

First Aid On your Vessel

Disclaimer: This information does not take the place of advice from your health care provider. All this information can be found on the internet as well. Use this information for simplicity's sake and seek medical attention for any medical problems you may endure while on your vessel. **For any situation that you cannot resolve quickly, engage EMS - Phone 911 or VHF Ch 16.**

Fall Prevention

Wear either skid socks or boat shoes while walking around on your boat. DO NOT walk in socks- they can be very slippery, and you can fall overboard! The boater's adage: "always keep one hand for the boat and one for you (hold onto immovable object with one hand).

Sprains/ Fractures of Extremities

Items needed: ACE wrap, few magazines-easy to roll, duct tape, bedsheet, non- down feather pillow

Magazines and pillows can be used to immobilize an injured arm or leg. If you need to leave the vessel to a dinghy, consider the magazine over the use of a pillow since the pillow can take on water. If you suspect a fracture, place the extremity in the normal position before immobilizing it. If you suspect a shoulder fracture, use the bedsheet to immobilize the arm against the body, (we will demonstrate this process) For an ankle fracture, a magazine wrapped around works great. If it is an open fracture (bone is exposed), stop the bleed before splinting.

Toes/fingers: if suspected to be fractured, tape the injured toe/finger to the one next to it keeping the digits in neutral position. Check that the toe or finger is warm to touch and the person can move it.

Hatch slamming on a fingernail: if the nail bed becomes black and blue, pressure can build up under the nail; Use a sterilized pin to alleviate the pressure and remove the fluid.

Application of ACE wrap

ACE wraps are used to reduce swelling of an extremity and to immobilize it.

Items needed: 4-inch ACE wraps (2 rolls), bandage tape

The goal is to start at the foot or hand and spiral up the extremity. You can use tape or the clips that come with the ACE wrap to secure it at the end. Check that the fingers/ toes are warm indicating that the ACE wrap is not too tight. Check for a pulse on the top of the foot, and if you cannot feel it, the ACE is too tight, and you would need to loosen it a little. ACE - should we add pulse check, motor (move fingers/toes), sense to warm?

Wound Care

Items needed: soap and water, or saline wound wash, steri-strips, Dermabond (or crazy glue, Gorilla glue), non-stick dressings, gauze, Kling/Kerlex wrap and paper tape

Wash your hands for 20 seconds before touching a wound. If you prefer to wear gloves, have a box of vinyl gloves you can buy in any store. You still should wash your hands before and after taking care of a wound.

Laceration: The idea is to push the edges of the wound together and then apply either steri-strips, crazy glue or Dermabond. Cover the laceration with a non-stick dressing and Kling wrap then tape.

Wound: cleanse the wound with soap and water, apply antibiotic ointment to the Band aid NOT directly to the wound so as to not contaminate your ointment, and then apply the band aid to the wound.

Burn: First degree sunburn – use Aloe or other lotions

Second degree burn: blisters are present- apply a cold cloth and do not break the blisters. If possible, treat this burn with bacitracin/ cover with a non-stick dressing and Kling wrap. Motrin works well for pain but take with food to avoid stomach upset.

Third degree burn: they are deep burns that look white and are deep enough that they do not hurt. These burns need medical attention especially if they cover a large body surface area. Treat like you would a second degree burn but get medical attention as soon as you can.

Jellyfish Sting: take a warm shower for 20 minutes minimum until the pain stops; apply 1% hydrocortisone cream or ointment to the affected area.

Eye Injuries pain/chemical burns

Needed: saline bottle or eye wash. Contact lens solution works well. +/- eye patch, tape

If you have any chemical sprayed into eye by accident the key is irrigation, irrigation, irrigation! Saline wash works best like contact lens solution. Have your partner identify the chemical, as alkaline substances are worse than acids. You can never irrigate too much. If your vision returns to normal after most of the redness is gone you should be fine. If not seek medical attention as the chemical may have burned your cornea and will need antibiotics and an eye exam.

If you scratch your eye, most superficial corneal abrasions will heal overnight. If your vision is affected you should seek attention as soon as you can.

Any major eye wounds that severely affect vision should be evaluated immediately.

Seasickness remedies: Dramamine, scopolamine patch, bracelets

Back pain/ muscle strain: Rest, give an anti-inflammatory such as Motrin or Advil (if not contraindicated for the person who may be on blood thinners, like Plavix); application of a heating pad and or ice to the affected area, mild stretching

Excessive Bleeding

Items needed: Quick Clot, absorbent pads like sanitary pads, bladder incontinent pads, Dermabond, ace wrap to cover padding.

The most important thing to remember is that pressure can slow down bleeding. You can use sheets, towels and ice to reduce a bleed. Elevate area of wound as much as possible.

When to use a Tourniquet:

Tourniquets are only meant to “buy time” from excessive arterial bleeding. If a person is bleeding uncontrollably and help is not nearby, they may bleed out before first responders can get there to provide necessary medical care, which is in a matter of minutes. First, call 911 for emergency care.

If you apply pressure to an extremity and the bleeding does not stop, and the dressing becomes soaked with blood you will need to apply a tourniquet.

How to Apply a Tourniquet:

Place a tourniquet at least 2-3 inches above the wound. It can be secured over clothing, and /or above a joint, such as an elbow. A tourniquet has a maximum application time of 2 hours. Once applied, write the time on the person’s extremity so emergency personnel knows this. If you do not have a tourniquet, a belt is the next option. You can purchase a tourniquet with a windlass on line to carry on your boat. A belt or a bandana can be used instead of a tourniquet.

Tourniquets are not to be released by anyone but the Emergency Room staff.

