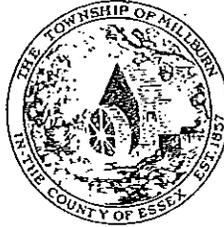


Department of Public Recreation

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NEW JERSEY

*- This business of Life -
Not the Working and Earning - Not the preparation for it -
but the glorious process of living it - This is the concern
of the Recreation Department*

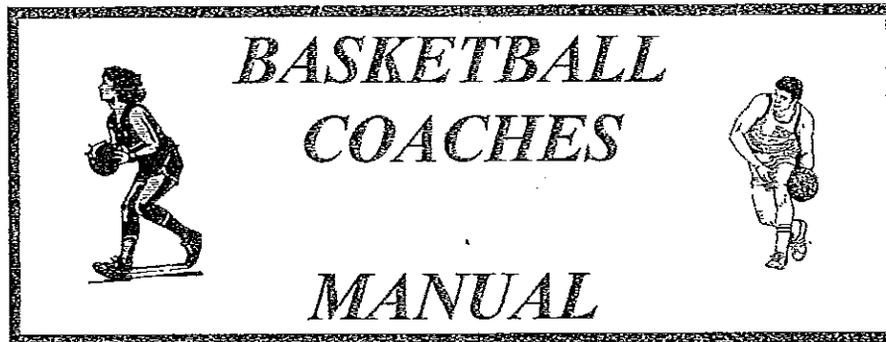


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1) DEPARTMENT PHILOSOPHY

For years youngsters competed in this country under the slogan, "It's not whether you win or lose, but how you play the game." This quotation and the ideals that it stressed were commendable. Children were taught to become good sportsmen. Play to win, but win with dignity. And if you lose, lose with honor. Integrity and fair play became by-words for the participants and the coaches.

But, as television became more prominent in American lives, children began to mimic their professional athletic heroes more than they had ever done in the past. One of the great heroes of football was Vince Lombardi. He said, "Winning isn't everything, it's the only thing." This quotation appears to have become the new bellringer for players and coaches alike. The old cherished ideas were scrapped and eight-year olds were now being told they HAD to make that free throw, get that hit or complete that pass. Not doing so would cause the team a loss, and that would be a failure.

Most adults involved in youth athletic coaching or directorship state that they are doing it for the good of the kids. Kids, they say, must learn to compete at an early age and learn that winning is the American way. Many adults tend to lose sight of the fact that the primary reason most children are playing is to have fun.

Adults often lose sight of the fact that even though the team loses, a youngster on that team may have gotten his first hit, scored his first goal or accomplished some other major feat for him, which will heighten his competitiveness and give him a feeling of accomplishment. Children look to adults for guidance. Because of this it is imperative that adults obtain some knowledge of the sport they are coaching.

In the event a coach has little or no knowledge in teaching fundamentals of a sport, he would be better off just allowing the children to play. Unlearning skills taught improperly is more difficult than teaching those skills initially to a youngster with no training. Besides this fact, irreparable physical harm can befall a child who is pushed at too early an age to perform skills that his body is not yet capable of enduring.

The Millburn Recreation Department's position on athletic competition is one of maximum participation for all the youngsters involved in an activity. Our concern is for the psychological well-being of the child, as well as the physical. Everyone involved in sports programming must understand that a youngster's first experience in facing a pitched ball or playing on an organized team can be a very scary experience for him. It might be a macho thing to do to dig in at the plate or battle for good position under the boards, but a child's confidence must first be bouyed before he will be able to accomplish this.

We all must remember that, as youngsters progress in athletic programming, it becomes more difficult to qualify at each subsequent level of competition. The majority of the competitors in a recreation program for a particular sport will not be able to make the high school varsity team. This number diminishes further as the athletes try to qualify for college varsity sports teams. Finally, only a minute percentage of these athletes are skilled enough to participate at the professional level.

Further, we also must not lose sight of the fact that, in many instances, the small or awkward youth becomes a late-bloomer who, as a young adult, matures into an outstanding athlete. Keeping all of this in the proper perspective is the real key to maintaining a successful recreation program. Adults cannot relive their lives through their children or through the youngsters they coach. Above all, we must remember that games belong to the kids and our major responsibility is to provide the atmosphere and conditions so they can have fun.

