Hands only CPR

As we connect February with happy hearts and Valentines, we have the opportunity to review our readiness to possibly save a life through our knowledge of CPR.

For the past two years, the American Heart Association has promoted the use of “Hands Only” CPR. This procedural change was instituted because (a) studies showed that hands-only resuscitation performed by citizen bystanders to a sudden cardiac arrest was as effective as mouth-to-mouth breathing coupled with chest compressions, (b) rescue breathing deterred many persons from trying to do CPR, and (c) hands-only was easier to teach people, especially in a situation where the instruction was coming over the phone from an emergency dispatcher.

Spokane Fire Department invites you and your tenants to view our 6-minute “Hands Only CPR: Saving Lives in Spokane” video at www.spokanefire.org. This presentation teaches you important background information on Hands Only and shows you exactly how to deliver the 100 chest compressions per minute while waiting for the paramedics to arrive.

Your knowledge of Hands Only CPR can dramatically increase the chances of survival of an associate or family member. The rapid compressions (push and release) can keep blood circulating through the heart and brain during those critical minutes before medical help arrives on scene.

It is also important to know when NOT to use Hands Only CPR. Traditional CPR with rescue breathing is better in the following situations:

• children under the age of 8
• persons who are experiencing a drug overdose
• persons rescued from strangulation or drowning

Please encourage your staff and tenants to become more familiar with Hands Only CPR this month! Somebody’s heart will thank you!
BURN AWARENESS:
February 5-11, 2012

The first full week of February, designated National Burn Prevention Week, is sponsored by the American Burn Association and Shriners Hospitals.

Children under age 5 are at very high risk of life-threatening burns from scalding liquids. Adults over 75 years old are also more susceptible to serious scald injuries because their skin is more fragile and their initial responses may be slower. Many of these injuries are sustained in bathtubs or showers as well as in kitchens where someone was not mindful of coffee or water boiling on the stove.

If you are an apartment manager, check the temperature of the hot water tank to assure it is set at 120 degrees Fahrenheit. If you are a tenant, use a candy thermometer to test water temperature at the faucet. Do this by running the hot water for about 1 minute, then placing the thermometer in the running water. It should not read higher than 125 degrees. Serious burns can occur within 30 seconds in water that is heated to 130°F. At 160°F, someone can suffer a third degree burn in just 1 second!

Parents and babysitters should be reminded to take extra precautions with hot liquids in both the bathroom and kitchen:

- Begin filling the tub with cold water and then add hot water.
- Always test the bathwater before putting a child into the tub.

- Never leave a small child alone in the bathtub, even for a minute.
- Always boil water on the back burners and keep handles turned away from the front of the stove.
- Never drink a cup of hot coffee or soup while holding an infant or toddler.
- Prevent electric cords attached to coffee makers or crock pots from dangling where small children could reach up and pull the scalding contents onto themselves.

“Cool-a-Burn!”
Should you suffer a small burn, immediately immerse the burned area in cool water and keep it there for 15 to 20 minutes. Never put ice or butter on a burn. That will only do more damage to the skin and prevent healing.

“Rule of Palm!”
If the burn is as large as the size of the palm of the person’s hand, go to an urgent care or emergency room for medical help. Obviously, a child’s palm is smaller than an adult’s palm.

A first degree burn means reddened skin, similar to sunburn. A second degree burn has blisters (and you should never puncture a blister). A third degree or full thickness burn generally requires a skin graft in order to heal.

Even small burns, depending on where they are located, can become life-threatening. Watch them carefully to prevent infection.

You can sign up for this monthly newsletter, ask a fire-related question or suggest a specific safety topic by contacting Jan Doherty at jdoherty@spokanefire.org or by calling (509) 625-7058.