



CPR

CPR

BASIC LIFE SUPPORT

CPR is one of the most important skills we can learn as parents. The purpose of CPR is to temporarily maintain sufficient circulation to preserve brain function. If your little one is **unresponsive and not breathing normally**, you must start CPR.



CPR

BASIC LIFE SUPPORT

D

DANGERS?

R

RESPONSIVE?

S

SEND FOR HELP

A

OPEN AIRWAY

B

NORMAL BREATHING?

C

START CPR

2 fingers for infants, 1 hand for children
30 COMPRESSIONS : 2 BREATHS

D

ATTACH DEFIBRILLATOR (AED)

As soon as available,
follow prompts



CHOKING

Choking

FIRST AID TREATMENT

Babies and children explore their world using their mouths. Everything they see they put in their mouths to taste it, feel it, and sense it. No matter your child's age, as parents, we need to be vigilant about choking hazards.



Choking

FIRST AID TREATMENT

PARTIAL OBSTRUCTION

(if your child has an effective cough)

- Use gravity and lean them forward
- Encourage them to keep coughing
- If the obstruction cannot be cleared, you must call 000

Note: If they lose their forceful cough use the next technique for a complete obstruction.

COMPLETE OBSTRUCTION

(if your child does not have an effective cough)

- DRSABCD
- Call 000
- Position your child in a head down position (infant across your lap and child sitting or standing up)
- Give up to five back blows using the heel of one hand, in between the shoulder blades - short and sharp

IF YOUR CHILD IS STILL CHOKING

- Give up to five chest thrusts using the heel of one hand for a child or two fingers for an infant, in the middle of the chest, between the nipples - short and sharp
- Check the airway between each chest thrust to see if the obstruction has cleared

IF YOUR CHILD IS STILL CHOKING

- Alternate between five back blows and five chest thrusts until the obstruction is cleared, paramedics arrive, or until they render unconscious
- If they fall unconscious, commence CPR

Note: The obstruction may clear during CPR compressions if this occurs roll your child on their side and clear the mouth



FEVERS

Fevers

FIRST AID TREATMENT

Fevers are normal and frequent in little ones over three months of age. A fever is one of the bodies natural defence mechanisms against infection, making it an unpleasant environment for the infection to be in.



Fevers

FIRST AID TREATMENT

TEMPERATURE RANGES

Average = 36°C to 38°C **Moderate** = 38°C to 39.5°C **High** = 39.5°C+

WHEN TO SEE A DOCTOR

- If their fever is greater than 38.5°C
- If your child is under three months old
- If they have a febrile convulsion
- If they are complaining of a stiff neck or if the light is hurting their eyes
- Vomiting and refusing to drink fluids
- If a rash presents
- They are sleepier than usual
- They have problems with breathing
- They are in pain
- They do not improve after 48 hours



AT HOME CARE

- Treat your child at home by making them comfortable
- Give your child frequent, small drinks or breastfeeds
- Provide your child with a warm flannel to the forehead for comfort (do not allow them to become too cold and do not put them in a cold shower or bath)
- Dress your child to the point where they are comfortable
- If they shiver, place a blanket over them until the shivering has stopped
- If they are uncomfortable or miserable provide them with paracetamol or ibuprofen as per manufacturer instructions



VIRAL
INFECTIONS

Viral Infections

FIRST AID TREATMENT

A virus is a germ that causes infections, such as the common cold, bronchiolitis, tonsillitis, ear infections, influenza, mumps and chickenpox. There are hundreds of different viruses, and it is common for a healthy child to have up to 12 different viruses a year.





Viral Infections

FIRST AID TREATMENT

VIRAL INFECTIONS

Viruses spread easily when children have close contact with others. Most infections are mild, and the best treatment is rest at home. Common viral infections include:

- Common cold
- The flu
- Ear infections
- Hand, foot and mouth disease
- Gastro
- Rashes

SIGNS AND SYMPTOMS

- Blocked or runny nose
- Red, watery eyes
- A sore throat
- A fever
- Rashes that blanch (it turns white when you push on the rash)
- Coughing or sneezing
- Vomiting and/or diarrhoea
- Drowsy or lethargic
- Not wanting to eat
- Feeling generally unwell

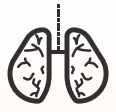
TREATMENT

See a GP if your child has:

- Pain that does not improve with pain relief
- Persistent vomiting and/or diarrhoea
- High fever that doesn't improve after 48 hours
- Refusal to drink or have an icy pole for six hours
- Rash or spot that does not blanch when you push on it
- Less than four wet nappies a day
- You are concerned for any other reason

Call 000 or go to the closest ED if:

- They are very pale or hard to wake
- They have trouble breathing
- They have a rash, a headache, stiff neck or back pain
- They feel unwell with a fever and a skin rash that has small, bright-red or purple dots and does not turn to skin-colour when you press on it
- They are three months or younger, are not feeding and have a fever

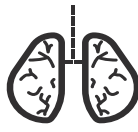


RESPIRATORY INFECTIONS

Respiratory Infections

FIRST AID TREATMENT

The respiratory system includes every part of the body that is responsible for breathing, including the lungs, the brain, the nervous system and the musculoskeletal system. Many infections can cause distress to the respiratory system, such as croup and bronchiolitis.