Also, all coaches and spectators should abide by the principals of sportsmanship and fair play. Abuse of officials often serves as an outlet for our frustrations after losing a close game. Youth need to understand winning and losing rather than following a coach or spectator's example of blaming a loss on an official. Coaches and/or spectators who continually display poor sportsmanship will be removed from coaching or not allowed to attend games.



2) LEGAL RESPONSIBILITIES OF COACHING

When you become a coach, you assume certain new legal responsibilities, regardless of whether you get paid for coaching or are a volunteer. In recent years, the amount of sports-related lawsuits has skyrocketed. Coaches have been sued for failing to supervise activities properly, teaching skills improperly and failing to render first aid correctly.

When coaches are sued, the action usually stems from negligence. Negligence is the failure to exercise a reasonable or ordinary amount of care in a situation that causes harm to someone or something. Negligence occurs when you fail to perform a legally owed duty as would a reasonable and prudent coach, with this failure resulting in actual damage that is a consequence of your breach of duty and that should have been foreseen.

In order to receive protection under NJ Law #1678 against liability for volunteer services provided, coaches are required to attend a safety orientation and training program sponsored by the Millburn Recreation Department. (Check with the recreation office for details.)

As a coach, you have three basic guidelines for meeting your responsibility for general supervision of an activity:

- 1) You should be immediately accessible to the activity and be able to oversee the entire program systematically.
- 2) You must be alert to conditions which may be dangerous to participants and take action to protect them.
- 3) You must be able to react immediately and appropriately to emergencies.

You have at least nine important duties as a coach from a legal point of view. They are:

- 1) Provide a safe environment.
- 2) Properly plan the activity.
- 3) Evaluate youngsters for injury or incapacity.
- 4) Match or equate youngsters.
- 5) Provide adequate and proper equipment.
- 6) Warn of inherent risks in the sport.
- 7) Supervise the activity closely.
- 8) Know emergency procedures and first aid.
- 9) Keep adequate records.

The following article on "Liability and the Volunteer Coach" is included to provide further information on the legal aspects of coaching.

"LIABILITY " AND THE VOLUNTEER COACH

THE FIRST THING THE VOLUNTEER MUST DO IS TO ASK ABOUT
LIFE INSURANCE COVERAGE AND THE EXTENT OF ITS LIMITATIONS.
By J. York-Swimming Coach-Willamette U. and Dr. Forrest Gathercal, Oregon
State University - Coach Magazine

Never have our civil courts been called upon to adjudge so many negligence suits for such huge amounts of money. The cost of protective insurance has tripled and quadrupled over the last five years.

As coaches we can hardly run away from our responsibilities. Since we're constantly exposing young people to potentially dangerous situations, we're legally bound to create a safe and controlled environment for them. Our failure to do so may lead to serious accidents, for which both ourselves and our employers may be judged liable.

While the chance of becoming involved in a negligence suit is remote, we must understand that a suit can exact a terrible toll in time, anxiety, and money.

Many coaches are uninsured or just minimally insured. Those working for a public agency such as a school are usually protected by employee policies. Unfortunately, this doesn't always apply to "volunteer coaches."

These altruistic people have to worry about injuries and the possibility of judgment against them. As well intentioned as they are, they usually have only a limited background in the coaching and supervision of young people. It will thus behoove the head coach to pass along all the material he has on the basic legal problems that may be encountered by "volunteers."

We believe that an awareness of such legal responsibilities and vulnerability will not serve to discourage involvement in the athletic program but, rather, help the coach to respond properly in moments of decision.

In most sports programs, the volunteer coaches are covered by the same liability insurance as those paid for coaching. The first thing the volunteer coach must do is ask about his or her insurance coverage and be informed of any limitations.

WITHIN THE RULES

Most liability protection calls for the coach or volunteer coach to act within the scope of his duties. If the coach is not performing within this scope, he is legally considered to be "on a frolic of his own" and he will have no protection under most insurance policies.

