

Chapter 13: First Aid Ranger

Lily: "Notice, shout, help! First Aid Rangers never wait!"

A First Aid Ranger's three jobs: **notice** someone is hurt, **shout** for a grown-up, and **help** in small, safe ways until help comes. Always check first that it's safe for **you**: no fire, no traffic, no deep water, nothing strange on the ground.

What Rangers know

- **Calling for help.** Shout "Help!" and send a friend running for a grown-up. Say **who** is hurt, **where** you are and **what** happened. Learn your camp's or country's emergency number with your grown-up.
- **Someone won't wake up.** Don't shake hard. Call their name and tap their shoulder. If they don't answer, shout for a grown-up **right away** and stay with them.
- **Bleeding.** Press firmly on the wound with a clean cloth (or your hand inside a plastic bag) and keep pressing while someone gets a grown-up. If blood soaks through, put more cloth on top and keep pressing.
- **Nosebleed.** Sit up, lean forward (not back), and pinch the soft part of the nose for 10–15 minutes. Spit out blood rather than swallowing.
- **Choking.** If someone can cough, tell them to keep coughing. If they can't breathe, speak or cough, **shout for a grown-up now.**
- **Broken bone or a bad fall.** Keep the person still and comfortable. Don't move them unless

they're in danger. Get a grown-up.

- **Burns.** Use cool running water for 20 minutes (Chapter 2). Take off rings or bracelets near the burn. No butter, oil, toothpaste or ice.
- **Small cuts.** Wash with clean water, cover, tell (Chapter 2).
- **Bites and scratches from dogs, cats, monkeys or bats.** Stay away from animals you don't know, and never tease or corner them. If one bites or scratches you, **wash the wound at once with soap and lots of running water for a long time (about 15 minutes), then tell a grown-up and go to the clinic the same day.** Some animal bites need special injections.
- **Snakes.** Step back slowly and go around wide. If someone is bitten:
 - keep them still and calm, lying down
 - take off rings and tight things near the bite
 - get them carried to a clinic fast
 - **don't** cut the bite, suck it, tie it tightly, put ice on it, or try to catch the snake
- **Stings.** Move away from bees and wasps. If someone has trouble breathing or a swollen

face after a sting, that's an emergency: get a grown-up fast.

- **Poison.** If someone swallowed medicine, fuel, bleach or chemicals: get a grown-up **fast**, keep the bottle to show the health worker, and **don't** make them throw up.

Ranger First Aid (ages 11+)

*Our own Ranger First Aid, written in our own words and based on current international first-aid guidance (IFRC 2020 guidelines; American Red Cross, British Red Cross and American Heart Association public basics). Reading is not training. **Practise every skill with a trained grown-up, or take a real first-aid course, as soon as you can.** Never practise CPR, choking thrusts or rescue breaths on a real person; use a doll, a training manikin or a rolled blanket.*

1. Check the scene, then call for help

1. Stop and look: is there fire, traffic, deep water, electricity, falling walls, or anything strange on the ground? If it isn't safe, **don't go in**. Shout for help from where you are.
2. If it is safe, go to the person. Wear gloves or put your hands in plastic bags if there's blood.
3. Shout "Help!" Send one person for a grown-up and one to call the emergency number, saying **who, where** and **what**. Put the phone on speaker so you can keep your hands free.

4. Ask the person, "Can I help you?" A conscious person can say no; respect that and stay near.
Practise with a trained grown-up or a real course when you can.

2. Check response and breathing

1. Tap their shoulders firmly and shout, "Are you okay? Open your eyes!"
2. No answer = **unresponsive**. Shout for help if you haven't.
3. Open the airway: one hand on the forehead, two fingers under the chin, and tilt the head back gently.
4. Look, listen and feel for **normal breathing** for no more than 10 seconds. Slow, noisy gasps are **not** normal breathing.
5. Breathing normally → recovery position (section 3). Not breathing normally → CPR (section 4).
Practise with a trained grown-up or a real course when you can.

