



V.3 - 1/30/26

MN 50501 Protest First Aid Training

Disclaimer

- This presentation only reflects our views/opinions, not any organizations.
- Graphic/disturbing images.
- Meant to be used in person w/ Stop The Bleed instructors and training equipment.

Goals

- Protecting yourself
- Scope of practice, skill levels, obligations giving first aid in a protest setting
- 3 tiers of protest medicine
 - Basic First Aid- cuts, scrapes, sprains, headaches, bruises, Narcan
 - Riot Control- Pepper spray, Tear gas, bruises, fractures, concussions
 - Trauma Medicine- Penetrating/blunt trauma, respiratory or cardiac arrest, open fractures, massive hemorrhage

Protect Yourself

- Scene Safety and teamwork!
- Head - Helmet or bump cap
- Eyes - sealed goggles
- Nose/Mouth - Mask - N95 vs P100
- Gloves- mechanic and nitrile
- Long sleeves/long pants
- Running shoes or boots
- Knee pads? Body armor?

Hong Kong Protest Gear Summer 2019

Yellow construction helmet

Protects against rubber bullets, tear gas canisters, flying bricks

Goggles

For flying debris

Gas Mask

Protecting against tear gas, which Hong Kong police use liberally

Black t-shirt

Uniform adopted by Hong Kong protestors, in contrast to white Ts, worn by Beijing supporters

Broad face cover

To counter facial-recognition technology

Backpack

Typically holds snacks, water, change of clothes, tools and sometimes laser pens to shine in officers' eyes.

Lycra skin covers

To protect against tear gas effects

Elbow & knee pads

For for falling, crawling and scuffing on city streets

Umbrella

Protection against rain and pepper spray

Loose change

For subway fare, to avoid being tracked through electronic transit passes

Heat-resistant gloves

To throw hot tear gas canisters back at police



Photo: Saša Petricic/CBC

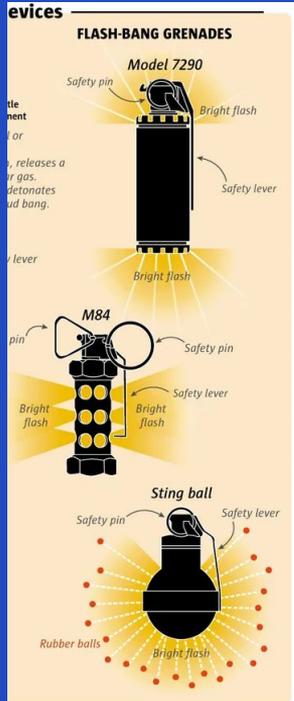
Protest Hazard Assessment - CAKE

Chemical - CS (Tear) Gas, OC (Pepper) Spray, Bug/Bear Spray

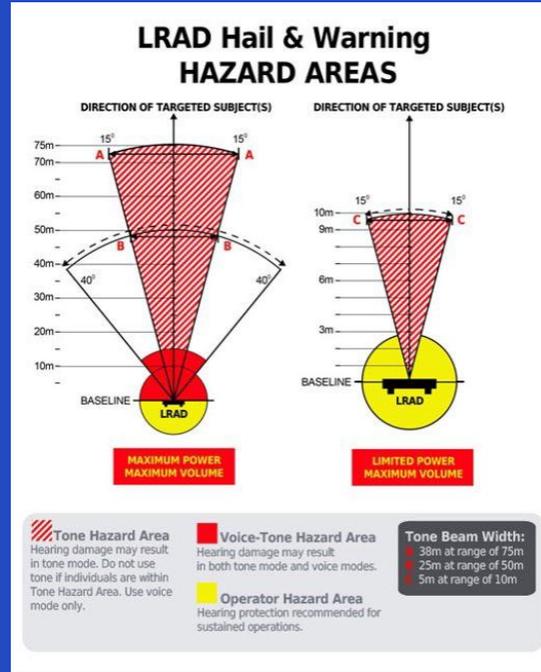


Protest Hazard Assessment - CAKE

Acoustic - Long Range Acoustic Devices (LRADs), Flashbangs, Loudspeakers, Fireworks



Move away! LRAD - Go sideways! Ear plugs



Health Foundation, GlobalSecurity.org, snopes.com, org, hotach.com, lesslethal.com, combinedsystems.com, pepperball.com, aftermath.com, seattle.gov/police-manual
 MARK NOWLIN / THE SEATTLE TIMES