In order to stay within the province of his coaching duties, the coach must follow the rules and regulations set down by the organization.

For example, if a request form is required before transporting athletes in the coach's personal car and the coach neglects to comply with this rule, he may be considered to be "on a frolic of his own" - - and he won't get the protection of the insurance coverage if an accident should occur.

The wise volunteer coach will assure his protection by carefully following the rules and directions of the head coach. Any time he gets a new idea or before he does something on his own, he'll make sure to tell the head coach about it and get his approval. Head coaches do not like surprises.

NEGLIGENCE

What do we mean by negligence? It is the failure to take reasonable precautions to avoid injury to persons or property. (It assumes that the injury was accidental, without malice or intent.)

For a volunteer coach to be held liable for negligence, four elements have to be proven in a court of law.

First, the coach must have accepted the duty to perform in a way that wouldn't endanger anyone to whom he has a responsibility.

Second, the coach has failed to provide the normal standard of care owed to the athlete.

Third, this failure has been the proximate cause of the accidents.

Fourth, the resulting injury must merit the involvement of legal proceedings.

COMMITMENT TO ATHLETES

All coaches, whether volunteer or paid, have, by accepting their position, inferred that they possess coaching and other related skills and will maintain those skills at levels equal to other coaches in the field. They have, therefore, accepted a legal commitment to their athletes.

The courts expect them to be in command of such information as first aid and to be aware of which parts of the facility are potential sources of danger.

Most young athletes love to complain about every small pain or queasy feeling. As coaches, we're tempted to tell them to scotch-tape an aspirin to the sore spot or soak it in a hot shower. We also depend on intuition and our personal knowledge of the athletes to sort out the minor complaints from the more serious ones.

Legally, we have no right to distinguish. We are restricted to rendering first aid only to the extent of our knowledge of first aid and sports injuries. Treating a sore shoulder with a hot shower may or may not be first aid. In fact, it may be interpreted as an act of negligence because it may have delayed the athlete in getting proper medical attention.

The failure of a coach to respond correctly to an emergency is a question for the jury. Is a volunteer coach responsible for knowing how to treat an epileptic seizure? Is the coach even responsible for knowing the athlete is an epileptic? Has the coach looked at the athlete's medical form?

The legal question to be decided by a jury is what could a reasonably prudent volunteer coach be expected to anticipate under the circumstances.

To determine negligence, the court will compare the actions of the specific volunteer coach to those of the "reasonably prudent volunteer coach." This is accomplished by testimony before a jury of other head and volunteer coaches. Each coach explains what is reasonably expected of the volunteer in his own program.

If the jury decides that the volunteer coach being sued was doing what was reasonably expected of him at the time of the injury -- that he was meeting or exceeding the standard of care expected of the reasonably prudent volunteer coach -- the jury will bring in a verdict of not negligent.

From a legal standpoint, it's obviously important for a head coach to know the capabilities and limits of responsibility of his volunteers. Equally important, the volunteer must closely observe the instructions and rules formulated by the head coach and the organization.

RESPONSIBILITY FOR INJURY

The third element of a negligence suit stipulates that in order to be negligent, the coach must be directly responsible for the injury. This protects the coach from being liable for a chain reaction of events that ends in an injury. It also obviates responsibility beyond the practice setting.

Direct responsibility is best illustrated by example. Suppose a volunteer swimming coach decides that the clock should be moved from the end wall to the side of the pool building to make it more visible. The clock is placed over the locker room door. Due to the handyman, the clock falls on a swimmer.

The coach probably won't be liable -- if he has prudently kept his head coach well-informed and followed instructions. The responsibility will usually fall on someone other than the volunteer.

THE INJURY

The injury is the fourth element to be addressed in a suit. Many injuries are minor and won't normally lead to a law suit. However, something that may begin as a small injury may lead to a debilitating injury unless it is properly attended.

Whenever possible, the injury should be treated by a qualified trainer. A reasonably prudent volunteer coach will report all injuries to the head coach and follow instructions from there. If the head coach is not immediately available, the coach will get the information to him as soon as possible. Remember, a head coach does not like surprises.

