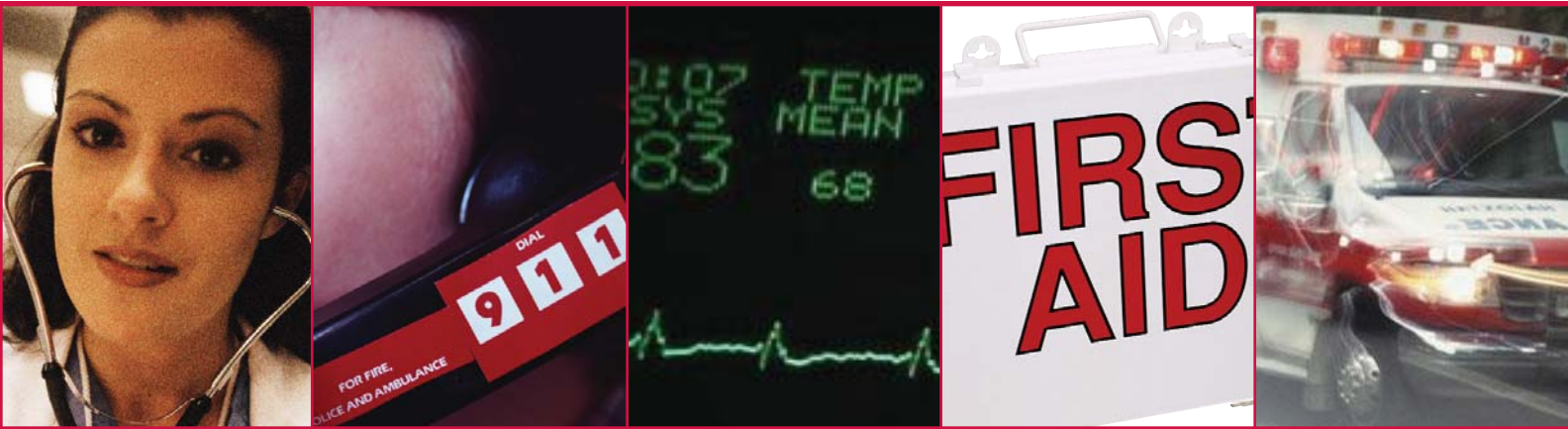


What to do during...



Medical Emergencies

- Calling 911 • Reacting in an Emergency • Performing CPR • Providing Rescue Breathing • Delivering Abdominal Thrusts •
- Formulating an Emergency Action Plan • Assembling Your First Aid Kit • Preparing for a Disaster •



**BlueCross BlueShield
of Nebraska**

An Independent Licensee of the Blue Cross and Blue Shield Association.



SELF-CARE ESSENTIALS[®]
A Simple Guide to Managing Your Health Care and Living Well

When Should You Call 911?

When to Call 911

There are times when a medical condition is so severe that it requires immediate, professional, medical assistance. But how can you tell the difference between a minor problem and a medical emergency—especially when minor problems may mimic the early warning signs of other serious and life-threatening conditions?

The following 15 symptoms are signs of serious medical emergencies. In an emergency situation, the American Red Cross recommends that you first check the scene, then call 911, then deliver care to the victim. In emergency situations, seconds can save lives. The following 15 symptoms are signs of medical emergencies—call 911 immediately.



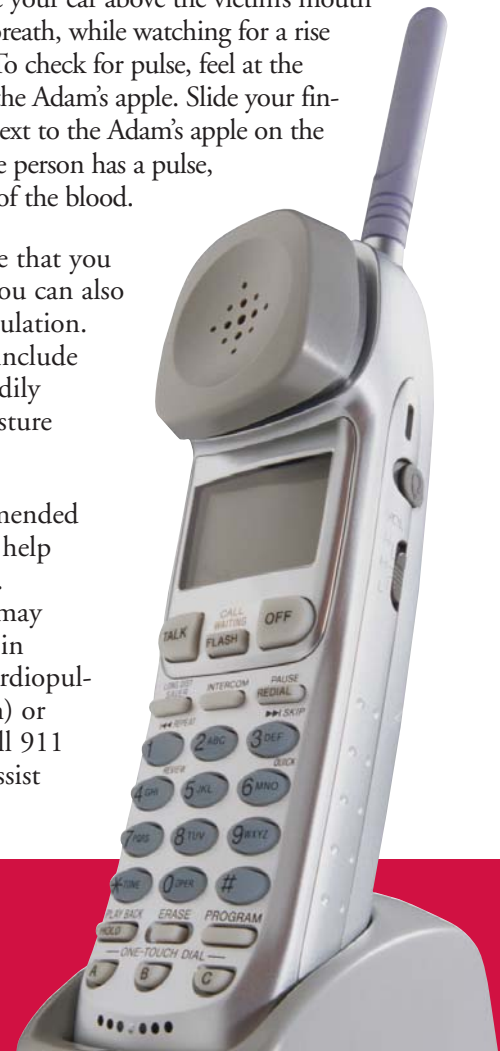
15 Conditions

1 Shortness of Breath—Your body needs a sufficient air supply to provide your vital organs and cells with oxygen for life. Shortness of breath can be a symptom of a number of serious medical conditions including heart attack. Anyone who is short of breath while at rest, or cannot determine the cause of shortness of breath needs immediate medical attention—call 911.

