

Activity A1-2 ASSESSING SEVERITY OF SITUATION - IS THIS AN EMERGENCY?

This activity allows participants to assess the severity of different injury and illness situations. Read the following directions to participants.

▶ **Instructor:**

- ▶▶ I am going to read (*or ask for a volunteer to read*) injury and illness stories. Once the story has been read, I would like you to stand next to the sign on the wall which best indicates what you would do in that situation. Your options are:
 1. Call EMS and provide first aid until they arrive.
 2. Provide first-aid and notify parents to take the child to a doctor or dentist as soon as possible (child needs care within 1-4 hours).
 3. Provide first-aid and monitor the child's condition. Notify parents.
 4. No first-aid needed. Allow child to return to normal activities
- ▶▶ Please try to make your decision quickly - no more than 30 seconds. Then I will ask for volunteers to discuss why they chose that action. Finally, I will give you physicians' recommendations for these situations. Feel free to ask any clarifying questions at that point. Keep in mind that these are only guidelines and you must use your best judgment given your knowledge, experience, and the situation.
- ▶▶ I don't want you to feel like you must have all the right answers or know exactly what to do now. You will be receiving more specific first-aid instructions later in the program. For now, I just want you to think about what your first reaction would be to the situations.
- ▶▶ Try not to read more into the stories than the information with which you are provided. Assume that you have been given all of the important information about the incident.
- ▶▶ Do you have any questions now about the instructions?

Injury Scenarios

1. Several children are playing with a ball and they kick it into an overhead light. The light shatters, sending glass into one child's eye. The child starts screaming in pain and finds it difficult to open his eye. You find glass in the child's eye. What would you do?

Physician Recommendation	Reason:
CALL EMS and provide first-aid until help arrives.	Injury is limb-threatening (i.e. Sight is jeopardized.)

2. Two children are playing and one throws a wooden block at the other. The block cuts his lip and the side of his face. Upon examining the injuries, you see that the wound is gaping and the edges will not stay together easily. What would you do?

Physician Recommendation	Reason:
Provide first-aid and notify parents to take the child to a doctor or dentist as soon as possible.	Not life or limb threatening but requires immediate medical care to prevent further problems.

3. While playing outside, a child you are watching falls on the asphalt. After you comfort the child and examine her wounds, you see that she has some surface cuts, scrapes and bruises, but not a lot of bleeding. What would you do?

Physician Recommendation	Reason:
Provide first-aid and monitor the child's condition. Notify parents when they pick up child at the end of the day.	Injury is not life-threatening. It does not affect airway, breathing or circulation, there is no heavy bleeding and no limbs are in danger.

4. A 12-month old's thumb was severed when staff accidentally shut the door on her finger. What would you do?

Physician Recommendation	Reason:
CALL EMS and provide first-aid until help arrives.	Limb-threatening injury - could be severe bleeding, traumatic to child.

5. You find a 3 month old face down in her crib. When you turn her over, you see that she has turned blue and appears to have stopped breathing. What would you do?

Physician Recommendation	Reason:
CALL EMS and provide first-aid until help arrives.	Life-threatening - affecting airway.

6. Ben, a child with diabetes, comes to you and says that he feels "shaky". He is pale and seems a little irritable. What would you do?

Physician Recommendation	Reason:
Provide first-aid and monitor the child's condition. Notify parents.	Child's condition is not affecting ABC's. He does not seem confused - just irritable. If child is given something to eat and shows improvement, then there is no emergency. If no improvement within 10-15 minutes, seek medical attention.

7. Two children get into an argument over a toy. One child bites the other child and breaks the skin. The wound bleeds slightly. What would you do?

Physician Recommendation	Reason:
Provide first-aid and notify parents to take the child to a doctor or dentist as soon as possible.	Not an emergency because it does not affect ABC's, no heavy bleeding, not limb-threatening, not affecting the child's level of consciousness. It does require immediate medical care because of the exposure to body fluids of another child. In this case, the parents/guardians of both children should be notified of the exposure and urged to seek immediate medical care.

