



FIRST AID AND

EMERGENCY CARE

For Dogs and Cats

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Introduction

Preparing for a medical emergency involving your pet is always best accomplished before the event takes place. This book is designed to help guide you through the important decisions about first aid, as well as how and when to transport your pet quickly and safely to a veterinary hospital or emergency facility.

Keep this book in your home or car as a quick reference during an emergency.

This book is an emergency preparedness ready-reference for dogs and cats. Wise preventive measures, intelligent use of first aid principles, coupled with recognition of abnormal symptoms and treatment of disorders, diseases, and problems, lead to effective health care.

A working knowledge of this information will help you eliminate some potentially dangerous circumstances and help you prepare for emergency situations.

It includes information on what to do and what not to do in specific emergency situations.

The authors encourage careful reading and occasional rereading. We have tried to make this book easy to understand, avoiding technical terms as often as possible, but defining them in context when they are necessary.



What is First Aid?

First aid is the immediate care given to a pet who has been injured or is suddenly taken ill. The immediate care includes:

Primary Survey and Resuscitation

The primary survey is the first impression the first aid provider has of the situation, and the immediate action that is taken. A well-informed owner will be able to make a quick assessment of the scene and a quick examination of the victim. Immediate attention is given to the animal's level of consciousness, airway patency, breathing, and circulatory functions (including pulse). Resuscitation is the prompt treatment of life-threatening problems.

Secondary Survey and Definitive First Aid

The secondary survey consists of an examination and assessment of the animals eyes, ears, nose, neck, chest, abdomen, back, extremities, and rectal temperature and the procedures to stabilize and protect the animal from further harm.

Transport

Many emergencies will require professional help. Knowledge of the proper way to transport the pet to a veterinary medical facility for professional care can prevent further injury, protect the owner from dangerous situations, and allow for timely care.

First Aid Kit

Emergency supplies are a necessity. The following list will help you assemble the resources you need.

- 1" and 2" adhesive tape
- 2" roll gauze (for muzzle)
- newspaper
- rectal thermometer
- chlorhexidine or povidone iodine (antiseptic)
- Elizabethan collar
- eye wash (saline in a squirt bottle)
- isopropyl alcohol 3% hydrogen peroxide (or syrup of ipecac)
- 2" and 4" gauze
- 3" x 3" or 4" x 4" gauze pads
- scissors - cotton balls and pledgets
- blanket with heat pack
- flat transport surface
- plastic food wrap (e.g., Saran- Wrap)
- petroleum or K-Y jelly

- ice pack
- activated charcoal



- tweezers
- bulb syringe

A complete first aid kit for your pet is a must.

Preparedness Phone Numbers

In a convenient location, make a list of important phone numbers that includes the phone numbers of the following:

- Your veterinarian
- Your veterinarian's emergency (after-hours) number
- Your nearest 24-hour veterinary emergency facility
- Your local poison control center
- National poison control centers

Emergency numbers should be kept near your phone for easy access. Update numbers as necessary.

General Directions for First Aid

A wide variety of problems arise that require first aid skills. Decisions and actions vary according to the circumstances, including:

- Scene of the accident
- Emergency equipment available
- Species, size, age, temperament, and condition of the animal requiring first aid
- Your emotional condition
- Other emotionally stable people available to help you.

First aid begins with a quick but careful survey of the scene. Then quick decisions need to be made, depending on the circumstances.

- Make sure the accident scene is safe before proceeding. Take steps to prevent further injury to you or your pet.
- Enlist the help of others.
- Call, or have someone call, your veterinarian or the emergency veterinary center. (Keep those phone numbers handy at all times!) Describe the animal, give a short description of what happened and what has been done. Give your name and telephone number. Don't hang up until the professionals have told you what to do.
- Administer essential first aid. Carefully transport the animal to the veterinary facility for examination if there is any question as to the seriousness of the injury or sudden illness. It is highly recommended to telephone first in all but the most life-threatening situations.