2 No Breath or Pulse—If a victim is not breathing or has no pulse, call 911 immediately. To check for breathing, place your ear above the victim's mouth to listen and feel for breath, while watching for a rise and fall of the chest. To check for pulse, feel at the front of the neck for the Adam's apple. Slide your fingers into the groove next to the Adam's apple on the side of the neck. If the person has a pulse, you will feel the beat of the blood.

If you are unsure that you are feeling a pulse, you can also look for signs of circulation. Signs of circulation include color in the skin, bodily movement, and moisture (i.e., perspiration).

It is also recommended that you request the help of those around you. Those on the scene may be able to assist you in performing CPR (cardiopulmonary resuscitation) or may be willing to call 911 for you, while you assist the victim.



3 Chest or Upper-Abdominal Pain or Pressure— Chest or upper-abdominal pain or pressure can be a sign of a serious, life-threatening issue—especially if the pain spreads to the neck, arms, and jaw. In fact, these are classic signs of a heart attack. A heart attack occurs when blood flow to a portion of the heart is restricted. Seeking emergency medical attention immediately is vital if an individual is suffering from these symptoms. In fact, studies show that 75 percent of people survive heart attacks with little or no heart damage if they seek emergency care within 60 to 70 minutes of the onset of symptoms.

4 Unconsciousness—Emergency situations that involve a loss of consciousness are always serious. And because the causes of unconsciousness include heart attack, head injury, stroke, diabetes, or shock—just to name a few—an unconscious person always needs immediate, emergency medical attention—call 911.

5 Possible Spinal or Neck Injury—Neck or spinal injuries can result in paralysis. If you suspect a possible neck or spinal injury, DO NOT attempt to move the victim unless he or she is in grave danger. Injuries to the neck and spine can be made worse if the victim is moved without the help of trained emergency medical personnel—call 911.

6 Disorientation—Disorientation can be the sign of many serious medical conditions. An individual who becomes disoriented after previously being alert should seek emergency medical care immediately. You may assess someone who's disoriented by asking three simple questions: What day is it? Where are you? And, what's your name? A person who cannot remember their name is usually in the most serious danger. Regardless of how the questions are answered, anyone who suddenly becomes disoriented needs immediate, emergency care—call 911.

7 Sudden Severe Pain—Although sudden, severe pain may not necessarily indicate a serious medical condition, it should be treated as an emergency, if for no other reason than to relieve the pain. Level of pain, too, is subjective, but if an individual complains of sudden, severe pain—the worst pain they have ever experienced—it

should always be taken seriously as it offers a physician the opportunity to thoroughly examine the person and discover the source of the pain.

8 Bleeding That Can't Be Controlled—Most bleeding should stop within a few minutes if direct pressure is applied to the wound. If a wound bleeds profusely for more than four to five minutes, call 911.

After calling 911, attempt to stop the bleeding by elevating the wound and applying direct pressure to it with a clean cloth until medical help arrives.

Conditions 9 through 15 continued on the following page...



“There are over 100 million visits to hospital emergency rooms each year in the United States.”

When Should You Call 911?

Continued...

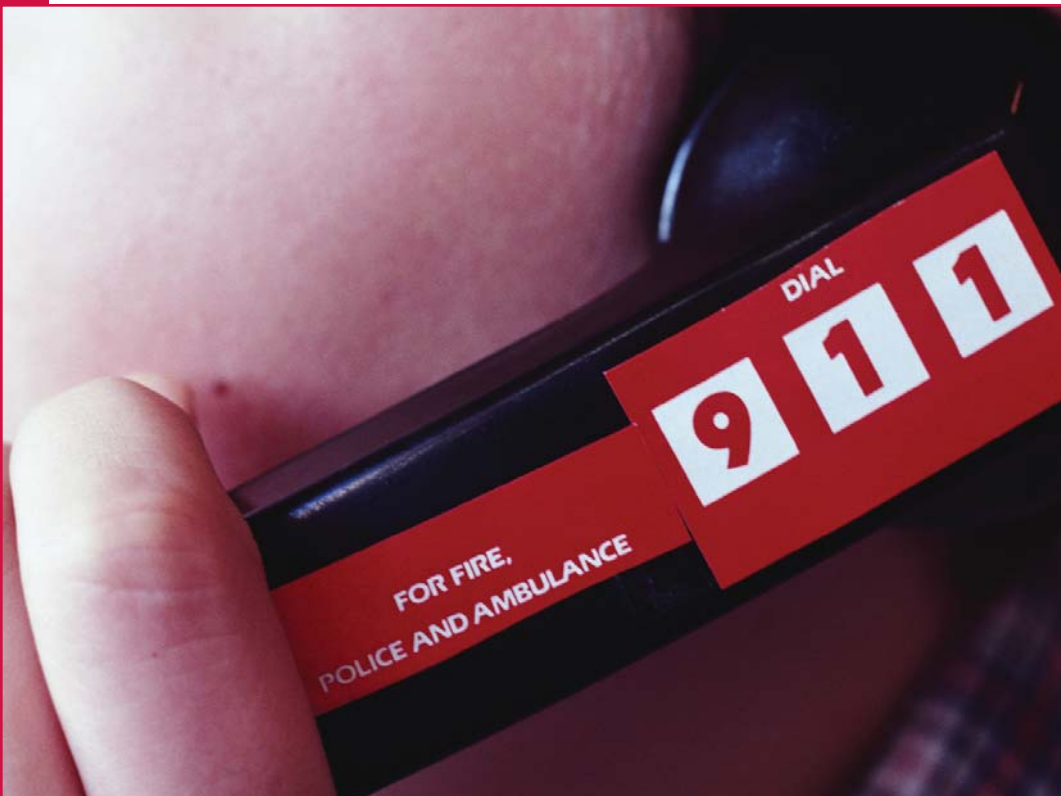
9 Severe or Persistent Vomiting—Vomiting is your body’s way of getting rid of toxic and potentially harmful substances. Severe or persistent vomiting could be a sign of poisoning, overdose, or Reye’s syndrome in children. Additionally, severe or persistent vomiting can quickly result in dehydration. If an individual is vomiting continuously, or if the vomiting is excessively violent, call 911.