8. A child trips and falls while running. He lands on a stick. The stick punctures his arm. Bleeding is minimal but the stick is stuck in the wound. What would you do?

Physician Recommendation	Reason:
Provide first-aid and notify parents to take the child to a doctor or dentist as soon as possible.	This injury is not life-threatening as it is not affecting airway, breathing or circulation. The bleeding is minimal and there is no risk of loss of limb. However, when the puncturing object is still left in the wound, you should NOT remove it on your own. The object may be helping to contain heavy bleeding. This type of wound needs immediate medical attention.

9. Shawn is knocked to the ground when the wooden seat of a swing hits him under the chin. When you look at Shawn, you notice that two of his teeth are chipped and one side of his face looks different than the other. You suspect that he may have a broken jaw.

Physician Recommendation	Reason:
Provide first-aid and notify parents to take the child to a doctor or dentist as soon as possible.	Any chipped, displaced, or knocked-out teeth require immediate dental care in order to save the teeth, but the parent/guardian should be notified to take the child to the dentist. The suspected broken jaw also requires immediate medical care. If you suspect that Shawn has any other type of head injury or is bleeding severely, you should CALL EMS. You should also call EMS if you feel that Shawn's airway is blocked or may become blocked in any way by blood, vomit or a foreign object.

10. Mike, 5 years old, who is taking antibiotics for his ear infection, complains of a rash on his chest but has no other signs or symptoms.

Physician Recommendation	Reason:
Provide first-aid and monitor the child's condition. Notify parents.	Not life-threatening or limb-threatening. Child has no other symptoms than a rash. There is not much first-aid that can be done for this type of rash. Best action is to closely monitor the child's condition and watch for other signs. Make certain to notify parents to watch for other reaction. If you are administering the medication at the center, contact the Mike's parent or doctor regarding what to do about giving the next dose. If the condition gets worse, contact parents and urge them to seek medical attention.

11. Ryan takes a hard fall off a spinning playground ride and complains of tingling in his left arm that has lasted 5 minutes.

Physician Recommendation	Reason:
Provide first-aid and notify parents to take the child to a doctor as soon as possible.	Child could have a fracture in his arm since he fell hard from a spinning ride. Since you suspect a fracture, but not a limb-threatening situation, urgent medical care is the best action.

Mention to the participants that in none of the situations is it recommended to do nothing. In most cases first-aid can be of value even with seemingly minor situations and children's conditions following any incident should always be closely monitored.

▶▶ **Instructor:**

The most important points to remember are to:

▶▶ Call EMS for the following conditions:

- Affecting Airway, Breathing or Circulation
- Heavy Bleeding
- Affecting the child's level of consciousness
- Head, neck & back injuries and other situations when you can not move the child.
- Limb-threatening conditions such as amputations, severe eye injuries.

▶▶ **ALWAYS** notify the parents/legal guardians of any injury or illness incident. They have a right to know and this will allow the parent to continue to monitor the child's condition and to take whatever steps they see as necessary. It is also required to fill out incident report forms after any injury.

Call EMS and provide first aid until they arrive.

Provide first-aid and notify parents to take the child to a doctor or dentist as soon as possible.

Provide first-aid and monitor the child's condition. Notify parents when they pick up the child at the end of the day.

No first-aid needed. Allow child to return to normal activities.

Severe Allergic Reaction

- **Caller:**

- ⇒ You are at your center on a summer day (use your center's address).
 - ⇒ Dave, a 5-year old, approaches you after playtime one day. He appears to be acting strange. As he approaches, you see that his face is swollen and hives are forming all over his body. He is starting to wheeze (make a high-pitched sound during breathing out).
 - ⇒ He tells you that he has been stung by a bee. You think that he is having a severe allergic reaction to a bee sting. You do not know Dave to have a history of allergy but his symptoms are very concerning as they are affecting his breathing.
 - ⇒ You have no medication for Dave's condition.
 - ⇒ You have completed a first-aid and a CPR course and are prepared to give rescue breathing and CPR if necessary.
 - ⇒ You take Dave with you and call EMS.
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- **EMS Dispatcher:**

1. What's the emergency?
2. What is your name and where are you calling from?
3. Where is the emergency?
4. Is the victim conscious now?
5. Is the victim breathing?
6. Does the victim have a history of allergy to stings? Is there any medication available?
7. How old is the victim?
8. What has been done or is being done for the victim?