As coaches, we may feel that valuable lessons are to be learned within the confines of our unique classrooms -- the gymnasium, football field, swimming pool, and other athletic laboratories.

The lesson may incorporate the attitude of "playing through pain." This can be dangerous. It should never be incorporated if it places the athlete, coach, and program in jeopardy.

Each state has its own laws to protect and establish its citizens' rights. Fifty sets of civil laws, constantly being revised and compounded by varying judicial interpretations, make it difficult to generalize on the subject of liability.

By understanding what liability is, each coach can evaluate his situation and decide whether a discussion with an attorney or insurance broker is warranted.

The Township of Millburn maintains an insurance account with the Joint Insurance Fund and the Municipal Excess Liability Fund. The funds provide general liability limits to the Township, up to \$5,000,000. Coverage for Recreation Department volunteers while acting within the scope of employees of Millburn is included under Millburn's Comprehensive General Liability and Umbrella policies.

3) SAFETY - GUIDELINE AND PROCEDURES

As a supervisor/coach, you have the responsibility to make sure that the fields played on, equipment used and activities performed are safe. You should arrive at your games and practices early and remain until all of the children are gone or have a means of transportation home. At the beginning of your season you should locate nearby phones in case an emergency arises during the year.

Please familiarize yourself with the following safety code for coaches:

1) General safety procedures

- (A) Arrangements should be made in advance of all games and practices for emergency medical care.
- (B) Managers, coaches and umpires should have some training in first-aid. A first-aid kit should be available at all recreation events.
- (C) All equipment should be inspected daily and defective equipment should be removed.
- (D) Play areas should be kept clean at all times. Loose equipment (e.g., bats and balls) should be kept off the field of play.
- (E) During practices and games, all players should be alert and watching the play. Lack of attention often leads to injury.
- (F) At no time should "horse-play" be permitted.
- (G) Parents of players who wear glasses should be encouraged to provide "Safety Glasses" or athletic straps for glasses.
- (H) Players should not wear watches, rings, pins, or other metallic items while playing.
- (I) If issued a first-aid kit, you should keep it up to date. If you are not issued a first-aid kit, it is your responsibility to assure that first-aid supplies are available.
- (J) Supervisors/coaches must fill out the Millburn Recreation Department's accident report for any injury that may occur during their program. Accident report may be picked up at the Recreation office.

II) Gymnasium safety procedures

- (A) Adult supervisor/coach must be in the gym at all times. No youth should be allowed in the gym before the coach arrives or after he leaves. Coaches should work out a schedule with the parents so that youth are picked up before the coach leaves.

- (B) Hallways should be monitored. All water breaks and bathroom use must be regulated. Youth are not allowed in the hallways unsupervised.
- (C) Gyms should be left in the same condition you found them.
- (D) Any damage should be reported to the custodian in charge. Any damage, accidents or safety problems should be reported to the Recreation Department (564-7097).
- (E) If you will not be using your gym time, you must inform the Recreation Department before 3:00 p.m. on the day of your activity/practice.

III) Outdoor Safety Procedures

- (A) No games or practices should be held when weather or field conditions are not good, particularly when lighting is inadequate.
- (B) The playing field should be inspected frequently for holes, damage, stones, glass and other foreign objects.
- (C) Baseball/softball safety items
 - (1) Dugouts, on-deck circles and bat racks should be positioned behind screen.
 - (2) Batters must always wear protective helmets - during practice as well as during games.
 - (3) Male catchers must wear a protective athletic cup at all times.

IV) First Aid Instructions

- (A) The emergency phone number for the police and first-aid squad in Millburn/Short Hills is 911.
- (B) First Aid Instruction, see page 12.

4) LEADERSHIP AND CHILDREN'S RIGHTS

As a coach/supervisor you are a leader looked up to by the boys and girls you coach. It is important to provide an exciting, well-planned program. You should set an example by being enthusiastic and interested in the work you are doing. You should teach good sportsmanship as well as athletic skills.

