

**First  
Aid  
for  
Sports  
Injuries**

# **First Aid for Sports Injuries**

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**CONTENTS**

<b>Read me first</b>	41
<b>Managing Common Sports Injuries</b>	
<b>Immediate First Aid: R.I.C.E.</b>	1
<b>Bleeding</b>	
Bleeding (Serious)	2
Cut ( <i>Laceration</i> )	3
Nosebleed	4
Puncture	5
Scrape ( <i>Abrasion</i> )	6
<b>Breathing Problem</b>	
Breathing Problem	7
CPR	8
Unconsciousness	9
<b>Face and Head Injuries</b>	
Dental Injuries	10
Eye Injuries	11
Head/Neck Injuries	12
<b>Genital Injuries</b>	13
<b>Heat and Cold Stress</b>	
Heat Stress & Heat Stroke	14
Cold Stress	15
Frostbite	16
<b>Impaired Movement</b>	
Broken Bone ( <i>Fracture</i> )	17
Muscle Cramp	18
Muscle Pull ( <i>Strain</i> )	19
Sprain	20
<b>Pain</b>	21
<b>Skin Problems</b>	
Blisters	22
Bruise	23
Sunburn	24
<b>More About Sports Injuries</b>	
The Body's Movement system	25
Common Sports Injuries	26-27
Foot and Ankle Injuries	28
Leg Injuries	29
Knee Injuries	30
Upper Limb Injuries	31
Head, Neck, Face Injuries	32
Skin Injuries & Conditions	33
<b>Preventing Sports Injuries</b>	34
<b>Sports Injury First Aid Kits</b>	35
<b>References</b>	36-40
<b>Emergency Contacts</b>	42

**IMMEDIATE FIRST AID -- R.I.C.E.**

**Rest - Ice - Compression - Elevation**

**REST:** Rest/immobilize the injured region to retard swelling/internal bleeding.

**ICE:** Cover the injured region with a cold pack, crushed ice or ice cubes in a towel, ice bag, or frozen peas for 10-30 minutes. **DO NOT** put ice on bare skin. Remove ice for 15 minutes; re-ice for 15-30 minutes for three hours.

**COMPRESSION:** Wrap the injured region in elastic ("ACE") bandage to retard swelling (see video link below). Be sure to overlap the elastic bandage by one-half to one-third of its width each time you go around (ie, leave no spaces or holes). Remove the wrap if compression increases pain, the skin turns pale or blue, there is a loss of sensation, numbness, or tingling.

**ELEVATION:** elevate the injured region (particularly a limb) to control swelling and internal bleeding

**Practice R.I.C.E.** by getting three 3 cold packs and two elastic wraps and simulate applying them to these injuries: elbow in the face, pulled calf muscle, jammed finger.

Video illustrations of wrapping an injury at  
<http://www.ergo84.com/fa/wrapping.html>

## **SCRAPE (Abrasion)**

Wear latex gloves to prevent transmission of HIV and other infections. Remain calm and in control. Reassure the bleeding person using a calm, firm voice.

Profuse bleeding may require stitches to close the wound.

### **Immediate treatment**

1. Cleanse the wound with soap and warm water from a tap, a plastic squeeze bottle, or rubber bulb to rinse away dirt and particles. Antiseptic is not required but may be used if desired.
2. Remove any debris after washing with a washcloth or soft brush.
3. Do not bandage unless bleeding persists and then only to stop the bleeding.
4. If returning to play, cover any wound to protect the athlete and others.

### **Consult a physician IF...**

- a serious cut is on the face, scalp, chest, abdomen, back, or extremities.
- the cut is gaping or deep.
- the cut is over a joint.
- the cut is from a human or animal bite.
- blood spurts forcefully from the wound.
- fat protrudes from the wound.
- foreign matter might be in the wound.
- signs of infection occur (pus, redness, swelling, fever).
- a tetanus shot has not been received within the previous 5 years.