10 Coughing or Vomiting Blood—Coughing or vomiting blood can be a sign of a serious medical condition including lung cancer, heart disorders, pneumonia, or tumors in the stomach or esophagus, just to

mention a few. Sometimes it can be difficult to tell the difference between coughing or vomiting up blood, but it matters little—call 911 if you are coughing or vomiting blood.

11 Major Injury or Trauma—Common sense will normally tell us when an injury is traumatic enough to seek emergency medical care. Obvious examples of major injuries include broken bones, gun shot wounds, deep cuts, head injuries, etc. If you have doubts as to whether an injury is serious enough to warrant emergency medical care, it is far better to be safe than sorry. If you are unsure, or have any doubts about your condition, seek medical care immediately—call 911.

12 Feeling of Impending Doom—It is not unusual for individuals experiencing serious medical conditions to feel a sense of impending doom. This is especially true during traumatic experiences like heart attacks. In fact, a sense of impending doom is a key symptom of a heart attack and other serious medical conditions. Trust your instincts—if you feel a sense of impending doom, get emergency medical care right away—call 911.





13 Sudden Vision Changes or Loss—A sudden change in vision or vision loss can indicate a number of serious conditions including retinal detachment, sudden glaucoma, stroke, or any number of systemic eye diseases. In some cases, a sudden change or loss of vision may be irreversible if emergency medical attention is not sought immediately—call 911.

14 Suicidal or Homicidal Feelings—Anytime an individual experiences suicidal or homicidal feelings, immediate, emergency medical care and intervention should be sought. Doing so can help prevent unnecessary loss of life for the individual or those around them. Such feelings may indicate the presence of depression or other mental disorders, many of which are very treatable—nevertheless, call 911.

15 If You Are Unsure About What to Do in An Emergency Situation—It’s often difficult to differentiate between minor and major medical conditions. Both serious and minor conditions may share similar symptoms that easily blur the line between them. If you’re ever in doubt whether a condition is serious or not, or if you are unsure about how to treat a condition, it’s important to seek the assistance of emergency medical personnel—call 911.

! Key Point: Resist the urge to transport any person experiencing a medical emergency in your own vehicle.
● Instead, call 911 and follow any instructions given.

EMERGENCY NUMBERS

Emergency Services

911

National Poison Control

1-800-222-1222

Family Physician

Pediatrician

Close Relatives/Friends

Nurse Lines/Other

Address of Local Hospital

“Approximately 268,000 calls are made to emergency services (911) each day in the United States.”

What To Do In An Emergency

Emergency Situations

During an emergency situation, how you react, and how you care for the injured individual, can mean the difference between life and death. Do you know how to respond in an emergency?

The 3Cs For Reacting To An Emergency

The three basic steps to responding to a medical emergency include **checking** the scene and the victim, **calling** 911 or other emergency services, and **caring** for the victim. Let's take a closer look at each step.



1 **Check The Scene And The Victim**—When coming upon an emergency, it's important to check the surrounding area for safety, as well as to check a victim's condition. Four main questions will help you do this most effectively. These questions are:

- ✓ Is the scene safe?
- ✓ What happened?
- ✓ How many victims are there?
- ✓ Can bystanders help?

Assessing the scene for safety means quickly scanning the area to search for objects or dangerous situations that still remain. If you determine that the scene is unsafe, **DO NOT INTERVENE**—call 911 immediately.

If the scene is safe, check the victim. Try to determine what happened by speaking with the victim. If the victim is unconscious, try to gather as much information about the emergency and the victim's condition as possible—assess the scene and ask bystanders for input. This information is critical to emergency services personnel. Also, don't forget to look for additional victims, and never be afraid to ask bystanders for help.

