

## BASIC FIRST AID FOR TEAMS

We strongly encourage all teams to travel with a well-stocked First Aid Kit. We have been fortunate that our teams rarely encounter serious medical problem but every day mishaps and illnesses do happen. The most common illnesses are dehydration, heat exhaustion, and gastrointestinal illness due to consumption of unsafe food or water. If you get sick and do not have a team physician (or they are unable to treat you adequately), our MICECC staff physicians are available to help. We also have an agreement with a nearby private hospital (King's Hospital) in Haiti that offers 24 hour on-call service and can manage most illnesses and injuries. If necessary, medical evacuation to the nearest facility in the U.S. may be required in case of an extreme medical emergency. All team members should purchase medical evacuation insurance. Team leaders are encouraged to have each team member complete a Health History form with current medical, allergy and emergency contact information in the event of illness/injury while in Haiti (*See Forms and Resources*).

### **SUGGESTED ITEMS FOR FIRST AID KIT**

1. Antiseptic Wipes
2. Arm Slings (1-2)
3. Bandages
  - a. Adhesive Band-Aids (in assorted sizes)
  - b. Adhesive Tape
  - c. Butterfly bandages
  - d. Coban or Ace Wrap Bandage (3")
4. Sterile Gauze (4" x 4", 3" x 3" pads)
5. Instant Cold Compress
6. NS IV fluids and set up (one 500 ml bag per 2-3 people) \* available in the clinic/guest house
7. Medications
  - a. Antacids – Over the Counter Prilosec, Prevacid
  - b. Anti-nausea – Zofran or phenergan suppositories & Pepto Bismo tablets
  - c. Anti-diarrheal (Imodium)
  - d. Bacitracin Antibiotic Ointment
  - e. Benadryl tablets (for allergic reactions)
  - f. Cipro 500 mg (30 tablets)
  - g. Hydrocortisone Ointment
  - h. NSAIDS – Ibuprofen or Aleve (for muscle aches)
  - i. Silvadene ointment (for burns)
  - j. Tylenol (Extra strength) for pain
8. Non-Latex Gloves
9. Re-hydration salts or Gatorade
10. Scissors - Bandage Scissors and sharp scissors
11. Thermometer (Non-Mercury/Non-Glass)
12. Tweezers

If a team member has a history of severe allergic reactions, request that they supply a personal Epi pen in case of a reaction while in Haiti.

HOM maintains a small supply of most of these items in the Cité Soleil clinic, but cannot guarantee that all items are available. Please remember to keep your first aid kit with you at all times!

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### BLACK EYE INJURY

Although most black eye injuries aren't serious, sometimes there is an accompanying injury to the eyeball itself sufficient to cause bleeding inside the eye. Bleeding in the front part of the eye is serious and can affect vision.

#### To take care of a black eye:

- Using gentle pressure, apply a cold pack or a cloth filled with ice to the area around the eye. Take care not to press on the eye itself. Apply cold as soon as possible after the injury to reduce swelling, and continue using ice or cold packs for 24 to 48 hours.
- Look for evidence of blood within the white and colored parts of the eye. If blood can be seen in either of these sites, seek care by an eye specialist (ophthalmologist).
- Seek medical care immediately if you experience vision problems (double vision, blurring), severe pain, or bleeding in the eye or from the nose.

### BLISTERS

If a blister isn't too painful, try to keep it intact. Unbroken skin over a blister provides a natural barrier to bacteria and decreases the risk of infection. Cover a small blister with an adhesive bandage, and cover a large one with a porous, plastic-coated gauze pad that absorbs moisture and allows the wound to breathe. Call your doctor if you see signs of infection around a blister — pus, redness, increasing pain or warm skin. Don't puncture a blister unless it's painful or prevents you from walking or using one of your hands.

**How to drain a blister** - To relieve blister-related pain, drain the fluid while leaving the overlying skin intact

- Wash your hands and the blister with soap and warm water.
- Swab the blister with iodine or rubbing alcohol.
- Sterilize a clean, sharp needle by wiping it with rubbing alcohol.
- Use the needle to puncture the blister. Aim for several spots near the blister's edge. Let the fluid drain, but leave the overlying skin in place.
- Apply an antibiotic ointment to the blister and cover with a bandage or gauze pad.
- Cut away all the dead skin after several days, using tweezers and scissors sterilized with rubbing alcohol. Apply more ointment and a bandage.