MUZZLING

When attending a dog that has been injured, it is important that the first aid provider takes steps to prevent bite wounds inflicted by the animal being treated. Many dogs, even the family pet, may bite when hurt or frightened. A muzzle is an excellent way to prevent being bitten while rendering first aid. Commercial muzzles are best, as many of them can



be used without interfering with breathing; the problem is they are not always available during a crisis.

If a muzzle is not available, the first aid provider must improvise. To make a muzzle, get a rope, cord or other similar strong material (such as a necktie or a belt). Wrap the cord or rope two or three times around the muzzle, being careful not to wrap the material too close to the soft, fleshy part of the nose. The muzzle must be applied to the bony part of the nose to avoid interfering with breathing. Bring the ends up past the ears and tie the securely behind the head.

These muzzles cannot be used on dogs who are having difficulty breathing, are unconscious, or have an injury to the mouth. They're also not indicated for short nose breeds (e.g., Chinese Pug, Pekingese, Bulldog).

Some injured dogs may vomit. If the dog appears to become nauseated or begins to retch, the muzzle should be removed at once.

Primary Survey and Resuscitation

The primary survey is often referred to as the ABC's of first aid, indicating the following areas of emphasis:

- "A"irway
- "B"reathing & "B"leeding
- "C"ardiovascular (which includes heart function, pulse, and capillary refill time)

In most cases, the pet owner will administer a minimal amount of first aid and then transport the animal to a veterinary facility. Occasionally it is necessary to continue the care with some additional procedures, particularly if veterinary help will not be available for some period of time. Please read the following sections carefully.

"A"irway, "B"reathing, and "C"ardiovascular are covered in the sections on CPR and Shock. The sections on bleeding and bandaging will cover information on controlling bleeding. First aid for fractures is covered in the section on splints. First aid treatment for poisoning and choking cases is described in poisoning and choking.

Safe Rescue

In order to administer first aid to an animal, it may be necessary to remove him (and yourself) from a road or a highway. Remove your pet from the highway only after making sure it is safe to retrieve him. Direct traffic if necessary. If the pet appears likely to bite because of pain or excitement, cover the pet (including the head) with a blanket and/or muzzle the pet before handling. If there is any evidence of head, neck, or spinal injury (such as inability to move the rear legs), you should move the animal onto a flat surface for transport rather than picking him up.

Make sure to secure an accident scene before attempting a rescue.

Abscess

A localized accumulation of pus, usually caused by an infection introduced from an animal bite or other penetrating wound. It may appear as a painful swelling or, if it has ruptured, as a draining wound.

What to Do

- If it has ruptured, clean the wound with soap (not detergent) and water. Rinse well and pat dry. Repeat several times a day.
- If there is swelling, apply warm, moist compresses for 10 to 15 minutes. Repeat 3 or 4 times daily.
- Abscesses should be examined by a veterinarian within 24 hours.

What NOT to Do

- Do not attempt to open the abscess yourself.
- Do not apply medicines, potions, or home remedies unless directed to by a veterinarian.

Abscesses are a frequent problem in cats, especially unneutered males who get into territorial or breeding disputes.

During these disputes, the pet may receive a bite or a scratch. If the wound becomes infected, an abscess may form within a day or two. Neutering your male cat will reduce his "need" to fight. Without the influence of male hormones he will mark out a much smaller territory and will be less likely to engage in fights over a female.

Bandaging

We use bandages for several reasons: to protect wounds from the environment, protect the environment from wounds, and to discourage the pet from licking or irritating a wound. They may be applied as support for strains or sprains and to prevent motion. Proper application is important.

Cleaning the Wound

The process of bandaging begins with careful cleaning of the wound. All dried blood, dirt, and debris should be washed away using mild soap and copious amounts of water. Hair should be clipped away so that it cannot lie in the wound, and, if possible, the area should be patted dry.