2 **Call 911**—Calling 911 may be the most important thing you can do when you encounter an emergency medical situation. It is preferable, if possible, to have a bystander call 911, so you can remain with and care for the victim. (*Refer to the section entitled, **When Should You Call 911?** for more information.*)



If possible, have a bystander call 911 during an emergency, so you can stay with the victim.

When calling 911, be prepared to give the dispatcher the following information:

- ✓ State the location of the emergency
- ✓ If possible, give the dispatcher the phone number you're calling from
- ✓ State your name
- ✓ Tell the dispatcher what happened
- ✓ Tell the dispatcher how many people are involved
- ✓ Explain the condition of the victim(s)
- ✓ Tell the dispatcher what, if any, first aid is being given

! Key Point: Do not hang up the phone until the dispatcher hangs up or until you are instructed to hang up.

3 Care For The Victim—If the victim is conscious, the American Red Cross suggests that you tell the victim who you are, share with them how you will attempt to help them, inform them as to how much training you have, and ask for permission to care for them. If the victim refuses care, respect their wishes, and wait for emergency care to arrive. If the victim desires care, begin first-aid procedures as appropriate (see the ABCs in this section). If the victim is an unconscious adult, permission to care for the victim is implied. If the victim is a child and no guardian can be found, permission to care for him or her is implied. Otherwise, permission must be sought from the child's supervising adult.

If you come across an unconscious individual, care begins with a critical assessment. This assessment evaluates the victim's ABCs—**A**irway, **B**reathing, and **C**irculation.

Airway—If there is no trauma, check the person's **A**irway by tilting the head and lifting the chin. If there is trauma, with index finger and thumb, lift forward on the person's jaw.

Breathing—Is the person breathing? To check for breathing, place your ear above the victim's mouth to listen and feel for breath, while watching for a rise and fall of the chest. If there is no breathing, give two breaths. If the chest still does not rise, reposition the head and give one more breath. If the chest still does not rise, give abdominal thrusts. (see *Abdominal Thrusts* section)

Circulation—Does the victim have a pulse? To check for pulse, feel at the front of the neck for the Adam's apple. Slide your fingers into the groove next to the Adam's apple on the side of the neck. If the person has a pulse, you will feel the beat of the blood.

If you are unsure that you are feeling a pulse, you can also look for signs of circulation. Signs of circulation include color in the skin, bodily movement, and moisture (i.e., perspiration).

The status of the victim's **airway**, **breathing**, and **circulation**, will determine the type of care you provide—CPR, rescue breathing, or abdominal thrusts may be necessary. See the following pages for information on these procedures.



“In an emergency, remember the Three Cs: Check the scene and the victim, Call 911, and Care for the victim.”

Giving CPR

About Giving CPR

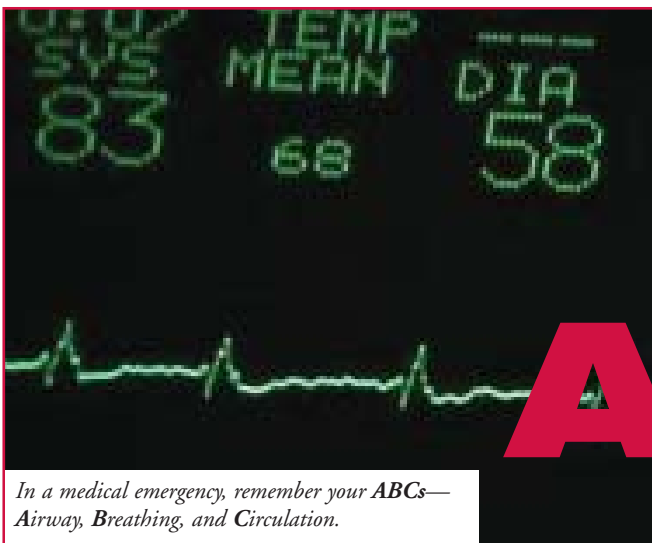
CPR can be an important process for helping to ensure the survival of a victim whose heart has stopped beating. When the heart stops beating (known as cardiac arrest) breathing also stops, and without CPR and immediate medical attention, it's likely that the victim will die.

CPR involves the combination of rescue breathing and chest compressions to circulate oxygenated blood to the brain and other vital organs. Although CPR isn't as effective as normal respiratory and cardiovascular functioning, it's an important lifeline during an emergency.

Before You Begin

Before performing CPR on a victim who appears to be unconscious, gently shake the individual, asking if they're OK. If the victim is unresponsive, shout for help or call 911.

While waiting for emergency services to arrive—and prior to performing CPR—it's important to perform a critical assessment. This assessment evaluates the victim's ABCs—Airway, Breathing, and Circulation.



In a medical emergency, remember your ABCs—Airway, Breathing, and Circulation.

Airway—If there is no trauma, check the person's airway by tilting the head and lifting the chin. If there is trauma, with index finger and thumb, lift forward on the person's jaw.