3. Recovery position (unresponsive but breathing normally)

1. Kneel beside them. Put the arm nearest you out at a right angle, elbow bent, palm up.
2. Bring the far arm across the chest and hold the back of that hand against the cheek nearest you.
3. Bend the far knee up, foot flat on the ground.
4. Pull the bent knee toward you so they roll onto their side, facing you.
5. Tilt the head back slightly so the airway stays open, and adjust the top leg so the hip and knee are at right angles.
6. Keep checking their breathing until help arrives. If it stops being normal, roll them onto their back and start CPR. - **Baby:** hold them in your arms, face down and slightly tilted, head lower than the body, supporting the head. - **Possible spine injury:** only roll them if you must, to keep the airway clear, keeping the head, neck and body in line. *Practise with a trained grown-up or a real course when you can.*

4. CPR (unresponsive and not breathing normally)

Call first: make sure someone is calling the emergency number and fetching an **AED** (a defibrillator) if there is one. If you are alone with a phone, call on speaker and start CPR straight away.

Hands-only CPR (anyone can do this): 1. Person flat on their back on a firm surface. 2. Put the heel of one hand in the **centre of the chest** (the lower half of the breastbone), the other hand on top, fingers laced. 3. Arms straight, shoulders over your hands. Push **hard and fast:** about 5–6 cm deep for an adult, **100–120 pushes a minute** (the beat of a fast song). Let the chest come all the way back up each time. 4. Don't stop until help takes over, an AED tells you to stop, the person wakes and breathes normally, or you are too exhausted to go on. Swap with another trained person about every 2 minutes.

CPR with rescue breaths (30:2), once you have been trained: 1. After **30 pushes**, open the airway (head tilt, chin lift). 2. Pinch the nose, seal your mouth over theirs, and give a steady breath of about 1 second, watching the chest rise. Give **2 breaths**. 3. Go straight back to 30 pushes. Keep repeating 30:2. 4. If you can't or won't give breaths, keep doing hands-only CPR. It still saves lives.

Child (about 1 year to puberty): - Use one hand or two, and push about one third of the chest depth (about 5 cm), at the same 100–120 a minute. - Breaths matter more for children and for drowning. Many courses teach giving **5 rescue breaths first** for a child or a drowning person, then 30:2. Follow what your course teaches. - If you are alone with no phone, do about 1–2 minutes of CPR, then go and call, then come back.

Infant (under 1 year): - Use **two fingers** (or two thumbs with your hands around the chest) just below the nipple line, and push about one third of the chest depth (about 4 cm), at 100–120 a minute. - For breaths, cover the baby's **mouth and nose** with your mouth and give small, gentle puffs, just enough to see the chest rise. - Keep the head in a "sniffing" position (neutral, not tilted far back).

AED: switch it on and do exactly what the voice says. Put the pads where the pictures show, and make sure no one touches the person when it says "shock". Children's pads or a child setting are used if available. *Practise with a trained grown-up or a real course when you can; manikin practice is the best way to learn the depth and speed.*

5. Choking

Mild (they can cough, speak or breathe): encourage them to keep coughing, stay with them, and don't hit their back yet.

Severe (they can't cough, speak or breathe, or are going blue or silent), for an **adult or child over 1**: 1. Shout for help. 2. **5 back blows**: stand slightly behind, support their chest with one hand, lean them forward, and give up to 5 firm blows between the shoulder blades with the heel of your hand. Check after each one whether it has cleared. 3. **5 abdominal thrusts**: stand behind, put your arms around their waist, make a fist just above the belly button, grab it with your other hand, and pull sharply **inward and upward**, up to 5 times. 4. Repeat 5 back blows and 5 thrusts until it clears or they become unresponsive. 5. **If they become unresponsive**: lower them to the ground, call the emergency number, and start CPR. Look in the mouth before breaths and remove anything you can see easily; don't do blind finger sweeps. 6. Anyone who had abdominal thrusts must see a health worker afterwards. - **Pregnant or very large person**: use chest thrusts (hands on the centre of

the chest from behind) instead of abdominal thrusts.

