping sounds, this is not NORMAL BREATHING.

2. Move them onto their side and tilt their head back.

- Putting them on their side with their head tilted back helps keep the airway open. It ensures their tongue falls forward and any fluid drains out.
- This will help the child to continue to breathe.
- Do ensure you stay with them and continue to monitor their breathing as things can change quickly.

3. Call 999 immediately.

- If you can't call 999, get someone else to do it.
- While waiting for the ambulance, talk to the child and reassure them. Make sure their head remains tilted back.

Discovery of an UNCONSCIOUS Child who is not breathing

1. Check for breathing by tilting their head back and looking and feeling for breaths.

- Tilting the child's head back opens the airway by pulling the tongue forward.
- If they are not breathing, their chest and stomach will not be moving and you will not hear or feel their breaths.
- If they are not breathing or you hear or see ABNORMAL breathing move on to step two.

2. Tell someone to call 999.

 If you are on your own, call 999 after you've spent one minute giving them rescue breaths and chest compressions.

3. Give five initial rescue breaths.

- Pinch the soft part of the nose closed, allowing the mouth to fall open.
- With the head still tilted, take a breath and put your mouth around the child's, to make a seal.
- Blow into their mouth gently and steadily for up to one second, until the chest rises.
- Remove your mouth and watch the chest fall.
- That's one rescue breath.
 Do this five times.
- By blowing into their mouth you are topping up the oxygen levels in their blood. The oxygen you give them helps to keep their organs alive.

Continued on next page...



If you aren't sure if the child is breathing, grab a small hand mirror and place it in front of the mouth. If the mirror fogs up, they are breathing.

Discovery of an UNCONSCIOUS Child who is not breathing

4. You will then need to give 30 chest compressions.

- Kneel by the child and put one hand in the centre of the child's chest.
- Push down a third of the depth of the chest.
- Release the pressure allowing the chest to come back up.
- Repeat this 30 times at a rate of 100 to 120 compressions per minute.
- The beat of the song 'Nellie the Elephant' can help you keep the right rate.
- By doing these chest compressions you are acting as the heart by keeping blood pumping around their body, helping keep the vital organs alive, including the brain. If you are small or the child is large, you may need to use two hands.

5. After 30 compressions, open the airway and give two breaths.

- Keep alternating 30 compressions with two breaths (30:2) until:
- Emergency help arrives and takes over
- The child starts showing signs of life and starts to breathe normally
- A defibrillator is ready to be used.

Visit our website for more in depth information. www.savlon.co.uk