Breathing—Is the person breathing? To check for breathing, place your ear above the victim's mouth to listen and feel for breath, while watching for a rise and fall of the chest. If there is no breathing, give two breaths. If the chest still does not rise, reposition the head and give one more breath. If the chest still does not rise, give abdominal thrusts. (see *Abdominal Thrusts* section)

Circulation—Does the victim have a pulse? To check for pulse, feel at the front of the neck for the Adam's apple. Slide your fingers into the groove next to the Adam's apple on the side of the neck. If the person has a pulse, you will feel the beat of the blood.

If you are unsure that you are feeling a pulse, you can also look for signs of circulation. Signs of circulation include color in the skin, bodily movement, and moisture (i.e., perspiration).

If the victim has a pulse, DO NOT perform CPR. Performing CPR on a victim whose heart is beating can cause serious damage. If the victim is not breathing, but has a pulse, perform rescue breathing (refer to the next section). If the victim has no pulse, and is not breathing, it's time to begin CPR.

If the victim is breathing and has a pulse, but is unresponsive, and has not experienced serious trauma, place the victim on their side. This is known as the recovery position.

Performing CPR

Step 1: Place the victim on their back, tilting their head backwards to open breathing passages.

Step 2: Give rescue breaths. It is recommended that you use a face shield or pocket mask to give rescue breaths. Pinch the victim's nostrils closed if necessary. If you do not have a face shield or pocket mask, you may choose to perform chest compressions only (see step 3 below). Provide two full breaths to the victim. If the chest does not rise when you deliver these breaths, you may have missed an item blocking the victim's airway. Reposition the head and deliver one more breath. If the chest still does not rise, perform abdominal thrusts. (See *Abdominal Thrusts* section).

Step 3: Begin giving chest compressions by positioning your hands over the lower part of the victim's breast bone, where the ribs and breast bone meet. Position your bodyweight over your arms (do not bend your elbows) and use your upper bodyweight to compress the chest approximately two inches. After compressing the chest 15 times, deliver two more rescue breaths.

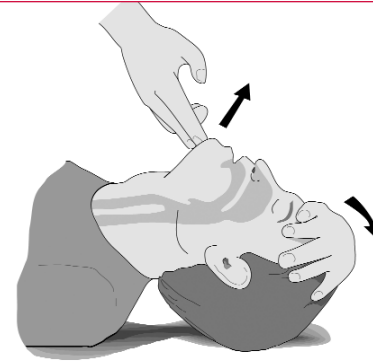
Step 4: You must administer four complete cycles of 15 chest compressions and two breaths before rechecking for breathing and pulse. Deliver compressions at a rate of 100 per minute. If there is no pulse or breathing after one minute (four complete cycles of 15 compressions and two breaths), continue delivering four more complete cycles of 15 chest compressions and two breaths—checking for pulse and breathing at one minute intervals—until medical personnel arrive.

When To Stop Giving CPR

There are only a few situations when it's appropriate to stop giving CPR. They are as follows.

1. If the victim's heartbeat and breathing resume.
2. If another trained person takes over CPR for you.
3. If emergency medical services (EMS) personnel arrive and take over care of the victim.
4. If you are exhausted and are physically unable to continue.
5. If the scene becomes unsafe.

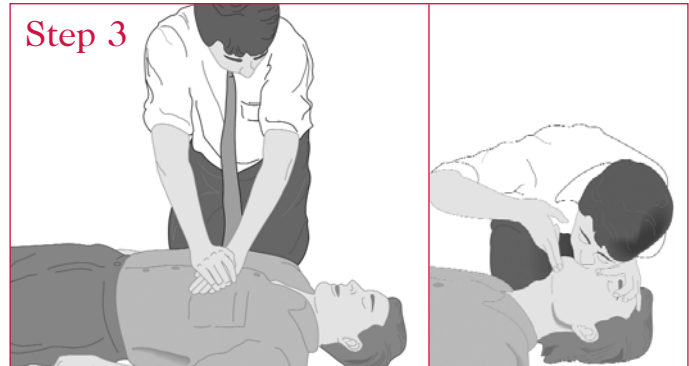
Step 1



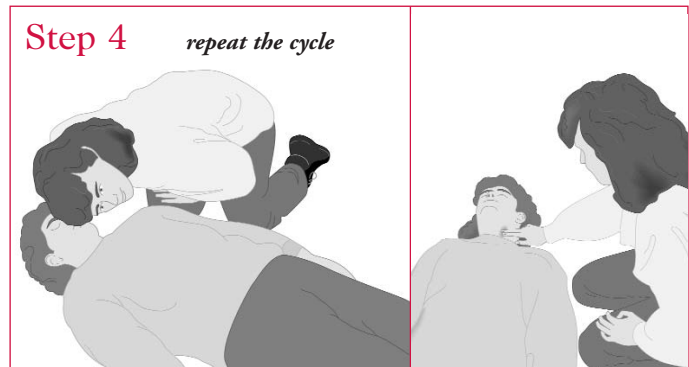
Step 2



Step 3



Step 4 *repeat the cycle*



“Seventy-five percent of all out-of-hospital cardiac arrests occur in the home. Learning CPR can save a life.”