Protest Hazard Assessment - CAKE



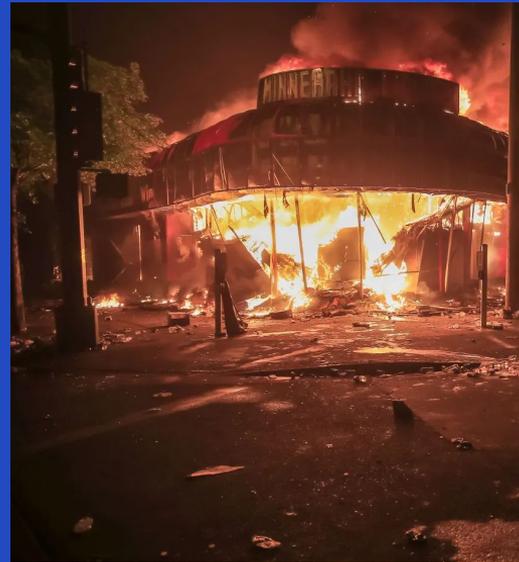
Kinetic:

- Bullets
- Riot control munitions
 - Rubber bullets
 - Bean bag rounds
 - Pepper balls
- Random projectiles
 - Rocks
 - Bricks
- Vehicles
- Crowds
- Melee weapons



Protest Hazard Assessment - CAKE

Environmental - Fire, Damaged infrastructure (power lines, flooding, collapsing structures, etc.), Biohazards (blood, needles, feces)



Interactions with Others

- Interactions with first responders/police
 - OPSEC: Do not reveal information that could endanger the protest or the activists who are participating, but tell them what is necessary to help a person in medical need.
 - Liaison: If there is a designated police liaison, have them help you.
- Interactions with injured protestors
 - Consent: Always obtain consent for care if responsive/able.
 - Confidentiality: Limit name use, personal identifiers. Not medical care - DO NOT DOCUMENT.
 - Legality: No risk of abandonment if you do not establish a patient/provider relationship.
 - Do not directly administer meds.
 - MN has excellent good samaritan laws.

Skill Levels - Expectations

Basic First Aid

- Use PPE (gloves, mask, eyes)
- Basic wound care
- Eye care- flush
- Hand Sanitizer, wipes
- Snacks, water
- Ice packs
- BLS/CPR - with cpr mask
- Stop the bleed - Tourniquet, Trauma Shears, Wound packing
- Emergency blanket
- Tylenol?

Skilled Care

- Diagnostics: BP cuff/Stethoscope/Pulse Ox/Glucometer/pen light
- Meds: EpiPen, Narcan, Albuterol
- Vented Chest seal, needle thoracostomy
- Ambu-Bag, airways
- Stretcher use
- C Collar
- Splinting

IFAK Packing List

- Gauze, roll or 4"x4" pads
- Medical Tape, 1"
- Nitrile Gloves
- Water for wound rinsing and decontamination
- Hand Sanitizer
- CPR Face Mask
- Tourniquet and sharpie
- Band-Aids, large or XL
- Mylar Blanket
- Disposable Hand Warmers (winter)

Triage - CALL 911

- Non Urgent, Priority, Emergency, Expectant.
- Emergency: Sustained loss of consciousness, multiple fractures in multiple body areas, penetrating trauma to abdomen/thorax, arterial bleeding, airway compromise.

If there is a MASCAS - First - get someone to get help before ANYTHING ELSE. Focus on treating to your skill level.

“If you can hear me, walk over to...”

- Airway
 - Breathing
 - Circulation
 - Disability
 - Exposure
-
- Don't Bother with Secondary Survey-leave that to EMS.

Scene Safety!

Look for Clear and Apparent Dangers

1. Vehicular Accidents
2. Large fires (black smoke)
3. Bodies

Look for Less Obvious Hazards

1. Bystanders
2. The Patient
3. Environmental Hazards

Do NOT Become a Casualty - Ensure scene safety, Move yourself and victim if needed/safe to do so.



Basic First Aid

- Common injuries and medical emergencies
 - Cuts/scrapes
 - Burns
 - Fractures
 - Sprains
 - Allergic reactions
 - Heat/cold injury
 - Seizures
- Care will be limited- do not diagnose!
- Allow patient to direct care - offer basic supplies and options
 - Band Aids
 - Tylenol
 - Gauze/Dressings
 - Hand Sanitizer
 - Wipes/water
- Always recommend definitive care

FA: Cuts/Scrapes, Burns

- Rinse wounds with copious clean water, dress with clean gauze/bandaids.
 - Always recommend definitive care if signs of infection later on.
 - Redness, swelling, pus.
- Burns: Rinse with clean cool water, wrap/dress to keep clean. Burn gel if available.