## **BREATHING PROBLEM**

1. **FIRST!** Check for consciousness, tap on the shoulder and shout. **DO NOT SHAKE** in case of damage to the spinal cord. No response, call 911.
2. If breathing has stopped or has become very faint, open the victim's airway and begin rescue breathing.
3. Immediately have someone else summon professional help. If you are alone, shout for help. Do not leave the victim alone under any circumstances.
4. **NEAR-DROWNING: DO NOT** give rescue breathing if the victim can breathe without assistance, even though coughing, sputtering, choking, or vomiting.

### **Opening the Airway**

1. If no head or neck injury is apparent, tip the victim's head back by placing the palm of your hand on the forehead and simultaneously lifting up on the chin with two fingers of your other hand.
2. Listen for breath sounds by placing your ear close to the victim's mouth for about 10 seconds. Watch for movement of the chest or stomach.
3. Begin rescue breathing immediately (see adjacent page) if breathing is very faint or if there is doubt that the victim is breathing.

### **Mouth-to Mouth Rescue Breathing (age > 8 years)**

1. Place your hand on the victim's forehead, pinch the nose closed with your fingers while keeping the airway open.
2. Take a deep breath. Place your mouth over the victim's mouth and blow air into him/her until you see the chest rise. Repeat quickly 4 times without the victim's lungs deflating between breaths.
3. Raise your head and watch for movement of the victim's chest and listen for air escaping from the nose and mouth. If the chest falls or you can hear air escaping, rescue breathing is proceeding. If not, the airway may be blocked or the victim's body or head position may need correcting.
4. Repeat giving one breath every 5 seconds (count 1-1000, 2-1000 etc.).

### **Rescue Breathing for Children 2-8 years**

Perform steps above except:

- Look for foreign material in the mouth before sweeping the mouth with a finger to avoid pushing material into the throat. Remove any foreign material with a sweep of the finger.
- Deliver 4 gentle breaths rapidly without allowing the child's lungs to deflate entirely between breaths. Blow in only the amount needed to inflate the lungs; gentle puffs are often sufficient.
- Repeat rescue breathing every 3-4 seconds (15-20 breaths/minute). The child's chest should rise and fall with rescue breathing. If not, check for airway obstruction or the need to reposition the body or head.

Video directions at  
<http://ergo84.com/fa/cpr.html>

## **HEAT STRESS (*Hyperthermia*)**

Heat stress generally results from exertion in a hot, humid climate and/or from wearing clothes that trap body heat in a cold environment. Signs of heat stress include hot, dry skin, nausea, vomiting, headaches, fainting, dizziness, seizures, and unconsciousness.

### **Heat Cramps**

1. Stop activity.
2. Replace body fluids and minerals by drinking water, replacement fluids, or dilute 100% fruit juice.
3. Massage and stretch cramping muscles. Apply cold packs to help.
4. Rest and cool the body to normal before resuming activity.

### **Heat Exhaustion**

Signs generally include cool, moist skin, headache, feeling faint or dizzy, heavy sweating, feeling tired and weak, fast heart rate, muscle cramps, nausea, and vision changes.

1. Stop activity. Move to a cooler, shady area.
2. Recline and elevate legs 12-18 in.
3. Replace body fluids and minerals by drinking water, replacement fluids, or dilute 100% fruit juice.
4. Cool with wet cloths or cold packs.
5. Rest several days before resuming activity.

### **Heat Stroke**

Signs (not all may be evident): Body temperature >104 F (40 C); flushed skin; rapid, shallow breathing; racing heart rate; headache; muscle cramps or weakness; vision changes; seizures; unconsciousness.

1. ASAP! (within 30 minutes), immerse in cold water to reduce body temperature below 102 degrees F. Otherwise, pour water over the body, apply ice packs to the chest, abdomen, forehead, neck, and legs. If an immersion tub is unavailable do not send the victim to a hospital until core temperature is lowered.
2. If conscious, give water, sports replacement fluids, or dilute 100% fruit juice.