Rescue Breathing



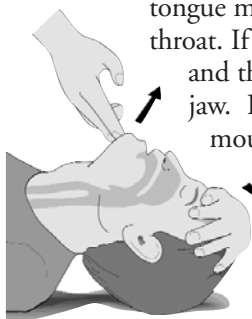
About Rescue Breathing

Rescue breathing is given to someone who is unconscious and not breathing, but DOES have a pulse. In an emergency such as this, you must provide air to the victim, so that he or she can stay alive.

Giving Rescue Breathing

To give rescue breathing, follow the four steps listed here.

Step 1: If you suspect a person is not breathing, place the victim flat on their back, tilt their head back, and lift their chin so that the tongue moves away from the back of the throat. If there is trauma, with index finger and thumb, lift forward on the person's jaw. Place your ear above the victim's mouth to listen and feel for breath, while watching for a rise and fall of the chest, indicating breathing. If, after five seconds, the victim isn't breathing, you'll need to perform rescue breathing.



Step 2: Pinch the victim's nose closed and form a tight seal around their mouth with your barrier device. Provide two breaths each lasting 2 seconds. (If the victim's chest does not rise, the airway is likely blocked. Reposition the head, deliver one more breath. If the chest still does not rise, perform abdominal thrusts—see the next section).

Preventing Disease Transmission

During an emergency, when blood or other bodily fluids are present, there is an increased risk of disease transmission. The best way to prevent exposure to disease is to be prepared. Stock your first aid kit with items that can reduce the chance of exposure to bodily fluids. These items include:

- ✓ Disposable gloves
- ✓ Eye protection
- ✓ A face shield or pocket mask (for rescue breathing)

Step 3: After providing two breaths, check for a pulse. If the victim has a pulse, but isn't breathing, continue providing one breath every five seconds. After 10 to 12 breaths, recheck the victim's pulse. (If, during rescue breathing, you discover the victim has no pulse or no signs of circulation, provide CPR—see previous section).

Step 4: Continue rescue breathing, rechecking for a pulse every 10 to 12 breaths.

When to Stop Rescue Breathing

- ✓ If emergency medical personnel arrive
- ✓ If the person begins breathing on their own
- ✓ If someone takes over rescue breathing for you
- ✓ If you are physically unable to continue
- ✓ If the scene becomes unsafe

The best preparation for an emergency situation is to get certified in first aid and CPR. Contact the American Red Cross to find out how you can get certified.

Source: American Red Cross

“Pinch the victim's nose closed and form a tight seal around their mouth with your barrier device. Provide two breaths each lasting 2 seconds.”

Abdominal Thrusts

Giving Abdominal Thrusts

Abdominal thrusts are commonly performed when an individual is choking. Look at the procedures below to learn how you can help a choking person.

Giving Abdominal Thrusts to a CONSCIOUS Victim

Step 1: Do not begin rescue procedures if a victim can speak, cough, or breathe. Instead, encourage the victim to continue coughing. If a person continues choking, dial 911 immediately. If the airway becomes completely blocked (victim cannot speak, cough, or breathe) begin abdominal thrusts.

Step 2: Stand behind the victim, wrapping your arms around their waist. Make a fist with one hand, placing the thumb-side against the victim's abdomen above the navel and below the rib cage.

Step 3: Grab your fist with your other hand, giving quick, inward, and upward thrusts. Repeat until the object is cleared.



Giving Abdominal Thrusts to an UNCONSCIOUS Victim

Step 1: If a person is unconscious and not breathing, dial 911 before providing care.

Step 2: Place the victim on their back. Straddle the victim's legs, placing the heel of one of your hands on the middle of the abdomen just above the navel.



Step 3: Place your other hand on top of your first hand with fingers pointed towards the victim's head. Give five quick thrusts towards the head and into the abdomen.

Step 4: After five thrusts, check the victim's mouth for the obstruction and remove it if possible. Repeat thrusts until object is dislodged or emergency personnel arrive. After the item is dislodged, provide further care such as rescue breathing or CPR if needed (see previous sections).

Giving Abdominal Thrusts To Yourself

Step 1: Position a fist just above the navel.

Step 2: Grab your fist with your other hand and thrust upward into your abdomen until the object is expelled. Leaning over a chair will produce the same effect.

! Key Point: After any choking incident, the victim should visit the ER for follow up care.

! Key Point: Chest thrusts should be used in place of abdominal thrusts on pregnant females.

Source: American Red Cross

“Approximately 3,000 people die each year from choking—many of these deaths can be avoided by performing abdominal thrusts.”

Your Emergency Action Plan








Seconds Save Lives

By their very nature, medical emergencies happen quickly and without warning. Having an action plan, the right tools and resources, and arming yourself with key pieces of knowledge can mean the difference between life and death when seconds count.

Your emergency action plan should include four key elements—prevention, preparation, recognition, and decision-making.

