



I am frequently asked what are the most common medical emergencies that can occur with babies? To me there are 6 essential first aid skills all parents should know to ensure that they are able to cope with the most life-threatening emergencies.

I believe all parents should know how to calmly help if their baby chokes, stops breathing, has a seizure, head injury, is burnt or is bleeding. These topics form the basis of even my shortest first aid for babies' course and consequently I would like to introduce you to these vital skills to ensure you would know the rudiments as to how to help if your baby needed you.

Choking

Choking is extremely common and very frightening, but in most cases, with the right help, the casualty will make a full recovery.

Babies can choke on anything small enough to fit through a toilet roll.

What to do if a Baby is Choking

• Look in the baby's mouth. If there is something obvious, **remove it** with your fingers.

Never be tempted to put your fingers down a baby's throat or finger sweep the mouth. This can make matters worse by pushing the obstruction further down or causing swelling.

• Lie the baby across your forearm and supported across your legs, supporting them under the chin. Use the flat of your hand to give a firm back blow between the shoulder blades.



• Give up to five back blows and check between each one to see if the blockage has cleared.

If they are still choking, call the emergency services and start chest thrusts straight away.



4. For a baby under a year give up to 5 firm chest thrusts, holding them with their head lower than their stomach and checking to see if the obstruction has cleared.

For more information on how to prevent choking and how to give chest thrusts click here https://firstaidforlife.org.uk/baby-choking/

https://onlinefirstaid.com/child-choking-2/

Or click here to watch our video

What to do if your baby is unconscious and not breathing – CPR

First check Danger, Response, open their Airway and check for Breathing – If you are not absolutely sure whether or not they are breathing properly, you should start CPR (Cardio Pulmonary Resuscitation)

(If they are unconscious but still breathing put them into the recovery. Click here to read how)

Carefully tilt the head and lift the chin to roughly a horizontal position to take the tongue off the back of the airway then give 5 rescue breaths to re-oxygenate them. Babies and children are much more likely to have had a breathing problem first and had a Respiratory Arrest – their heart will stop later.

Seal your mouth around their mouth and nose (if you can fit your mouth over both) and blow into them gently with a puff of your cheeks.



- Make sure their chest rises each time if it doesn't, you probably haven't opened the airway sufficiently – tilt it a little further DO NOT OVER EXTEND IT and try again.
- If they start to gurgle when you breathe into them, you will need to briefly turn them onto their side and empty the vomit from their mouth, before continuing with the breaths.

Push down by a third of their depth with two thumbs or fingers



Push hard and fast on the centre of their chest – roughly between the nipples at a rate of about 120 beats per minute – roughly 2 per second

After about 30 compressions...you will need to give them 2 more short sharp breaths and then continue with the compressions again. 30:2:30:2:30:2...

Keep going

When you push on the chest – you are being the heart

When you breathe into them – you are being the lungs

If you are on your own, you should perform 1 minute's CPR before phoning for an ambulance (5 breaths, 30:2, 30:2 is about a minute). Continue until the paramedics arrive.

For full article https://firstaidforlife.org.uk/what-to-do-if-your-baby-is-unconscious-and-not-breathing/

Febrile Convulsions and seizures



If your small child or baby starts fitting or having a seizure:

Maintain their safety – remove any objects from around them to prevent injury

- Cushion their head using a blanket or pillow, but do not restrain them
- Time how long the fit lasts
- Loosen any tight clothes/blankets and remove any excess clothing if it is possible to do so.

Do **not** try to pick them up or restrain them and do **not** be tempted to put anything in their mouth whilst they are fitting.

They should start breathing again extremely quickly and spontaneously, but ensure you are checking continually and are ready to give CPR if necessary.

When the seizure has finished it is likely the baby will appear confused and drowsy. If they are unresponsive, put them into the recovery position.

If the baby remains conscious during the seizure, it is important to ensure their safety, and to reassure them.