The following items provide the criteria by which to judge your performance as a coach/supervisor:

(A) Ability

- (1) Knowledge of position.
- (2) Qualified and adequate background and experience.
- (3) Knowledge of techniques related to organization & planning.

(B) Appearance

- (1) Properly attired
- (2) Present a good image to the public
- (3) Neatness

(C) Reliability/Attendance

- (1) On time
- (2) Shows a sense of responsibility
- (3) No unexcused absences

(D) Performance

- (1) Involvement
- (2) Takes initiative
- (3) Adequate planning an organization

(E) Conduct

- (1) Compliance with rules
- (2) Personal behavior & attitude

The children you coach should not be mistreated. As young athletes they have certain rights:

BILL OF RIGHTS
FOR YOUNG ATHLETES

RIGHT TO PARTICIPATE IN SPORTS

RIGHT TO PARTICIPATE AT A LEVEL COMMENSURATE WITH
EACH CHILD'S MATURITY AND ABILITY

RIGHT TO HAVE QUALIFIED ADULT LEADERSHIP

RIGHT TO PLAY AS A CHILD AND NOT AS AN ADULT

RIGHT OF CHILDREN TO SHARE IN THE LEADERSHIP AND
DECISION-MAKING OF THEIR SPORT PARTICIPATION

RIGHT TO PARTICIPATE IN SAFE AND HEALTHY ENVIRONMENTS

RIGHT TO PROPER PREPARATION FOR PARTICIPATION IN SPORTS

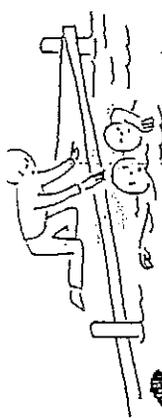
RIGHT TO AN EQUAL OPPORTUNITY TO STRIVE FOR SUCCESS

RIGHT TO BE TREATED WITH DIGNITY

RIGHT TO HAVE FUN IN SPORTS

First aid to RESTORE BREATHING

- in such cases as
- ✓ NEAR DROWNING
- ✓ GAS POISONING
- ✓ ELECTRIC SHOCK
- ✓ HEART FAILURE
- ✓ SUFFOCATION



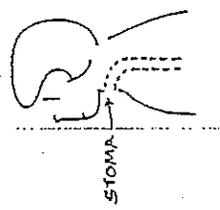
Every second counts when breathing has stopped.
Six minutes without oxygen may mean death.
MOVE FAST!



TO PERFORM MOUTH-TO-MOUTH RESPIRATION ...

<p>1 REMOVE obvious foreign matter from victim's mouth.</p>	<p>2 PLACE hand under victim's neck and lift.</p>	<p>3 TILT victim's head back Chin points up.</p>
<p>4 CLOSE victim's nostrils with your fingers.</p>	<p>5 INHALE Place your mouth tightly over victim's.</p>	<p>6 EXHALE into victim's mouth until chest expands.</p>
<p>7 START with 4 quick breaths - then 1 every 5 seconds.</p>	<p>8 BLOW into nose and mouth of small victim once every 3 seconds. Use quick puffs with less volume.</p>	<p>9 CHECK for airway obstruction if lungs don't inflate easily.</p>

If victim wears dentures, remove them only if they're loose and create problem when mouth is being sealed.



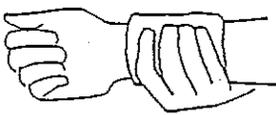
WHEN victim is a laryngectomee (larynx is removed by surgery) follow steps 5-6 but blow into stoma (air inlet) in front of the neck. Do not tilt head or lift neck.

First aid to CONTROL BLEEDING

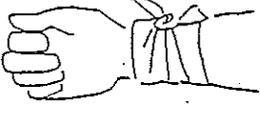


OPEN WOUNDS--

--usually cause **VISIBLE BLEEDING**--immediate concern is to stop bleeding.

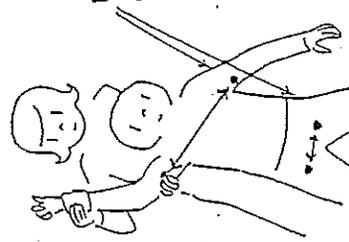


Cover wound with cleanest cloth available or with bare hand and **APPLY DIRECT PRESSURE** on the wound. Add bandage if blood soaks through. Keep firm pressure until physician arrives.