Preventing Emergencies

You and your loved ones can reduce the likelihood of medical emergencies by, first and foremost, staying up-to-date on medical exams and checkups. You should also:

-  **Always wear a seatbelt**
-  **Eat a balanced diet**
-  **Follow safety instructions** when cooking, working outside, etc.
-  **Wear protective gear** (helmets, pads, etc.)
-  **Never drink and drive**
-  **Avoid all tobacco products**
-  **Exercise regularly**

Preparing for Emergencies

Even with efforts to prevent emergencies, occasionally they still occur. Prepare yourself for emergencies in the following ways:

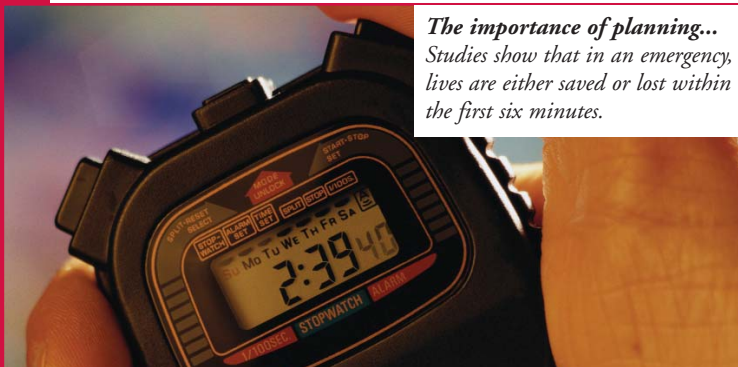
- ! Keep a well-stocked first aid kit at home, at work, and in your car (see the following section for contents)
- ! Understand what constitutes an emergency (*Refer to the section entitled, **When Should You Call 911?** for more information*).
- ! Keep written records of important medical information
- ! Take a first aid and CPR class
- ! Post emergency numbers near your telephone

Recognizing Emergencies

Some situations require emergency medical care—in the following instances, call 911:

1. Shortness of Breath
2. No Pulse or Breath
3. Chest or Upper-Abdominal Pain or Pressure
4. Unconsciousness
5. Possible Spinal or Neck Injury
6. Disorientation
7. Sudden Severe Pain
8. Bleeding that Can't be Controlled
9. Severe or Persistent Vomiting
10. Coughing or Vomiting Blood
11. Major Injury or Trauma
12. Feeling of Impending Doom
13. Sudden Vision Changes or Loss
14. Suicidal or Homicidal Feelings
15. If You Are Unsure About What to Do

*The importance of planning...
Studies show that in an emergency,
lives are either saved or lost within
the first six minutes.*



EMERGENCY NUMBERS

Emergency Services

911

National Poison Control

1-800-222-1222

Family Physician

Pediatrician

Close Relatives/Friends

Nurse Lines/Other

Address of Local Hospital

Keeping Emergency Information At Hand

When an emergency strikes, there's little time to react. Having important information such as key phone numbers or emergency instructions at hand during an emergency can save valuable time when seconds count. A chart for keeping track of important phone numbers has been included on this page.

In addition to important emergency contacts, other important information and medical forms should be kept on hand and ready for emergency personnel. Forms to keep on hand include:

- **Medical Treatment Consent Forms**—A medical treatment consent form designates a specific person to make important medical decisions for a minor when parents/guardians are unavailable.
- **Emergency Information for Children with Special Needs**—This information typically outlines any chronic conditions a child may have, as well as specific allergies, and prior medical history.
- **Personal Medical History Form**—By providing emergency services personnel with a medical history, valuable time may be saved, and mistakes may be avoided.
- **Medical Contact Form**—In the case that you or a loved one is injured, having a medical contact form saves emergency services personnel valuable time in notifying family members.

Deciding to Act

In an emergency, time is critical. When seconds count, one of the most important things you can do is to make the decision to help out. Whether it's calling 911, comforting a victim, or providing life-saving care, making the decision to act may be just as important as knowing what to do. If you don't help, who will?

“When seconds count, one of the most important things you can do is to make the decision to help out.”



Assembling A First Aid Kit

What to Include in Your First Aid Kit

Having a well-stocked first aid kit will enable you and your family to respond appropriately when faced with an emergency. The American College of Emergency Physicians recommends that you keep the following items in your first aid kit:

- ✦ A first aid manual
- ✦ Emergency phone numbers and information (see previous section)
- ✦ A list of allergies (a separate list for each household member)
- ✦ A list of prescribed medications (a separate list for each household member)
- ✦ Pain relievers (acetaminophen, ibuprofen, and aspirin—keep at least two tablets of aspirin at all times in case of heart attack)
- ✦ Cough suppressant ✦ Antihistamines

- ✦ Oral medical syringe (to administer medication to children)
- ✦ Fluids to use for oral hydration when treating infant diarrhea (Pedialyte or Infalyte)
- ✦ Bandages of assorted sizes
- ✦ Triangular bandages (to wrap injuries or create an arm sling)
- ✦ Elastic wraps (to wrap wrist, ankle, knee, and elbow injuries)
- ✦ Gauze in rolls and gauze pads in 2 and 4 inch sizes
- ✦ Disposable, instant-activating cold packs
- ✦ Sharp scissors with rounded tips
- ✦ Safety pins
- ✦ Antiseptic wipes
- ✦ Antibiotic ointment
- ✦ Adhesive tape
- ✦ Hydrogen peroxide
- ✦ Tweezers
- ✦ Rubber gloves
- ✦ Thermometer
- ✦ Petroleum jelly
- ✦ Calamine lotion
- ✦ Hydrocortisone cream
- ✦ Decongestants

! Key Point: Remember to keep a first aid kit in the three most common places you'll need one—at work, at home, and in the car.