Activity A1-6: Injury Roleplays

- Prior to the program, copy the following examples and cut between each station and between each caregiver and victim role. Clip the roles together for each station.
 - Set up the stations before beginning part 6 or during a break period. The number of stations you will need will be determined by the number of participants you have. For example, if you have 12 participants, you will need 6 stations set up so that each pair has a station.
 - Leave two scenarios at each station. Allow each pair to work through both scenarios before rotating stations and switching roles. Allow each participant the opportunity to be in the first-aid caregiving role for at least two scenarios. If time permits allow the participants to continue with more than 2.
 - Instruct the participants to read only their role and to not share information before the role-play.
 - Refer to the “Trainer Notes” in the curriculum for further instructions.
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Station 1

Victim: Tony, a 3 year old, is running on the playground. He trips and lands on a nail that was lying on the ground. He is found crying with the nail still stuck in his hand. It does not appear to be bleeding a great deal.

Caregiver: There are other adults nearby who can help call EMS, find the child’s file or retrieve the first-aid kit. Ben, a child in your center with a known history of diabetes, approaches you. You notice that he looks very pale and is acting irritable.

Station 2

Victim: Your name is Mike and you are 6 years old. You just went down the slide head first. You were not able to get your arms free and you land on your face. One of your teeth is knocked out. Your mouth is bleeding and you are in a lot of pain.

Caregiver: Mike lands on his face after coming down the slide head first. When you examine him you see blood in his mouth and a tooth is missing. You do not know if it is a permanent or primary (baby) tooth. You find the tooth on the ground.

Station 3

Victim: Your name is Tammy (5 years old) and you are being abused at home. You have not told anyone about what is happening to you but the abuse has been going on for awhile. Last night, your father was angry about something and burned you with his cigarette on his arm. When the caregiver asks you about the burn, you don't really want to talk about it. You tell her that you burned it on an iron. When questioned more about it, you reluctantly tell her that your father burned you with his cigarette. This makes you upset.

Caregiver: Tammy (5 years old) is dropped off at day care and you notice a small round burn about the size of a cigarette on her arm. You know that Tammy has often come to day care with bumps, bruises and burns. Last year, she even had a fractured wrist. When you question her about the burn, she gives you an unlikely explanation. Suggestions: Gently say, "Tammy, the burn that you have doesn't look like it came from an iron. It looks like a cigarette burn. Did someone burn you with a cigarette?"

Station 4

Victim: Your name is Tim and you have just pinched a chunk of your finger off in the chain of the swing on the playground. It is bleeding a lot.

Caregiver: You see that Tim has been injured on the playground. His thumb is bleeding a lot and upon further examination, you see that a chunk is missing.

Station 5

Victim: Your name is Harry and you have a severe allergy to bees. You have an emergency care plan on file. Today, you are stung by a bee. You begin to cough and cry. Your stomach and arms itch and you scratch them. You start to breathe quick, shallow breaths as you are having difficulty getting air.

Caregiver: You notice Harry is coughing and looks unhappy. As you approach him, you see that he has a rash all over his neck and is scratching his arm and stomach. He is also breathing short, quick breaths and appears to be having difficulty breathing. You remember that Harry has an emergency care plan on file.

Station 6

Victim: Your name is Billy. You are having a nosebleed.

Caregiver: You see Billy's nose is bleeding.

Station 7

Victim: Your name is Nina. You have just been hit by a car. You are unconscious with severe injuries. Lie down and be unresponsive

Caregiver: Today you have taken the children to the park. One particularly energetic child, Nina, darts into the road and is struck by a car. You rush to help her. The first-aid kit is in the van. There are other adults nearby who can help.