If other emergency care is necessary, apply **PRESSURE BANDAGE** to hold cloth in place. Apply light enough to hold but not so tight as to restrict the blood flow beyond the wound.

ELEVATE wounded limb above heart if there is no bone fracture.



If direct pressure and elevation do not stop bleeding, continue both and apply pressure to the **PRESSURE POINT** between heart and wound. Release pressure point when bleeding stops.

PRESSURE POINTS
ARM - inside of arm halfway between shoulder and elbow.
LEG - midpoint of crease between thigh and body (pressing artery against bone slows blood flow).

NOTE ABOUT TOURNIQUETS: USE ONLY AS A LAST RESORT in a life or death situation (e.g., severed limb). Just above wound, tightly wrap wide band of cloth twice around limb. Tie overhand knot. Place stick on knot; tie two more knots on top of stick. Twist stick until bleeding stops. Mark time tourniquet applied (using pen or lipstick on victim's forehead). **DO NOT LOOSEN! OR REMOVE TOURNIQUET.**

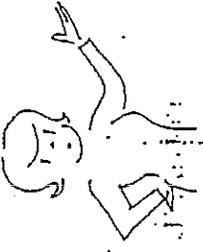
First aid for

HEART ATTACK

...the leading cause of death in adults. Usually involves a blood clot in one of the vessels that supplies the heart. CPR (cardiopulmonary resuscitation) is specialized training in aiding heart attack victims. It is offered in most communities. YOU SHOULD LEARN CPR!

SIGNS OF HEART ATTACK

1. Persistent pressure, tightness or squeezing in center of chest. Discomfort may spread to either shoulder or arm, neck, jaw, or across chest.
2. Extreme shortness of breath, gasping, fear, sweating.
3. Paleness, bluish tinge to lips, skin, nail beds.
4. Unexplained nausea, indigestion, vomiting.

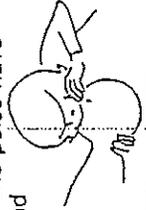


IN CASE OF HEART ATTACK...

D HELP victim to comfortable position... usually sitting. Call for ambulance with oxygen. If unconscious, keep victim lying down.



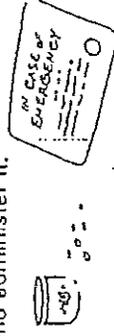
PERFORM CPR only if breathing and pulse have stopped, and if you're properly trained.



PROVIDE adequate ventilation and covering for normal warmth.



LOOK for emergency medical identification. Ask victim if he/she has prescribed medication and administer it.



AVOID transporting victim unless expert assistance is not available within a reasonable time.

First aid for

BONE and JOINT INJURIES



FRACTURES

are either **closed** (one or more broken bones beneath the skin) or **open** (associated with open wound usually caused by broken bone protruding through skin).

SUSPECT A FRACTURE if there is pain, swelling, deformity or discoloration.

TO TREAT A FRACTURE...

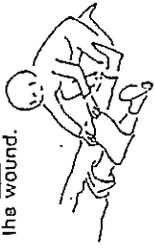
1 DON'T MOVE VICTIM

If absolutely necessary, move as little and as gently as possible. Support suspected broken bone area.



2 STOP BLEEDING

with a clean dressing. Do NOT wash or probe the wound.



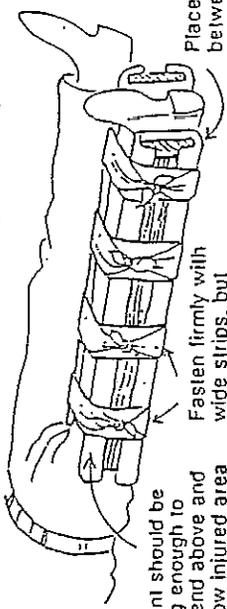
3 PLACE LIMB

in as normal and comfortable a position as possible without manipulating broken bone.