Respiratory Infections

CROUP

Croup is a viral infection of the upper airways which causes swelling, making the airway narrower and causing difficulty breathing. Croup most commonly affects children under 5 years old and often begins as a typical cold, developing into a harsh barking cough on the second or third night of the illness. Croup is often worse at night and usually lasts 3 to 4 days.

SIGNS AND SYMPTOMS

- Harsh barking cough
- Hoarse voice
- Squeaky noise when breathing (known as stridor)

TREATMENT

- Harsh barking cough + no breathing difficulties = treat at home and go to the GP if it's their first experience with croup
- Harsh barking cough + noisy breathing at rest = go to the emergency department or call 000
- Harsh barking cough + noisy or difficulty breathing and/or blue lips, look pale, drowsy, drooling or can't swallow = call 000 and commence DRSABCD

BRONCHIOLITIS

Bronchiolitis is a common chest infection in infants up to 12 months, most commonly developing in infants under six months old. Bronchiolitis is most often caused by a virus and results in inflammation and mucus build up in the airways of the lungs, causing difficulty breathing.

SIGNS AND SYMPTOMS

- Fast breathing
- Noisy or wheezy breathing
- Nostril flaring, head bobbing or sucking in of the spaces between the ribs and around the clavicle
- Difficulty or decreased feeding, eating and drinking
- Irritable mood
- Fever

TREATMENT

Can be treated at home with the help of GP. If they show any signs of respiratory distress, you should:

1. DRSABCD
2. Call 000 for an ambulance
3. Provide lots of reassurance to your baby to keep them as quiet and calm as possible
4. Position your child sitting up
5. Remain with them until the ambulance arrives



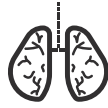
ASTHMA

Asthma

FIRST AID TREATMENT

Asthma is a common, long-term condition that affects the smaller airways in the lungs and can cause respiratory distress. One in nine Australians have asthma.





Asthma

TRIGGERS

Lots of different things can trigger an asthma attack including:

- Colds - the most common trigger that starts an acute attack of asthma is a respiratory (chest) infection caused by a virus
- Exercise
- Changes in the weather
- Cigarette smoke
- House dustmites
- Pollens
- Pets

SIGNS & SYMPTOMS

The most common signs of asthma are:

- **COUGHING** - which usually happens at night, during the early hours of the morning, when the weather is cool and during exercise.
- **WHEEZING** - when breathing sounds like whistles.
- **BREATHING PROBLEMS**

If you notice your child is wheezing or experiencing breathing problems you must talk with your doctor about whether it might be asthma.

TREATMENT

Signs of worsening asthma can be difficult to recognise in children.

Asthma can worsen quickly and children may complain of a sore tummy or chest and be more restless. **DO NOT DELAY** in starting asthma first aid.



If the child is experiencing a severe or life-threatening asthma attack, call an ambulance - **Dial Triple Zero (000)** and then start asthma first aid. If this child is experiencing a mild to moderate asthma attack, start asthma first aid.



RASHES

Rashes

FIRST AID TREATMENT

Rashes are super common in little ones, and mostly caused by viral infections. The good thing is that the majority of rashes are harmless. It's essential for parents to understand the difference between harmless and potentially life-threatening rashes.



Rashes

TYPES

Common childhood rashes:

- Hand, Foot and Mouth Disease
- Chickenpox
- Hives
- Roseloa Infantum
- Slapped Cheek

Life-threatening rashes:

- Meningococcal
- Measles
- Meningitis
- Sepsis

SIGNS & SYMPTOMS

If your child has a mild rash they may experience any combination of:

- Red, flat areas
- Raised bumps
- Blisters
- Welts
- Itching
- They turn white when you press on them (blanch)

If your child has a life-threatening rash they may experience:

- Small, bright-red or purple spots or bruises
- They don't turn white (blanch) when you press on them

TREATMENT

- Most rashes will get better on their own
- If the rash is itchy, talk to your local pharmacist about treatments to help relieve itching
- If the virus associated with the rash is causing pain, you can give ibuprofen or paracetamol per the manufacturer's instructions

You should see a GP if:

- Your child also has a fever
- Your child has a headache
- Your child has a stiff neck or back pain
- You are concerned for any reason
- If your child has a rash of small, bright-red or purple spots or bruises that do not turn white (blanch) when you push on it - **call 000 or go to the ED**



ANAPHYLAXIS

Anaphylaxis

FIRST AID TREATMENT

Approximately 10 in 1000 of all school-aged children will develop anaphylaxis. Anaphylaxis is a severe, life-threatening allergic reaction that should always be treated as a medical emergency. Anaphylaxis develops when a patient is exposed to a trigger, causing their body to produce a widespread inflammatory response.