Station 8

Victim: You are on a field trip to the park on a warm summer day. You fell asleep in the back of the van and were left unnoticed. You are now suffering from heat exhaustion as the temperature in the van has risen a great deal. You wake up in the van and feel very tired, thirsty, weak and dizzy. You also have a headache. A staff person finds you in this state.

Caregiver: Your center is taking a field trip to the park on this warm summer day. After about an hour at the park, you discover that Rita, a child from your center, was sleeping in the van unnoticed. When you find her, you see that her skin looks very flushed and she seems a little dizzy. She tells you that she feels very tired and is thirsty.

Station 9

Victim: Your name is Sam. It is lunch time and you are eating very quickly and taking large bites of food. Suddenly, you can't breathe. You are choking and are not able to make any sound. You grab your throat.

Caregiver: At lunch time, you see that something is wrong with Sam. He is grabbing his throat. When you approach him, you ask if he is OK. He can't make any sound. You see that his lips are starting to turn blue.

Station 10

Victim: Your name is Sherry. You are 3 years old and you fell off of the jungle gym during morning play. Your right arm has been hurting a lot ever since. You have been cradling your arm and not using it. You are right-handed so it is unusual that you should be using your left hand and arm.

Caregiver: You notice Sherry is holding her right arm in an awkward way. She is cradling it and not using it as she normally would. She is using her left hand to pick things up. This is strange since she is right-handed. You ask her what happened.

Station 11

Victim: Your name is David and you have just been bitten on the arm by Kenny. Kenny and you were arguing over a toy. The bite wound is bleeding.

Caregiver: Kenny and David get into an argument over a toy. Kenny bites David on the arm and breaks the skin. The wound is bleeding slightly.

Station 12

Victim: Your name is Stephanie (2-1/2 years old). You were running through the center when you tripped on an extension cord and bumped your head on the linoleum tiles cement floor. Your head “hurts” and a bump is forming on your head.

Caregiver: Stephanie, a 2-1/2 year old child was running through the center when she tripped and fell. She bumped her head on the linoleum tile cement floor. She tells you that her head “hurts”. When you examine it, you feel a bump.

Station 13

Victim: Your name is Ryan and you are a very curious little boy. One day, while on a field trip to the park, you find a bush with pretty red berries. They look good to eat so you start eating them. You eat about 12 berries. In a few minutes, your stomach starts to hurt and you do not feel good.

Caregiver: One day on a field trip to the park, you see Ryan sitting on the ground holding his stomach. He looks like he does not feel very well.

Station 14

Victim: Your name is Joe. You are two years old and you have been knocked to the ground by an older child on a bicycle. You are lying on the ground. You feel cold and your side hurts.

Caregiver: Joe, a 2 year old, is knocked to the ground by an older child on a bicycle. He becomes pale, cool and sweaty. You notice that he has a large, dark bruise on his right side.

Station 15

Victim: Your name is Darnel. You are 7 years old and you have a history of asthma. Today, you are having some difficulty breathing. You begin to wheeze while taking shallow, rapid breaths.

Caregiver: Darnel is a seven year old child with a history of asthma. Today, he is experiencing some difficulty breathing. He seems to be taking rapid, shallow breaths and is making a wheezing sound. You know that Darnel has an emergency care plan on file and he also has prescribed, guardian-approved medication. His breathing difficulty didn't appear to start quickly and his symptoms are staying about the same.

Station 16

Victim: Your name is Sam. You are six years old and are bitten when you reach out to pet a stray dog pacing near the fence during outdoor playtime. Your hand is gaping open and bleeding quite a bit. You become very upset when you see all the blood.

Caregiver: Six year old Sam is bitten when he reaches out to pet a stray dog that was pacing near the fence during outdoor playtime. Upon examining the wound, you see that there is an open, gaping wound and blood is flowing from the wound.

Station 17

Victim: Your name is Rita and you have a known history of seizures. Today, you have a seizure causing jerking of your arms and legs. It lasts for about 2 minutes. This is a "normal" seizure for you.

Caregiver: Rita is child with a history of seizures. She is found one day having a seizure that is causing a jerking motion of her arms and legs. The seizure lasts about 2 minutes.