4 APPLY A SPLINT

(use board, oat, ski - rigid material).



Splint should be long enough to extend above and below injured area to nearest joint.

Place pad between skin and splint, and around end of board splint.

If victim is unconscious, assume spine injury

MORE ABOUT WOUNDS

WHAT TO DO FOR...

SURFACE INJURIES

Wash injury with soap and water. Rinse by flushing with clean water; blot dry. Apply clean, sterile bandage.

DEEP WOUNDS

Do NOT try to clean wound. Apply direct pressure. Keep area immobilized; if possible ELEVATE.

PUNCTURES

Clean skin surface; apply light bandage. Send victim to physician for tetanus booster shot.

TORN AWAY TISSUE

Severed body part might be reattached by a surgeon. Send it to hospital with victim. Place part in cloth moistened with cold water.

WATCH FOR INFECTION

REDNESS, TENDERNESS, SWELLING may mean INFECTION (invasion and growth of bacteria in body). If symptoms persist, SEE YOUR PHYSICIAN.

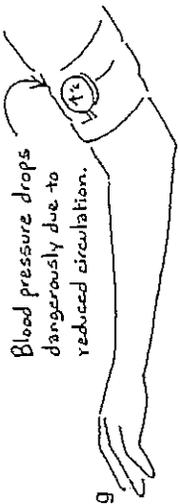


First aid for SHOCK

Shock is a failure of body systems to work. It is brought on by reduced blood circulation after sudden illness or accident.

SIGNS OF SHOCK

1. Cold, clammy, pale skin
2. Rapid, faint pulse
3. Quick, irregular breathing
4. Weakness, nausea.



IN CASE OF SHOCK...

1 TREAT CAUSES

of shock, breath stoppage, blood loss. Send for medical help.

2 KEEP VICTIM QUIET

...lying down and lightly covered to conserve body heat. (Blanket under victim if on ground.)



3 RAISE FEET

of conscious victim 8 to 12 inches unless victim has fractures in lower extremities or experiences increased breathing difficulty or pain with feet elevated.

4 IF VICTIM IS UNCONSCIOUS,

place victim on side to allow drainage of fluids.



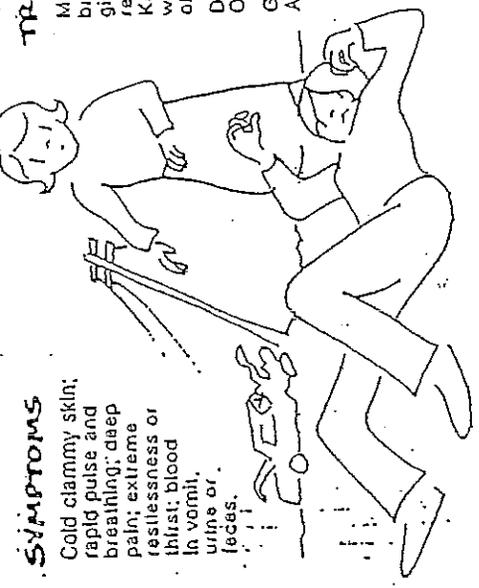
GET HELP AS SOON AS POSSIBLE! Shock can be fatal even though injuries associated with it may not be critical in themselves.

CLOSED WOUNDS

(injury to underlying tissue) May cause INTERNAL BLEEDING without visible sign of injury.

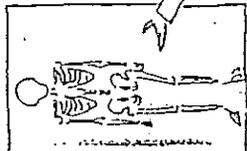
SYMPTOMS

Cold clammy skin; rapid pulse and breathing; deep pain; extreme restlessness or thirst; blood in vomit, urine or feces.



TREATMENT

Maintain open breathing passage; give artificial respiration if needed. Keep victim still and watch for signs of shock! DO NOT GIVE DRINK OR MEDICATION. GET MEDICAL CARE AS SOON AS POSSIBLE.