Infant (under 1 year): 1. Lay the baby **face down along your forearm**, head lower than the body, supporting the jaw with your hand. Rest your arm on your thigh. 2. Give up to **5 back blows** between the shoulder blades with the heel of your hand. 3. Turn the baby **face up** along your other arm, head low, and give up to **5 chest thrusts** with two fingers in the centre of the chest, pushing down about one third of the depth. 4. Repeat until it clears. **No abdominal thrusts on babies.** 5. If the baby becomes unresponsive, start infant CPR and get help. *Practise only on a doll or manikin, with a trained grown-up or a real course.*

6. Severe bleeding

1. **Press hard** directly on the wound with a clean cloth, pad or your gloved hand, and **keep pressing**. Don't lift to look.
2. If blood soaks through, put more cloth on top and press harder.
3. **Deep wound in a limb, armpit or groin:** pack it. Push clean cloth or gauze firmly into the

wound until it's full, then keep pressing hard on top for at least several minutes.

4. Once it slows, tie a firm bandage over the pad. Check that the fingers or toes beyond it stay warm and pink.
5. **Tourniquet, for life-threatening bleeding from an arm or leg only** (spurting blood, or bleeding that won't stop with hard pressure): - use a proper tourniquet if there is one; a wide band and a stick (a windlass) are less reliable - place it high and tight, about 5–7 cm above the wound, never on a joint - tighten until the bleeding stops; it will hurt - note the time, and **don't loosen it**; tell the health workers - only trained people should use one if they can; learn it on a real bleeding-control course
6. Lay the person down, keep them warm, and watch for shock. *Practise with a trained grown-up or a real course (for example, bleeding-control training) when you can.*

7. Shock (the body is failing after injury, bleeding, burns or severe illness)

Signs: pale, cold, clammy skin; fast, weak pulse; fast breathing; thirst; confusion or drowsiness. 1. Call for help. 2. Treat the cause (for example, stop the bleeding). 3. Lay them down. If there's no leg, hip or spine injury, raise their legs a little. 4. Keep them warm with a blanket under and over them. 5. Nothing to eat or drink. Reassure them, and keep checking breathing. *Practise with a trained grown-up or a real course when you can.*

8. Burns

1. Make it safe: put out flames (stop, drop, roll; or smother with a blanket). For electrical burns, **turn off the power first.**
2. **Cool with cool running water for 20 minutes.** Keep the person warm everywhere else, especially children.
3. Take off rings, watches and clothing near the burn, unless it is stuck to the skin.
4. Cover loosely with clean plastic food wrap or a clean, non-fluffy cloth.
5. **Don't pop blisters.** Don't use butter, oil, toothpaste, ice or creams.

6. Get medical help for burns that are bigger than the person's palm, deep, or on the face, hands, feet, genitals or joints, for chemical or electrical burns, and for any burn on a baby or young child. - **Chemical on the skin:** brush off powder (wearing gloves), then rinse with lots of running water for a long time. *Practise with a trained grown-up or a real course when you can.*

9. Fractures, sprains, slings and splints

1. Keep the injured part **still**, in the position you found it. **Don't try to straighten it.**
2. Support it with padding: rolled clothes or a blanket.
3. **Improvised splint:** pad a stiff object (a stick, rolled magazine or cardboard) and tie it gently along the limb so it stops the joints above and below the break from moving. Tie it beside the injury, not on it. Check that fingers or toes stay warm, pink and can feel.
4. **Arm sling:** fold a triangle of cloth (or a scarf or jacket). Put it under the arm with the point at the elbow, bring the ends up around the neck

and tie them on the uninjured side so the hand is a little higher than the elbow.