The first step in proper bandaging is making sure the wound is clean.

The Contact Layer

After cleaning the wound, the contact layer is the first layer applied. Ideally, this layer should:

- Be sterile and inert.
- Stay in close contact with, but not stick to, the wound.
- Be very absorbent.
- Be free of particles or fibers that might shed into the wound.
- Conform to all shapes. Allow drainage to pass to the next layer without becoming wet.
- Minimize pain.

A Telfa-Pad, available at most pharmacies, comes closest to meeting these requirements.

After cleaning the wound, place the contact layer over the wound. It is desirable to apply an antibiotic ointment (such as Neosporin) to the pad, but this is not absolutely necessary. Frequent bandage changes are more important.

After cleaning the wound, a clean Telfa-Pad should be applied over the area.

The Absorbent Layer

After the contact layer is in place, apply the second (absorbent) layer to hold the contact layer snugly, but not tightly, over the wound. This layer is usually a cotton or dacron material which comes in various widths. Generally, 1-inch rolls are used for small limbs and the tail, 2-inch rolls are for medium-sized legs, and the 3- and 4-inch rolls are for large legs and the body. It is important to use the proper size. Materials that are too narrow often cause a tourniquet effect, especially if the wound causes swelling.

If materials are too wide, they are difficult to apply smoothly. Any wrinkles or ridges may cause the bandage to become uncomfortable for your pet. Uneven pressure may cause necrosis (tissue death) of the underlying tissues.

Begin with just enough absorbent layer to hold the contact layer in place. If the wound is on a leg or the tail, proceed by wrapping from the toes or the tip of the tail towards the body. If you begin at the top of the leg or the tail, the bandage is more likely to restrict

blood flow and cause swelling, which may cause tissue damage. Apply several layers of absorbent material, which will soak up the fluid from the wound and increase the patient's comfort by cushioning the wound.



Make sure the material you use as the absorbent layer is the proper width, and wrap from the toes or tail tip towards the body.

The Outer Layer

Finally, apply the outer (tertiary) layer, usually made up of porous adhesive tape or elastic tape (i.e., Elastikon, Vetrap). Wrapped from the toes towards the body, this layer should also be smooth and snug. Do not pull elastic tapes to their limits, as this will interfere with circulation and result in bandage failure. The tape should be in contact with the skin (hair) at the bandage margins, anchoring the bandage so it will not slip.

The outer layer of a bandage should be applied smoothly and snugly, but not tight enough to cutoff blood circulation.

Bandage Changes

Bandages should be checked frequently for any signs of swelling discoloration or coolness of the skin, odor, or saturation of the bandage material. The bandage should be changed whenever any of the above are noticed or any time it appears to be uncomfortable for the pet. Wounds that are draining heavily may require bandage changes every 1 or 2 hours. Bandages over wounds with little or no drainage should be changed every 24 hours.