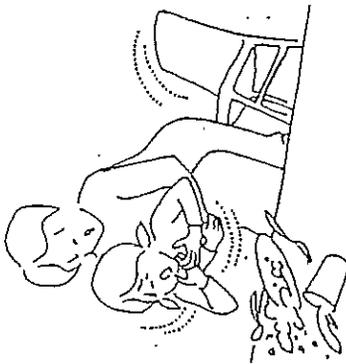
Injuries to the **SKELETAL SYSTEM**, including the bones, joints and ligaments, and to the adjacent soft tissues, are common in all types of major accidents.

FIRST AID FOR:

CHOKING

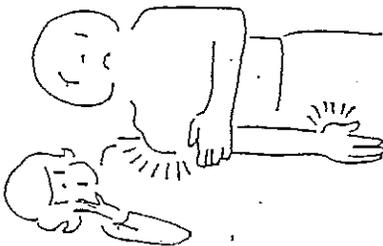
Conscious victim can't breathe, cough or speak due to object in airway.

Administer 4 quick back blows between shoulder blades with heel of your hand. If this fails, wrap arms just below ribs, placing thumb side of one fist against abdomen. Grasp fist with other hand and give 4 quick upward thrusts. Continue until object is expelled or victim begins to breathe or cough.



DISLOCATIONS

(displacement of the bone from joint, commonly at shoulder, elbows or fingers)

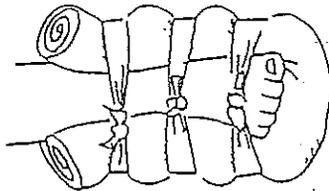


TREAT like a simple fracture - **spinal** and immobilize the affected part.

DON'T try to replace dislocated bones... this may cause further injury. Get medical help and x-ray promptly. Apply cold pack until help arrives. (Do not apply ice directly to skin.)

SPRAINS

(injury to tissue around the joint. Ankles, wrists, fingers, knees are most vulnerable.)



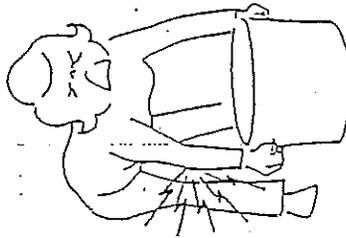
KEEP INJURED AREA IMMOBILE -

get victim's weight off it. Apply pillow, towel or blanket as "soft splint."

Elevate injured limb. Use cold wet packs to reduce swelling and pain. (Don't apply ice directly to skin.) Have injury x-rayed; it may be a fracture.

STRAINS

(muscle injuries resulting from overexertion, improper lifting, etc.)



Rest, elevate injured area, and apply cold wet packs to reduce swelling and pain. Resume exercise gradually after injury has healed.

If back is affected, place victim flat on a firm support and consult physician.

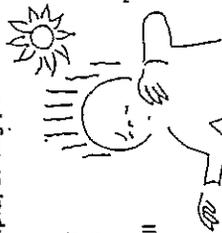
HEAT STROKE

Victim has very high temperature; hot, red skin; rapid, strong pulse.

REDUCE

temperature with cool water or alcohol rubs or cold packs.

DON'T overchill victim or give stimulants.



HEAT EXHAUSTION

Victim has normal temperature, pale clammy skin, sweating, weakness, nausea.

Help victim to lie down; apply cool, wet cloths.

Give SIPS of salt water for an hour (1 tsp. salt per glass).



FROSTBITE

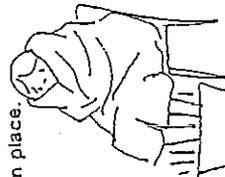
(Ice crystals in the skin tissue) Victim has flushed skin turning white or yellowish.

MOVE victim to warm place.

IMMERSE chilled tissue in warm (not hot) water.

PROVIDE extra clothing and blankets.

GIVE warm, non-alcoholic drinks.



COLD EXPOSURE

(hypothermia) Victim is shivering, numb, drowsy.

GET victim to warm place.

PROVIDE warm, dry clothes.

WRAP victim in blankets.

DO NOT rub skin.

GIVE warm drinks - NO ALCOHOL.



Victim must be moved, move with extreme caution.

ALWAYS SEEK MEDICAL HELP AFTER ADMINISTERING FIRST AID