5. Bone through the skin: cover it with a clean cloth, press around the wound (not on the bone), and get help fast.
6. **Sprain:** rest it, put a cold pack wrapped in cloth on it for about 20 minutes, use a firm (not tight) bandage, and raise it. Get it checked if they can't put weight on it or it looks bent. *Practise slings and splints with a buddy (section 23).*

10. Head, neck and back injuries

1. Suspect one after a fall from height, a road accident, diving, or a blow to the head.
2. **Don't move them** unless they are in danger (fire, water, collapse). Tell them to stay still.
3. Kneel behind their head and hold it gently still, in line with the body.
4. Call for help. If they become unresponsive and aren't breathing normally, open the airway and start CPR; breathing comes first.
5. **After any head bump, get help if:** they were knocked out, keep vomiting, are confused or very sleepy, have a bad headache, have

unequal pupils, have clear fluid from the nose or ears, or have a fit. *Practise with a trained grown-up or a real course when you can.*

11. Heat illness

- **Heat exhaustion** (headache, dizziness, sweating, cramps, nausea): move them to shade, lay them down, loosen their clothes, give sips of water, and cool them with wet cloths and fanning.
- **Heatstroke** (hot skin, confusion, strange behaviour, fainting, possibly no sweating): **this is an emergency**. Call for help and cool them fast: soak them with water, fan them, and put cold packs at the neck, armpits and groin. Give nothing by mouth if they are confused. *Practise with a trained grown-up or a real course when you can.*

12. Hypothermia (too cold)

Signs: shivering, pale, cold skin; slurred words; clumsiness; confusion. In severe cases shivering stops. 1. Get them out of the wind and wet into shelter. 2. Gently replace wet clothes with dry ones,

and insulate them from the ground. 3. Wrap them in blankets, with a hat. Skin-to-skin warmth helps. 4. If they are fully alert, give a warm (not hot) sweet drink. 5. Handle them gently; don't rub their skin and don't put direct heat (hot water bottles) on bare skin. 6. Get help for anything more than mild cold.

Practise with a trained grown-up or a real course when you can.

13. Cuts and wound cleaning

1. Wash your hands and wear gloves if you can.
2. Press to stop the bleeding.
3. Rinse the wound well under clean running water to wash out dirt.
4. Cover it with a clean dressing or plaster.
5. Get help if it is deep or gaping, won't stop bleeding, has something stuck in it, came from an animal or rusty or dirty object, or looks infected (more red, swollen, hot, pus, red streaks, fever). Ask a health worker whether the person needs a tetanus vaccine. - **Something stuck in a wound:** don't pull it out. Press around it and pad it in place. *Practise with a trained grown-up or a real course when you can.*

14. Eye injuries

1. **Don't rub.**
2. **Dust or grit:** blink, then rinse with clean water poured from the inner corner outward.
3. **Chemical in the eye:** rinse with lots of clean running water for at least 15–20 minutes, holding the eye open, then get help.
4. **Something stuck in the eye, or a cut eye:** don't remove it. Cover it lightly with a clean pad or cup, keep the person still and calm, and get help. *Practise with a trained grown-up or a real course when you can.*

15. Nosebleed

1. Sit them down, leaning **forward**.
2. Pinch the soft part of the nose for 10–15 minutes without letting go.
3. Spit out blood rather than swallowing it. Get help if it doesn't stop after about 30 minutes, or after a blow to the head. *Practise with a trained grown-up or a real course when you can.*

16. Bites, stings and snakebite (same rules as the younger section)

- **Animal bite or scratch:** wash it at once with soap and lots of running water for about 15 minutes, cover it, and go to a clinic **the same day**. Some bites need injections.
- **Snakebite:** 1. Keep the person still and calm, lying down. 2. Take off rings and tight things near the bite. 3. Keep the bitten limb still, like a splint. 4. Carry them to a clinic fast. 5. **Don't** cut, suck, tie tightly, put ice on it, apply electricity, or try to catch or kill the snake.
- **Bee or wasp sting:** scrape the sting out sideways, then use a cold cloth. Watch for allergy (section 20).
- **Tick:** a grown-up removes it close to the skin with fine tweezers. Watch for a rash or fever.
Practise with a trained grown-up or a real course when you can.