Chemical Irritant Treatment

- Leave area, decontaminate, prevent exposure.
- There is no treatment to shorten symptoms- only time can remit symptoms.
- Target: Eyes, Nose, Mouth, Airway.
- Prevention: Goggles, mask, clothing, gloves
- Treatment: Clean
 - Use high pressure stream to mechanically flush the eyes.
 - The solution to pollution is dilution.
 - Just use water!



FA: Sprains and Fractures

- Sprain: Pain, swelling, bruising, difficulty moving joint, bone not out of place.
- Fracture: Severe pain, swelling, bruising, inability to move or use limb, bone may or may not look out of place.

- Don't move the injured part, use PRICE.
- Splint in position of comfort.
- Seek medical help if unable to bear weight or suspect fracture.

PRICE Treatment



P

Protection



R

Rest



I

Ice



C

Compression

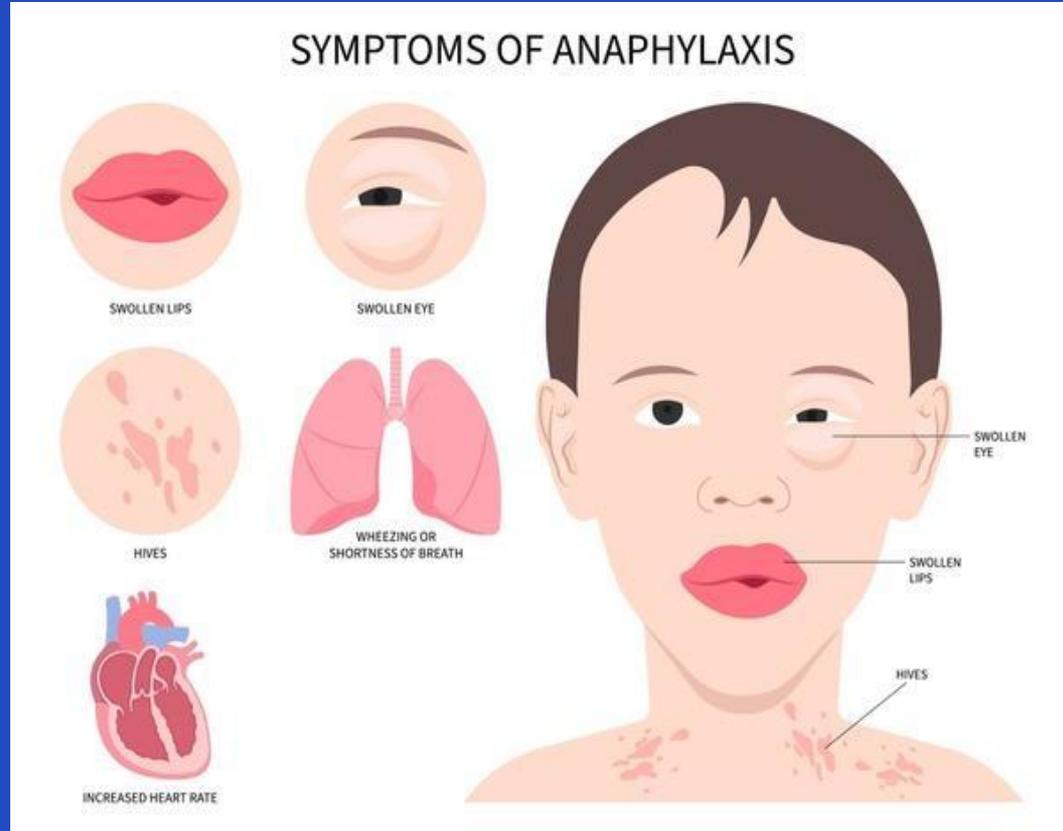


E

Elevation

FA: Allergic reactions

- Caused by food or other allergen - attaches to mast cells, releases histamine.
- Mild/moderate - Itching, swelling, nausea, vomiting, cramping, collapse.
- Anaphylaxis - Airway, Breathing, Loss of consciousness.
- Treat - Lay flat (sit if easier to breathe), keep calm, remove allergen.
- Give Adrenaline (0.15mg for children <5yo, 0.3mg for children older than 5 and adults).
- Call 911, asthma medication if available, CPR if needed.