#### Blister prevention

To prevent blisters; use gloves, socks, a bandage or similar protective covering over the area being rubbed. You might also try applying a small amount of petroleum jelly (Vaseline) on your skin where your shoe rubs (such as at the heel or the strap of a sandal)

### BURNS

**1st-degree burn** - least serious burn in which only the outer layer of skin is burned

- The skin is usually red
- Often there is swelling
- Pain sometimes is present

Treat a first-degree burn as a minor burn unless it involves substantial portions of the hands, feet, face, groin or buttocks, or a major joint, which requires emergency medical attention.

**2nd-degree burn** - first and second layer of skin has been burned through

- Blisters develop
- Skin takes on an intensely reddened, splotchy appearance
- There is severe pain and swelling.

If the second-degree burn is no larger than 3 inches (7.6 centimeters) in diameter, treat it as a minor burn. If the burned area is larger or if the burn is on the hands, feet, face, groin or buttocks, or over a major joint, treat it as a major burn and get medical help immediately.

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**3rd-degree burn** - most serious burns involve all layers of the skin and cause permanent tissue damage.

- Areas may be charred black or appear dry and white.
- Difficulty inhaling and exhaling, other toxic effects may occur if smoke inhalation accompanies the burn

**For minor burns**, including first-degree burns and second-degree burns limited to a 3 inch area or less

- Cool the burn. Hold the burned area under cool (not cold) running water for 10 or 15 minutes or until the pain subsides. If this is impractical, immerse the burn in cool water or cool it with cold compresses. Don't put ice on the burn
- Cover the burn with a sterile gauze bandage. Don't use cotton, or other material that may get lint in the wound. Wrap the gauze loosely to avoid putting pressure on burned skin.
- Take an over-the-counter pain reliever; Ibuprofen (Advil) or Acetaminophen (Tylenol)
- Use Silvadene cream (in First Aid Kit)

Minor burns usually heal without further treatment. They may heal with pigment changes, meaning the healed area may be a different color from the surrounding skin. Watch for signs of infection, such as increased pain, redness, fever, swelling or oozing. If infection develops, seek medical help.

### Caution

- Don't use ice. Putting ice directly on a burn can cause further damage to the wound.
- Don't apply egg whites, butter or ointments to the burn. This could cause infection.
- Don't break blisters. Broken blisters are more vulnerable to infection.

**For major burns**, see a physician or go to the hospital.

1. Don't remove burned clothing.
2. Don't immerse large severe burns in cold water. Doing so could cause a drop in body temperature (hypothermia) and deterioration of blood pressure and circulation (shock).
3. Check for signs of circulation (breathing, coughing or movement). If there is no breathing or other sign of circulation, begin CPR.
4. Elevate the burned body part or parts, raise above heart level when possible.
5. Cover the area of the burn. Use a cool, moist, sterile bandage; or moist clean cloth

## CHOKING

Choking occurs when a foreign object becomes lodged in the throat or windpipe, blocking the flow of air. The universal sign for choking is hands clutched to the throat. If the person doesn't give the signal, look for these indications:

- Inability to talk
- Difficulty breathing or noisy breathing
- Inability to cough forcefully
- Skin, lips and nails turning blue or dusky
- Loss of consciousness

**If choking is occurring, the Red Cross recommends a "five-and-five" approach to delivering first aid:**

- Give 5 back blows between the person's shoulder blades with the heel of your hand.
- Give 5 abdominal thrusts (also known as the Heimlich maneuver).
- Alternate between 5 blows and 5 thrusts until the blockage is dislodged.

**To perform abdominal thrusts (Heimlich maneuver) on someone else:**

- Stand behind the person. Wrap your arms around the waist. Tip the person forward slightly.
- Make a fist with one hand. Position it slightly above the person's navel.
- Grasp the fist with the other hand. Press hard into the abdomen with a quick, upward thrust — as if trying to lift the person up.
- Perform a total of 5 abdominal thrusts, if the blockage still isn't dislodged, repeat the five-and-five cycle

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If the person becomes unconscious, perform standard CPR with chest compressions and rescue breaths.

### **To perform abdominal thrusts (Heimlich maneuver) on yourself:**

First, if you're alone and choking and you have a landline phone, call 911 or your local emergency number immediately. Then, although you'll be unable to effectively deliver back blows to yourself, you can still perform abdominal thrusts to dislodge the item.

- Place a fist slightly above your navel.
- Grasp your fist with the other hand and bend over a hard surface — a countertop or chair will do.
- Shove your fist inward and upward.

### **Clearing the airway of a pregnant woman or obese person:**

- Position your hands a little bit higher than with a normal Heimlich maneuver, at the base of the breastbone, just above the joining of the lowest ribs.
- Proceed as with the Heimlich maneuver, pressing hard into the chest, with a quick thrust.
- Repeat until the food or other blockage is dislodged or the person becomes unconscious.