Anaphylaxis

SIGNS & SYMPTOMS

MILD TO MODERATE

- Facial swelling
- Stomach pain, vomiting and diarrhoea
- Hives or welts
- A tingling sensation in or around the mouth

SEVERE (ANAPHYLAXIS)

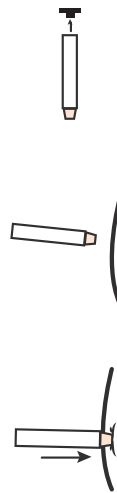
We refer to a severe allergic reaction as anaphylaxis when it involves the child's breathing and circulation systems. The following symptoms indicate an anaphylactic reaction, and will be present along with the above mild to moderate symptoms:

- Swelling of the tongue
- Tightness and swelling of the throat
- Noisy breathing and difficulty breathing
- Coarse voice and difficulty speaking
- Pale in colour
- Decreased conscious state and/or floppy state
- Loss of consciousness and/or collapse

FIRST AID TREATMENT

The treatment for anaphylaxis involves the administration of a medication called adrenaline, through the use of an auto-injector.

Once you have identified that your child is suffering from an anaphylactic reaction, you should:



- 1 Ensure the child is remaining still - either lying flat or sitting up
- 2 Form a fist around the EpiPen and pull of the blue safety cap
- 3 Hold the leg still and place the orange end against mid outer thigh (with or without clothing)
- 4 Push down hard until a click is heard or felt and hold for 3 seconds
- 5 Remove EpiPen



BURNS
AND
SCALDS

Burns AND Scalds

FIRST AID TREATMENT

Burns and scalds are the leading cause of injury for young children with toddlers being most at risk due to their natural curiosity and increasing ability to move around. The majority of these burns and scalds are caused by household dangers such as hot bath water and hot liquids such as tea and coffee.



Burns AND Scalds

COMMON CAUSES



SCALDS

- Boiling water and steam
- Hot bath water
- Coffee and tea
- Hot foods and cooking fluids



CONTACT BURNS

- Contact with hot objects
- Contact with open flames



CHEMICAL BURNS

- Ingested, inhaled or spilt on skin



ELECTRICAL BURNS

- Power sockets and electrical cords



SUNBURN

- Remember their soft feet in summer!

FIRST AID TREATMENT

- DRSABCD
- Place the burn under cool running water for 20 minutes, immediately
- Remove jewellery and non-adherent wet clothing around burned area
- Remember to remove their nappy!
- Prevent hypothermia by covering your child with a blanket
- After cooling the burn for 20 minutes apply a non-stick dressing such as glad wrap (this helps to keep fluid in, infection out, and assists with pain)
- Call 000 if burn is to the face, airway or genitalia, larger than your child's hand or if they are in extreme

PLEASE DO NOT APPLY ICE, CREAMS, GELS, OINTMENTS, OR POP BLISTERS.



POISONING

Poisoning

FIRST AID TREATMENT

Accidental poisoning can occur in your little one when they unintentionally come into contact with a substance that can cause harm to the body. Most incidents occur in children aged one to three years, as this is a time of exploration and learning.



Poisoning

FIRST AID TREATMENT

WHAT IS POISONING?

Poison is classified as a substance capable of causing illness or death when absorbed. Many products in the average Australian household can be potentially harmful to our little ones including:



- Medications and drugs



- Cleaning items
- Cosmetics



- Various household items including garden pesticides, glue, batteries, petrol, alcohol and industrial chemical



- Poisonous plants



- Bites and stings from poisonous animals

Poisons can be inhaled, spilt on the skin, swallowed, splashed in the eye, ear or injected.

IF YOU SUSPECT YOUR CHILD TO

BE POISONED YOU SHOULD:

- Follow DRSABCD
- Call the Poisons Information line 13 11 26 immediately (open 24/7)
- If possible keep the container and estimate how much was consumed
- If the child becomes unconscious, experiences a seizure, develops anaphylaxis or has trouble breathing call 000

PLEASE DO NOT:

- Do not induce vomiting if they have swallowed the substance
- Do not wait for the child to develop symptoms
- Call 000 before calling the poisons information line unless your child is showing severe symptoms