17. Poisoning

1. Find out what, how much and when, and **keep the container**.

2. Call for help (the emergency number or a poison centre if your country has one).
3. **Don't make them vomit**, and give nothing to eat or drink unless a health worker says to.
4. **Breathed-in fumes:** only if it's safe, get them into fresh air; don't go into smoke or gas yourself.
5. **On the skin:** take off the clothing and rinse with lots of water. **In the eye:** see section 14.
6. If they become unresponsive, check their breathing; recovery position or CPR. *Practise with a trained grown-up or a real course when you can.*

18. Fainting

1. Help them lie down, and raise their legs a little.
2. Give them fresh air and loosen tight clothing.
3. They should recover within a minute or two. Have them sit up slowly.
4. If they don't wake quickly, check their breathing; recovery position or CPR, and call for help. *Practise with a trained grown-up or a real course when you can.*

19. Seizures (fits)

1. Keep calm, and **time it**.
2. Move hard or sharp things away, and put something soft under their head.
3. **Don't hold them down, and don't put anything in their mouth.**
4. When the shaking stops, put them in the recovery position and stay with them; they may be sleepy and confused.
5. **Call for help if:** - it lasts more than 5 minutes, or one fit follows another - it's their first fit, or they're hurt - it happened in water - they have trouble breathing afterwards - they're a baby with a fever, or pregnant, or diabetic *Practise with a trained grown-up or a real course when you can.*

20. Asthma and serious allergic reactions

Asthma attack (wheezing, struggling to breathe or speak): 1. Sit them upright, leaning slightly forward, and keep calm. 2. Help them use **their own** reliever inhaler (with their spacer if they have one), exactly as their plan or their grown-up has shown. 3. If it

doesn't help quickly, they can't speak, their lips are going blue, or they're getting tired: call for help **now**.

Serious allergic reaction (anaphylaxis) (swelling of the face, lips or tongue; trouble breathing; widespread hives; faintness after a sting, food or medicine): 1. Call the emergency number straight away. 2. Help them use **their own** adrenaline auto-injector, into the outer thigh (it can go through clothing), following the instructions printed on it. Never use someone else's medicine. 3. Have them lie down with legs raised, or sit up if breathing is hard. Don't make them stand or walk. 4. If they don't improve, follow the device's instructions or their allergy plan about a second injector. Be ready for CPR. *Practise with a trainer pen (no needle) and a trained grown-up.*

21. Moving a hurt person safely

1. **Only move them if staying puts them in danger** (fire, traffic, water, collapse) or you must move them to give CPR.
2. **Clothes drag:** grip their collar or clothing at the shoulders, support the head between your

forearms, and drag them in a straight line, head first.

3. **Blanket drag:** roll them onto a blanket, then pull it from the head end.
4. **Two-person carry:** for a conscious person who can't walk, two helpers make a "seat" with their arms. Lift with your legs, not your back.
5. Never move someone with a possible neck or back injury unless there is real danger. *Practise drags with a buddy on a soft surface, with a grown-up watching.*

22. A home-made first-aid kit

Use a clean, waterproof box or bag, labelled. A grown-up keeps any medicines separately. - Disposable gloves, or clean plastic bags - Plasters in different sizes; sterile gauze pads - Roller bandages; a crepe (stretch) bandage; 2 triangle bandages, or clean square cloths for slings - Clean cotton cloths or towels; clean plastic food wrap (for burns) - Tape; blunt-tip scissors; fine tweezers - A CPR face shield - A foil blanket - A small torch (sealed or wind-up) - A whistle - Safety pins - A notebook and pencil - A card with emergency numbers and each person's

allergies - Soap; a bottle of clean water for rinsing -
A tourniquet only if a trained person is in the group
Check it every month and after any use.