SIGNS OF HYPOTHERMIA:



Exhaustion
Bad Coordination

Confusion

Shivering
Blue Lips / Fingers

Slurred Speech

Memory Loss
Impaired Thinking

WHAT YOU SHOULD DO:

- Get the victim into a shelter (heated office, trailer, vehicle).
- Remove any wet clothing. Wrap victim in warm, dry layers of blankets, covers, towels, or clothing.
- Seek medical help and keep the victim awake if possible.
- Warm the center of the body first. Provide victim with warm, sweet drinks. Avoid caffeine and alcoholic beverages.

Heat Exhaustion

Heat Stroke

ACT FAST

- Move to a cooler area
- Loosen clothing
- Sip cool water
- Seek medical help if symptoms don't improve

Dizziness

Thirst

Heavy Sweating

Nausea

Weakness



Confusion

Dizziness

Becomes Unconscious

ACT FAST

CALL 911

- Move person to a cooler area
- Loosen clothing and remove extra layers
- Cool with water or ice

Heat exhaustion can lead to heat stroke.

Heat stroke can cause death or permanent disability if emergency treatment is not given.

SEIZURE FIRST AID

**1. DON'T PANIC!
START A
TIMER**



**2. ROLL ON SIDE
SUPPORT HEAD**



**3. MOVE OBJECTS
AWAY**



**4. DON'T RESTRAIN
IN ANY WAY**



CHECK TIME

5. SEIZURES >5MIN.

- CALL 911

NOT AWAKE?

- CALL 911

NOT BREATHING?

- CALL 911

OTHERWISE...

**6. AWAKE?
BREATHING?**



WHEN TO CALL 911 RIGHT AWAY...

- FIRST TIME SEIZURES**
- WOMAN IS PREGNANT**
- SEIZURES BACK TO BACK**
- DIFFICULTY BREATHING**
- IF THERE'S AN INJURY**
- IT OCCURS IN WATER**

Trauma - Stop The Bleed

- Ensure scene safety, wear gloves (blood exposure).
- Only treat massive hemorrhage at the point of injury - MOST THINGS CAN WAIT.
- Splint fractures and other injuries at the position of injury/comfort so long as CMS intact distally to injury.
- Do NOT do CPR at injury site, need EMS

First Aid

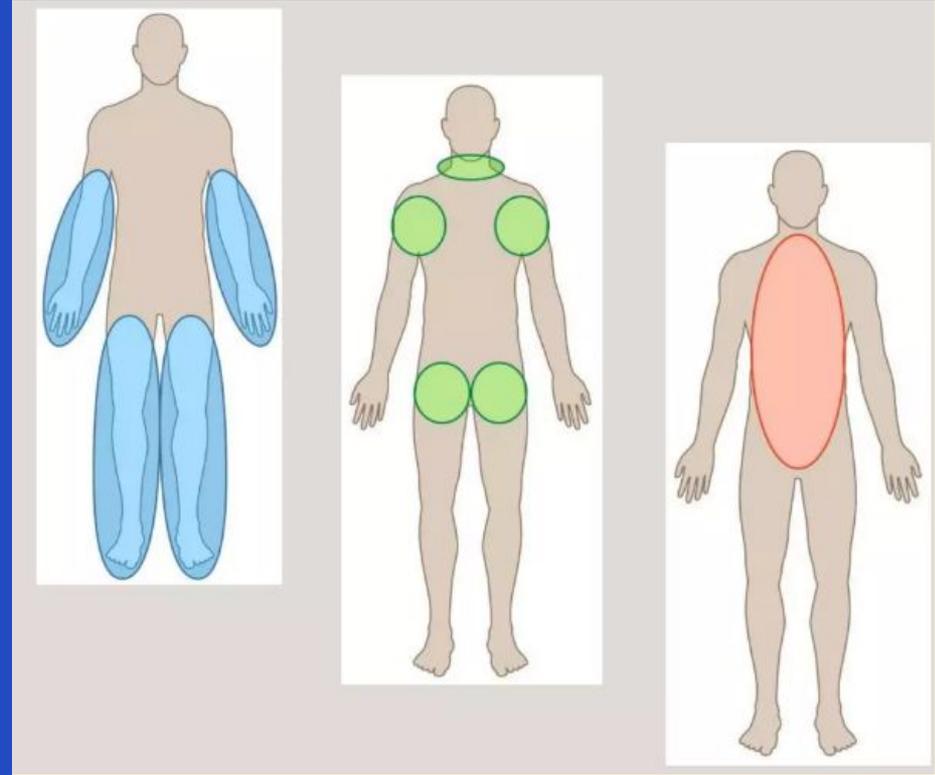
- Direct Pressure
- Packing
- Tourniquet
- Splinting?

