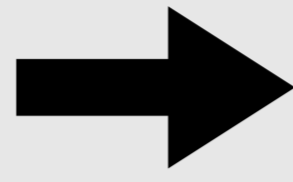


First Aid

The Evidence

Systematic reviews are conducted by the **International Liaison Committee on Resuscitation** First Aid Task Force.



These studies are translated to make **evidence-based guidelines** for North American first aid providers.

Recommendations for First Aid Providers

Stroke

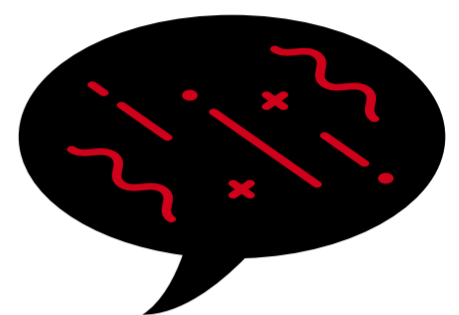
Activate emergency services for possible stroke when assessing an individual with any of the following:



Facial droop



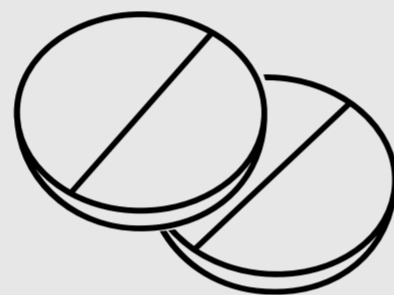
Weakness in one arm or one side



Speech disturbance

Chest Pain

Activate emergency services for non-traumatic chest pain, and encourage alert adults to



Chew and swallow 160 to 325 mg aspirin

unless



Allergic to aspirin or advised not to take it by healthcare provider

Bleeding

For treatment of life-threatening bleeding, perform the following:



Apply a **tourniquet ASAP** to a **life-threatening extremity bleeding** or to bleeding that **cannot be controlled with direct pressure**.



Apply **direct pressure** (with hemostatic dressing) if a **tourniquet cannot be used**, or until a **tourniquet is available**.

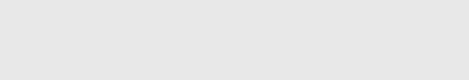
Hyperthermia

Cold-water, whole-body immersion is **most effective** at treating people with **hyperthermia** or **heatstroke**.



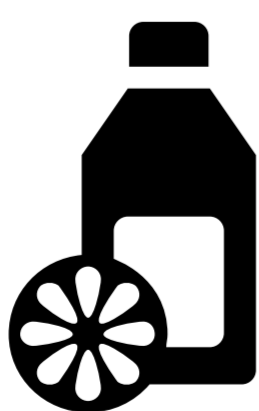
Initiate **ASAP**, and continue until a **temperature of $\leq 39^{\circ}\text{C}$ (102.2°F)** is reached or until **symptoms resolve**.

If immersion not available



Ice packs, cold showers, and fanning may also be used.

Hypoglycemia



Give **oral glucose** to adults and children with **suspected hypoglycemia**.



Activate emergency services if **symptoms worsen** or if they **don't resolve within 10 minutes**.

Tooth Avulsion



If emergency replantation is not available, **transport** the tooth in a **balanced salt solution** or **wrapped in cling film**.



Cow's milk or saliva may also be considered. **Don't store in tap water**.