23. Practice drills with a buddy

Use a **doll or a rolled blanket** for CPR and infant choking, a friend (gently) for the recovery position and slings, and a grown-up watching every time. 1.

Scene check race: a grown-up sets out pretend dangers (a "fire" sign, a "road" sign); spot them all before going in. 2. **Who, where, what:** practise a pretend emergency call aloud in 30 seconds. 3.

Recovery position: take turns rolling a buddy, then check the head tilt. 4. **Hands-only CPR:** 2 minutes on a rolled blanket or manikin, to a song with about 110 beats a minute; swap at 2 minutes. 5. **Infant**

choking: on a doll, along your forearm; 5 back blows, turn, 5 chest thrusts. 6. **Bleeding:** press and pack a "wound" in a rolled towel; tie a bandage over it. 7. **Sling and splint:** time yourself making a sling, then a padded-stick splint on a buddy's arm. 8.

Mystery scenario: a grown-up reads a card ("Your friend fell from a wall and isn't answering") and you talk through every step. *Never practise abdominal thrusts, chest thrusts or rescue breaths on a real*

person, and never practise tourniquets tightly on a buddy.

Ranger checklist

- ☐ I check it's safe for me first.
- ☐ I can shout and say who, where and what.
- ☐ I know to press hard on bleeding with a clean cloth.
- ☐ I can show the nosebleed position (sit, lean forward, pinch).
- ☐ I know to keep someone with a hurt bone still.
- ☐ I wash any animal bite or scratch for a long time and tell the same day.
- ☐ I know what NOT to do for a snakebite.
- ☐ I keep poison bottles to show the health worker.
- ☐ (11+) I can do the recovery position and hands-only CPR on a manikin or blanket.
- ☐ (11+) I know choking steps for adults, children and babies (practised on a doll).
- ☐ (11+) I can press, pack and bandage a bleeding wound, and make a sling and splint.
- ☐ (11+) I know the danger signs for shock, head injury, heatstroke, seizures and allergy.

Earn your badge (First Aid)

Level	Who	Requirement
 Heart	Little Rangers	Say: "Notice, shout, help!" and who, where, what.
 Bronze	Little Rangers	Show with props: pressing on bleeding, the nosebleed position, cool water for burns.
 Silver	Ages 11+	With a trained grown-up: scene check, response and breathing check, recovery position, 2 minutes of hands-only CPR on a manikin or rolled blanket, choking steps on a doll, press-and-pack bleeding.
 Gold	Ages 11+	All of Silver, plus 30:2 CPR on a manikin with a trainer, an arm sling and a padded splint, and talking through three mystery scenarios (shock, head injury, allergy or seizure).

Level	Who	Requirement
 Platinum	Age s 11+	Finish a recognised first-aid course (for example Red Cross / Red Crescent), then help a grown-up run the buddy drills for a group.
A trained grown-up signs off Silver and Gold. Practice uses dolls, manikins and blankets only.		

Watch and learn

- Planned: Wash a Small Cut
- Planned: Call for Help
- Planned: Too Hot / Too Cold
- Planned: Cool a Burn
- Planned: Snake on the Trail (Grandma Willow)
- Handbook Chapter 2

Grown-up note

The younger section is "notice, call, help" only. The Ranger First Aid (11+) section follows current international guidance but is **not** a substitute for a course: please arrange real training (Red Cross / Red Crescent, or a local first-aid provider) and supervise every practice. Tourniquets are for life-threatening limb bleeding and are best used by trained people. No medicine doses appear in this handbook; asthma and allergy help means helping someone use **their own** prescribed device. Animal bites in many regions carry rabies risk and need same-day medical care. Snakebite needs anti-venom at a health facility; traditional cuts, suction and tight bands cause harm. Put a basic, child-safe kit list in 90_For_Grown_Ups.

Fact-checked Oct 21, 2026, approved by David McKellips.