Bee Stings / Insect Bites

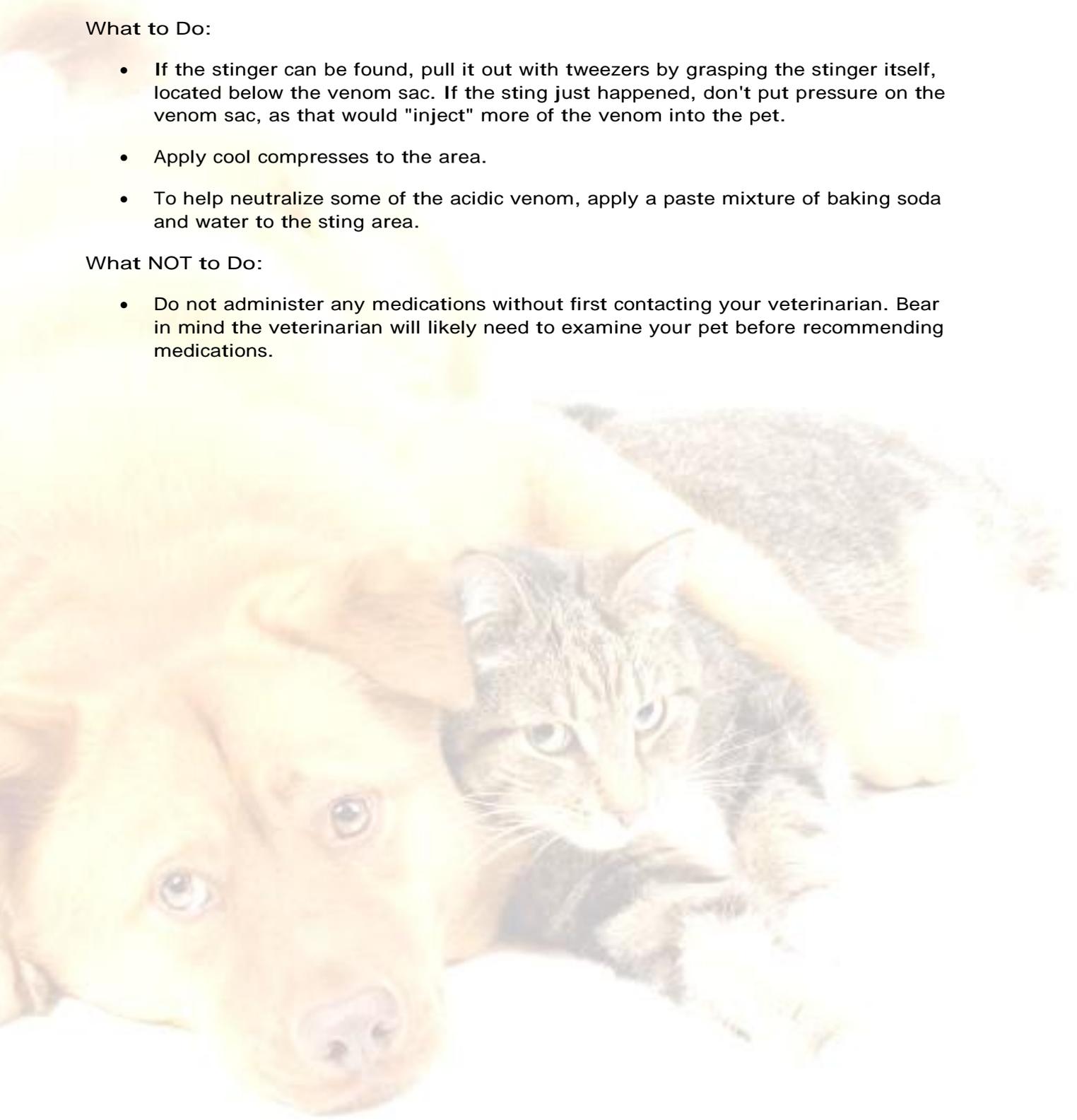
Any insect or spider can cause problems if they bite or sting your pet. A bite or sting causes swelling, redness, and itching. Certain stings can cause your pet to "faint" (see section on fainting) or cause an alarming swelling in the face.

What to Do:

- If the stinger can be found, pull it out with tweezers by grasping the stinger itself, located below the venom sac. If the sting just happened, don't put pressure on the venom sac, as that would "inject" more of the venom into the pet.
- Apply cool compresses to the area.
- To help neutralize some of the acidic venom, apply a paste mixture of baking soda and water to the sting area.

What NOT to Do:

- Do not administer any medications without first contacting your veterinarian. Bear in mind the veterinarian will likely need to examine your pet before recommending medications.



Bleeding

Pets often suffer blood loss as a result of trauma. If bleeding is severe or continuous, the animal may lose enough blood to cause shock (loss of as little as 2 teaspoons per pound of body weight may cause shock). Emergencies may arise that require the owner to control the bleeding, even if it is just during transport of the animal to the veterinary facility. Pet owners should know how to stop hemorrhage (bleeding) if their pet is injured.