Advanced

- Vented chest seals
- Needle thoracostomy
- Airway/Cricothyrotomy

Stop the Bleed

- Bleeding is the #1 preventable cause of death after injury.
- Call 911, get help!
- Bleeding - Find source of bleeding.
 - Continuous bleeding
 - Large volume bleeding
 - Pooling of blood
 - Multiple sources
 - Hidden by clothing
- Tools by location: Direct pressure, Packing, Tourniquets.

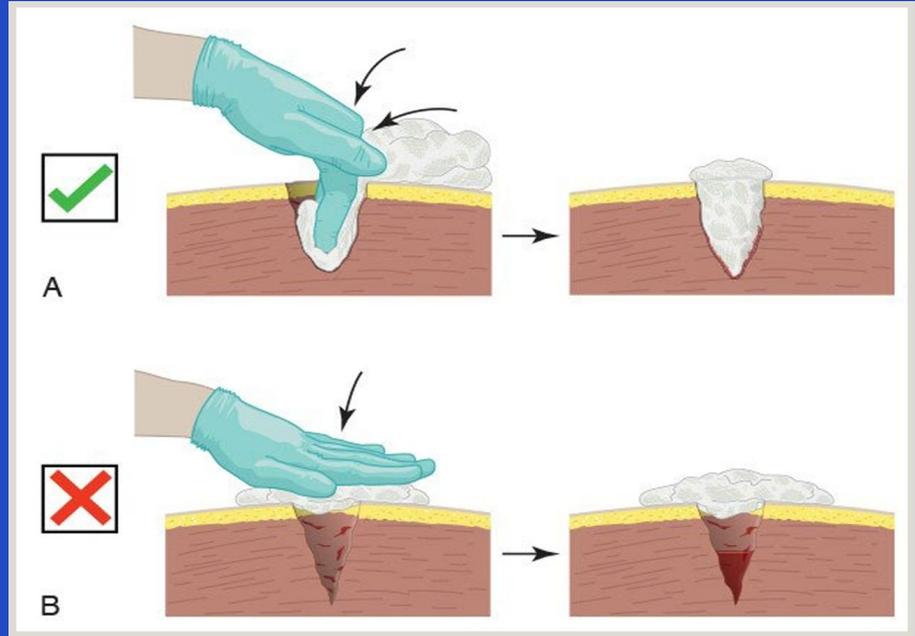


Stop the Bleed



1st - Direct Pressure to Bleed

- Just enough gauze/cloth to cover.
- If it works, keep doing it until EMS.



2nd - Packing

- Large wounds where pressure not working.
- Stuff cloth/gauze deeply, hold pressure until EMS.

Stop the Bleed

- Apply 2 to 3 inches above wound on long bone.
- Do not place over the elbow or knee .
- Tighten until bleeding stops.
- Write the time down.
- Do NOT remove until hospital.
- Can apply to others or on yourself.
- Can be applied over clothes and can use two.
- Tourniquets HURT.
- Same tourniquet for kids.
- If TQ too big, direct pressure/packing work.
- Children have lower blood pressures.
- Gold standard - CAT TQ (Combat Application Tourniquet) by NAR - \$30 each.





STOP
THE BLEED

SAVE A LIFE

UC San Diego Health

A man with dark hair and a light beard, wearing a black t-shirt, is looking directly at the camera. He is in a room with bookshelves filled with books in the background. A desk with a keyboard is visible in the lower right. A yellow rectangular box with white text is overlaid on the right side of the image.

HOW TO GIVE PSYCHOLOGICAL FIRST AID

Get More Training!

- First Aid/BLS/CPR training: [Redcross.org/take-a-class](https://www.redcross.org/take-a-class)
- Stop The Bleed training: [Stopthebleed.org/training](https://www.stopthebleed.org/training)
- EMR/EMT courses: (EMR is 56 hours) (EMT is 120-200 hours)

[Mn50501.org/medics](https://www.mn50501.org/medics)

References

- Riot Medicine
- TCCC Field Medicine
- CLS course
- ACLS manual
- BLS/CPR
- www.stopthebleed.org