For more information on when to call an ambulance read the full article Full article https://firstaidforlife.org.uk/febrile-convulsions-seizure/

Head injuries

What to look for following a head injury



The following signs and symptoms can appear immediately or over the next couple of days. Keep a close eye on the casualty and get medical advice if at all concerned.



If you would like a copy of this poster, please email emma@firstaidforlife.org.uk

Call 999 or 112 if a baby or child is injured and they lose consciousness, even momentarily.

Or if they:

- won't stop crying
- are unable to walk normally

If the child has not lost consciousness, is alert and behaving normally after the head injury:

- Reassure the child and remain calm.
- Control any bleeding with direct pressure using a clean, non-fluffy cloth.
- Apply a wrapped ice pack or instant cold pack to the injured area for 10 minutes (this will reduce bruising but has no effect on the severity of any internal head injury).
- Observe the child carefully for the next 24 hours. If you notice any worrying signs (see below), get medical help immediately.
- If the incident has occurred close to bedtime or naptime and your child falls asleep soon afterwards, check in continually to look for anything unusual.

Worrying signs:

- Twitching limbs
- Disturbances in colour
- Disturbance of breathing.

It's fine for your child to go to sleep following a minor head injury, however do not confuse falling asleep with losing consciousness!

https://onlinefirstaid.com/head-injuries/

Burns

Burns can be particularly serious for small children and babies. They haven't yet developed the reflex to move away from something hot and their skin is up to 15 times thinner than that of an adult. Damage tends to be more severe because they have a smaller body surface area which means the burn often covers a larger proportion of their body.

Knowing what to do can radically reduce the amount of pain and scarring experienced and can mean a full recovery without even needing to be admitted.

How to Treat a Burn

Extremely carefully, remove loose clothing covering the burn.

Do not take clothes off if there is any risk the skin has stuck to them or if the skin has blistered.

Put the affected area under cool running water for at least 10 minutes (ideally much longer). Remember you are cooling the burn and not the casualty, so try and keep the water running over just the burnt area.

Keep the rest of the casualty as warm and dry as possible and watch for any signs of shock.

Phone an ambulance, particularly if a large area is affected, or if the skin is broken or blistered. Keep the area under the water while you wait for the ambulance to arrive.

A burn is measured using the size of your hand, which is roughly equivalent to 1% of your body. Therefore, a burn measuring just the size of a 50p piece or a postage stamp can be very serious for a baby or small child. Burns to the hands, face, feet, genitals, airways, or a burn that extends all the way round a limb are particularly serious.

Never:

- Remove anything that has stuck to a burn
- Touch a burn
- Burst blisters
- Apply any creams, lotions or fats
- Apply tight dressings, tapes or use anything fluffy
- Always get burns assessed by a medical professional.

For information on how to dress a burn https://firstaidforlife.org.uk/burns-what-to-do-2/

Bleeding

Examine the area to see if there is anything stuck in the wound – if there is do not remove it

Young babies only have about a pint of blood in their bodies and so even losing equivalent to a small cup of blood could be extremely serious for them.

Lie the baby down – to manage shock and prevent them from feeling dizzy and faint

Elevate the bleeding area above the level of the heart to slow down the bleeding

Pressure – apply direct pressure on the wound to stop the blood coming out.

Keep them warm and get emergency help. If the baby is pale, cold, clammy and showing signs of shock, or if there is a lot of blood – help their circulation by lying them down and raising their legs. Elevate the bleeding wound and apply direct pressure to control the bleeding.

For more information on shock click here

It is strongly advised that parents attend a practical or online First Aid course to understand what to do in a medical emergency.

First Aid for life provides this information for guidance and it is not in any way a substitute for medical advice. First Aid for Life is not responsible or liable for any diagnosis made, or actions taken based on this information.

First Aid for Life provide award winning courses for groups or individuals at your venue or ours

If learning online is more convenient we have onlinefirstaid.com

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