Techniques to Stop External Bleeding

The following techniques are listed in order of preference.

Direct Pressure

Gently press a compress (a pad of clean cloth or gauze) over the bleeding absorbing the blood and allowing it to clot. Do not disturb blood clots after they have formed. If blood soaks through, do not remove the pad; simply add additional layers of cloth and continue the direct pressure more evenly. The compress can be bound in place using bandage material which frees the hands of the first provider for other emergency actions. In the absence of a compress, a bare hand or finger can be used.

Direct pressure on a wound is the most preferable way to stop bleeding.

Elevation

If there is a severely bleeding wound on the foot or leg, gently elevate the leg so that the wound is above the level of the heart.

Elevation uses the force of gravity to help reduce blood pressure in the injured area, slowing the bleeding. Elevation is most effective in larger animals with longer limbs where greater distances from wound to heart are possible. Direct pressure with compresses should also be maintained to maximize the use of elevation.

Elevation of a limb combined with direct pressure is an effective way to stop bleeding.

Pressure on the Supplying Artery

If external bleeding continues following the use of direct pressure and elevation, finger or thumb pressure over the main artery to the wound is needed. Apply pressure to the femoral artery in the groin for severe bleeding of a rear leg; to the brachial artery in the inside part of the upper front leg for bleeding of a front leg; or to the caudal artery at the base of the tail if the wound is on the tail. Continue application of direct pressure.

Pressure Above and Below the Bleeding Wound This can also be used in conjunction with direct pressure. Pressure above the wound will help control arterial bleeding. Pressure below the wound will help control bleeding from veins.

Tourniquet

Use of a tourniquet is dangerous and it should be used only for a severe, life-threatening hemorrhage in a limb (leg or tail) not expected to be saved. A wide (2-inch or more) piece of cloth should be used to wrap around the limb twice and tied into a knot. A short stick or similar object is then tied into the knot as well. Twist the stick to tighten the tourniquet until the bleeding stops. Secure the stick in place with another piece of cloth and make a written note of the time it was applied. Loosen the tourniquet for 15 to 20 seconds every 20 minutes. Remember this is dangerous and will likely result in disability or amputation.

Use of a tourniquet should only be employed as a last-resort, life-saving measure!

Internal Bleeding

Internal bleeding is a life-threatening condition, but it is not obvious like external bleeding. Any bleeding which is visible is external. Internal bleeding occurs inside the body and will not be seen. There are, however, external signs of internal bleeding:

- The pet is pale (check the gums or eyelids).



- The pet is cool on the legs, ears, or tail.
- The pet is extremely excited or unusually subdued.

If any of these signs are evident, the pet should be immediately transported to a veterinary facility for professional help. Remember: internal bleeding is not visible on the outside.



Bloat

A life-threatening condition in which the stomach fills with air (dilatation) and, or twists upon itself (volvulus).

What to Do

- Transport to a veterinary hospital or emergency facility immediately. This condition requires professional assistance in all cases.

What NOT to Do

- Do not attempt to relieve the gas from the stomach.
- Do not give anything by mouth.

It is imperative that this condition be recognized early. Your pet may not have a bloated appearance. Signs of bloat include:

- drooling of saliva
- frequent retching and attempts to vomit (occasionally victims may be able to regurgitate a pool of foamy saliva)
- anxiousness, restlessness, and pacing
- depression and shock

Much has been learned about bloat in the past decade. Only a few years ago, a diagnosis of bloat was almost always a death sentence, as only 25% survived. Today the survival rate is better than 80%. Part of the reason for this is increased owner awareness. The earlier the veterinarian gets started with treatment, the better chance there is for survival. Extremely aggressive medical and surgical intervention early in the course of the disease has the most dramatic impact on overall treatment success.

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