Amputation

If an amputation of a finger or toe occurs, wrap the digit in a cool cloth and DO NOT submerge it in ice. Treat the wound on the hand or foot just like any wound. Bring the amputated part with you to the ER for medical attention.

Nosebleed

Items needed: Afrin, cotton balls, quick clot

NEVER put your head back when you have a nosebleed- bend the neck forward and pinch the bridge of the nose right above the tip of the nose. If the bleeding does not stop, you can use Afrin on cotton ball and place in the nostril (beware- it will raise blood pressure) or cut off a piece of Quick Clot and place it in the bleeding nostril. Avoid any hot drinks until bleeding stops.

Concussion/head injury

If the person has a minor head trauma, (such as hitting their head on a closed window) and the person has loss of consciousness of less than a few seconds plus is acting normally, there is no reason to seek immediate attention. Use a flashlight (or your phone light) to check the pupils for equal size and that they react to the light.

The person can take short naps but check frequently for the ability to wake him up.

If the person has loss of consciousness for more than 5 minutes and is not acting normally, go to the marina and seek medical attention.

If the person takes any blood thinners (Plavix, Xarelto, Eliquis, etc.,) consider a minor head injury/ trauma as more serious. So, you should seek medical attention right away.

Seizure (most likely after a head injury), stay with the person, check that they are breathing, surround with cushions to protect extremities

Cardiac Event

If anyone has chest pain, nausea, with sweats, pain radiation up into the neck or down the arm, it could be cardiac-related. Give Aspirin 325mg which can be chewed, and check blood pressure while lying down. Then call "May Day" by hitting the red button on the radio if afloat and 911 if on land.

CPR

Your shipmate has passed out and appears lifeless.

First Call for Help on your radio by hitting the red emergency button. "May Day, May Day" give the name of your boat and your emergency. Have boat coordinates ready. Put the boat in neutral, and if someone is with you, anchor the boat.

Place the person on the floor on a hard surface.

Kneel down next to the person. (Look, Listen, and Feel) Look to see if the chest is rising and falling, do you feel breath on your cheek? touch the chest for the rise and fall. Feel for a pulse on either side of the trachea (carotid artery).

Chest compressions are the most important thing to do. If the person is breathing, DO NOT

GIVE BREATHS; do chest compressions only. While at the person's side, interlock your fingers placing them over mid-chest (nipple line). If you need to rip person's shirt open to see landmarks, do so.

Do compressions at about 100 times a minute (rhythm is 1 and 2 and 3 and, etc) at 1/3 depth of the person's chest height. You can do two quick breaths every 30 compressions by tilting the head back and opening the mouth= only if you have established that the person is not breathing now. Watch the chest rise and fall, then go back to the compressions. Do not interrupt the chest compressions for more than 10 seconds.

If an AED is available, and you are alone, finish the chest compressions and two quick breaths, then hook up the AED to guide you about whether the person needs to be shocked. Check the pulse in the neck every two minutes.

See the attached YouTube video for how to do CPR:

<https://www.youtube.com/watch?v=Cw1UeIkQ7bg>

Apply an AED every 2 minutes (after 30 compressions and 2 breaths) until a spontaneous pulse is attained.

Passing out/ fainting

Lay the person down with the legs elevated. Take blood pressure if you have a blood pressure cuff. Consider the reason why the person fainted. If it was from lack of fluids, give water or juice. If you suspect a cardiac event, then follow the instructions above under "Cardiac Event." Check the person's pulse on the inside of the wrist; consider placing a fitbit watch on the person so you can easily monitor pulse, and oxygen level.

Choking

If someone seems to be choking on food, ask them "are you choking?" If they nod "yes" then perform the Heimlich Maneuver:

Either stand behind the person (if they are standing), or if they are lying down, straddle over them with your knees bent. (We will demonstrate this.)

Below is a YouTube you can watch of how to do the Heimlich Maneuver:

<https://www.youtube.com/watch?v=7CgtlgSyAiU&t>

Life Vac Device: Portable anti-choking device for adults and children. Can be purchased online for 69.00. Mask is placed on the base of the device that looks like a plunger. **Place** the mask on the person's face, **push** the plunger in, then **pull** it out to dislodge the food item.

Personal Medical Information

Have each family or crew member's health documentation on hand in a conspicuous place (on fridge) for first responders. A good method of providing this is made available by <https://www.vialoflife.com>.

For \$5 you can get a medical information sheet (photocopiable) and two Vial of Life decals (home and boat). The form covers medical history, medications, emergency contacts, and the decal is distinctive to show through a Ziplock bag placed on the fridge with a magnet.

We also include a copy of our most recent normal EKG's for comparison with one they'll perform in the ambulance or ER.

What to have on your Dinghy:

Whistle, sunscreen, water, floatation devices for each passenger, floatable flare, wear your life vest, life vests for all passengers- if stopped and there are no vests, YOU will get a fine! (Depending on the size of your dinghy, the Coast Guard may require a fire extinguisher, throwable floatation device and an anchor.)

Onboard First Aid Kit and Medications:

Hand sanitizer, paper towels, pen/ paper, CPR face mask, alcohol wipes, flash light, scissors, vinyl gloves, antiseptic spray, sunscreen, garbage bags, face masks, bandage tape 1 inch, 3 inch, band aids, Kerlix gauze of all sizes, tourniquet, duct tape, saline wound wash, eye wash and receptacle, bandage scissors, steri-strips, tampon, bacitracin, Silvadene cream, hydrocortisone 1% cream, oral Benadryl, Aspirin 325mg tablets, Dramamine, Motrin, Advil, splint, portable blood pressure cuff with small, medium, large size cuffs, stethoscope, Narcan kit, hot/cold pads, etc.

(Check the American Red Cross for the list of any additional items needed)

BE SAFE AND HAVE FUN!

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