*Source: The American College of
Emergency Physicians*



Preparing For A Disaster

Your emergency supply kit should last **at least three days**. Don't forget the most important item: water.



Disaster Preparedness

Emergencies and disasters are an unfortunate part of life. You can increase your comfort and chances of survival during an emergency or disaster by taking three key steps now, before a disaster strikes.

Three Steps to Disaster Preparedness

1 Assemble an Emergency Kit. An emergency kit should enable you to survive comfortably for at least three days, until after a biological, radiological, or chemical attack/emergency has passed. You'll need:

- Water
- Canned/dried food
- Warm blankets
- Battery powered radio
- First aid kit
- Map of the area
- Cell phone/extra battery
- Photo ID
- Utility knife/pliers
- Flashlight
- A change of clothes
- Plastic garbage bags
- Extra batteries
- Duct tape
- Whistle
- Cash and credit card
- Spare car keys
- Waterproof matches

2 Make a Family Communication Plan. If an emergency or disaster strikes, be sure everyone in your family is prepared and knows what to do. Consider the following items as part of your communication plan:

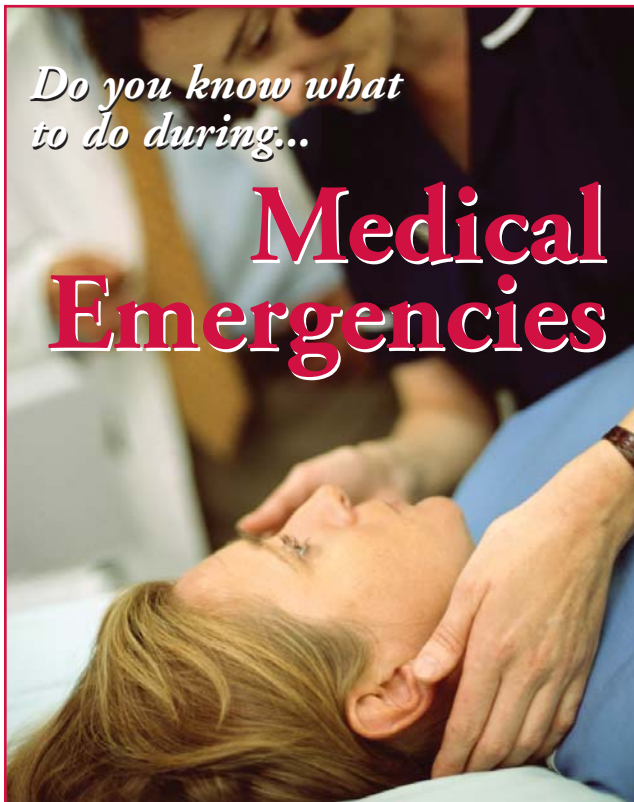
- Make sure family members can stay in touch during an emergency or disaster—regardless of location.
- Include out-of-state friends or relatives in your communication plan.
- Keep emergency numbers near the phone and with each family member.
- Select a “safe room” where the family will meet during a disaster or emergency. An interior room, above ground, with few doors and windows is the best choice.
- If the house is unsafe (in the case of a fire for example), choose a safe location outside the house in which to meet.

3 Continually Prepare. Continually preparing and practicing for disasters and emergencies will better ensure your survival and health during an emergency or disaster. Keep the following in mind as you continually prepare for emergencies and disasters:

- Practice and revise your disaster communication plan
- Seek out news stations that will be helpful in case of an emergency
- Become certified in first aid and CPR
- Replace supplies after they are used or expire
- Be familiar with your insurance policies

Source: US Department of Homeland Security

“Select a ‘safe room’ where the family will meet during a disaster or emergency. An interior room, above ground, with few doors and windows is the best choice.”



SELF-CARE ESSENTIALS®

A Simple Guide to Managing Your Health Care and Living Well

Important information on Medical Emergencies

Take The Self-Care Quiz

The quiz below is designed to test your knowledge on the information presented in this section. Use this quiz as a tool to better understand how to care for yourself and others.

True False

- 1. It's appropriate to put yourself at risk when providing emergency care.
- 2. CPR should only be given when a victim DOES NOT have a pulse and is not breathing.
- 3. There's no reason a *rescued* choking victim should need to go to the emergency room.
- 4. Rescue breathing is given to someone who is unconscious, not breathing, and DOES have a pulse.
- 5. Your emergency supply kit should last two days.

Answers can be found inside this section.

Managing Your Own Health and Seeking Medical Care

The information contained in this guide is based on the best health information available and has been reviewed for accuracy. This information is not intended to replace the advice of your healthcare provider. If you have any questions about managing your own health and/or seeking medical care, please contact a medical professional.



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