**Summon emergency medical services immediately.**

**Consult a physician immediately.**

## **SPORTS INJURY FIRST AID KITS**

### **Commercial Kits and Supplies**

- *Ithaca Sports* (<http://www.ithacasports.com/>)
- *Cramer* (<http://www.cramersportsmed.com/>)
- *Lifeline* (<http://www.lifelinefirstaid.com>)

### **Self-assembled Kit**

- adhesive bandages: 1-1/2"x3/8"; 3"x 3/4"; 1"x3"; 7/8"x7/8"
- butterfly bandages
- antiseptic towelettes
- alcohol cleansing pads
- antibiotic ointment ("Neosporin")
- 2"x2" sterile gauze pads
- cotton-tip applicators
- first aid tape (roll) 1/2" x 2.5 yds..
- athletic tape
- pressure bandages: 2"x 2"; 3"x 3"
- hydrogel dressings
- knee, elbow, knuckle bandages
- sterile eye wash and eye pad
- assorted safety pins
- instant ice packs
- chewable pain tablets: aspirin, Tylenol (acetaminophen) ibuprofen
- medical grade vinyl gloves
- CPR breathing barrier
- first aid book
- elastic wrap, 2"
- hydrocortisone cream
- tweezers
- thermometer
- sunscreen
- lip balm
- moleskin (various sizes)
- pocket tissues
- emergency phone numbers
- insect repellent
- flashlight/batteries
- scissors

More on this topic at  
<http://www.ergo84.com/fa/fakits.html>



## **READ ME FIRST**

### **WELCOME!**

In the best cases, every work out, practice, and competition would have on hand a professional who is trained and/or a coach who is certified to respond to sports injuries. Since that is not always the case, coaches, parents, and athletes are left to attend to sports injuries as best as they can on their own. For such situations, we offer the information in this book so that an injury can receive at least some attention until competent medical care is obtained.

To best utilize this book:

1. Familiarize yourself with this book's contents so you will know what kind of information it offers. Pages 2-26 offer suggestions on dealing with specific injuries. Tag these pages so you can get to them quickly:

- Unconsciousness
- Cardiopulmonary Resuscitation (CPR)
- Breathing Problem
- Serious Bleeding
- Head and Neck Injury

2. Practice R.I.C.E (page 4) , especially applying cold and wrapping an elastic wrap ("ACE" bandage). Video directions at

<http://www.ergo84.com/fa/wrapping.html>

3. Practice CPR and Rescue Breathing. Video directions at

<http://www.ergo84.com/fa/breathe.html>

4. Obtain a sports injury first aid kit. Links and info at

<http://www.ergo84.com/fa/fakits.html>

5. Familiarize yourself with sports injury prevention strategies as described at

<http://www.ergo84.com/fa/prevent.html>

6. Complete the contacts list on page 46. Add contacts to your cell phone.

7. If you are a coach, designate someone to be familiar with responding to an injury as you may be too busy during practice or a competition to attend to it yourself.

8. Understand that this eBook is educational and not intended to be a substitute for competent medical care. Please do not contact the authors or publisher for diagnosis or any kind of medical advice.

**EMERGENCY CONTACTS**

**Fire Rescue/EMT** \_\_\_\_\_

**Hospital** \_\_\_\_\_

**Police** \_\_\_\_\_

**Doctor Name** \_\_\_\_\_

**Contact** \_\_\_\_\_

**Doctor Name** \_\_\_\_\_

**Contact** \_\_\_\_\_

**Dentist Name** \_\_\_\_\_

**Contact** \_\_\_\_\_

**Orthodontist Name** \_\_\_\_\_

**Contact** \_\_\_\_\_

**Others**

**Name** \_\_\_\_\_

**Contact:** \_\_\_\_\_

**Name** \_\_\_\_\_

**Contact** \_\_\_\_\_

**Name** \_\_\_\_\_

**Contact** \_\_\_\_\_