### **Clearing the airway of an unconscious person:**

- Lower the person on his or her back onto the floor.
- Clear the airway. If there's a visible blockage at the back of the throat or high in the throat, reach a finger into the mouth and sweep out the cause of the blockage. Be careful not to push the food or object deeper into the airway, which can happen easily in young children.
- Begin cardiopulmonary resuscitation (CPR) if the object remains lodged and the person doesn't respond after you take the above measures. The chest compressions used in CPR may dislodge the object. Remember to recheck the mouth periodically.

## EYE INJURIES

The most common types of eye injuries involve the cornea — the clear, protective "window" at the front of your eye. Contact with dust, dirt, sand, wood shavings or even the edge of a piece of paper can scratch the cornea causing a corneal abrasion. Usually the scratch is superficial; it might feel like you have sand in your eye. Tears, blurred vision, increased sensitivity or redness around the eye can suggest a corneal abrasion. Uncomplicated corneal abrasions usually heal spontaneously within 24 to 48 hours but some corneal abrasions become infected and result in a corneal ulcer, which is a serious problem.

### **Steps you can take to relieve discomfort of a corneal abrasion are:**

- Rinse your eye with clean water (use a saline solution, if available). You can use an eyecup or small, clean drinking glass positioned with its rim resting on the bone at the base of your eye socket. Rinsing the eye may wash out a foreign object.
- Blink several times. This movement may remove small particles of dust or sand.
- Pull the upper eyelid over the lower eyelid. The lashes of your lower eyelid can brush away a foreign object from the undersurface of your upper eyelid.
- Take caution to avoid certain actions that may aggravate the injury:
- Don't try to remove an object that's embedded in your eyeball. Also avoid trying to remove a large object that makes closing the eye difficult.
- Don't rub your eye. Touching or pressing on your eye can worsen a corneal abrasion.
- Don't touch your eyeball with cotton swabs, tweezers or other instruments. This can aggravate a corneal abrasion.

If a corneal abrasion does not resolve within a day or so or if an ulcer forms; seek prompt medical attention

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### HEADACHES

Most headaches are minor and can be treated with a pain reliever. Some head pain, however, signals a serious medical problem. Don't ignore unexplained head pain or head pain that steadily worsens.

#### **Get immediate medical attention if your head pain:**

- Develops suddenly and severely
- Accompanies a fever; stiff neck; rash; mental confusion; loss of consciousness; seizures; changes in vision, such as blurring or seeing halos around lights; dizziness; weakness or paralysis, such as in the arms or legs; loss of balance; a reddened eye; numbness; or difficulty speaking
- Is severe and follows a recent sore throat or respiratory infection
- Begins or worsens after a head injury, fall or bump
- Is a different type of headache from your usual and you're older than 50
- Progressively worsens over the course of a single day or persists for several days

### HEAT EXHAUSTION

Heat exhaustion is one of the heat-related syndromes, which range in severity from mild heat cramps to heat exhaustion to potentially life-threatening heatstroke. Signs and symptoms of heat exhaustion often begin suddenly, sometimes after excessive exercise, heavy perspiration, and inadequate fluid or salt intake.

#### **Signs and symptoms resemble those of shock and may include:**

- Feeling faint or dizzy
- Nausea
- Heavy sweating
- Rapid, weak heartbeat
- Low blood pressure
- Cool, moist, pale skin
- Low-grade fever
- Heat cramps
- Headache
- Fatigue
- Dark-colored urine

#### **If you suspect heat exhaustion:**

- Get the person out of the sun and into a shady or air-conditioned location.
- Lay the person down and elevate the legs and feet slightly.
- Loosen or remove the person's clothing.
- Have the person drink cool water or other nonalcoholic beverage without caffeine.
- Cool the person by spraying or sponging with cool water and fanning.
- Monitor the person carefully. Heat exhaustion can quickly become heatstroke.

Seek emergency medical help if the person's condition deteriorates, especially if fainting, confusion or seizures occur, or if fever of 104 F (40 C) or greater occurs with other symptoms.

### INSECT BITE

Signs and symptoms of an insect bite result from the injection of venom or other substances into your skin. The venom causes pain and sometimes triggers an allergic reaction. The severity of the reaction depends on your sensitivity to the insect venom or substance and whether you've been stung or bitten more than once.

Most reactions to insect bites are mild, causing little more than an annoying itching or stinging sensation and mild swelling that disappear within a day or so. A delayed reaction may cause fever, hives, painful joints and swollen glands. You might experience both the immediate and the delayed reactions from the same insect bite or sting. Only a small percentage of people develop severe reactions (anaphylaxis) to insect venom.

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### Signs and symptoms of a severe reaction include:

- Nausea
- Facial swelling
- Difficulty breathing
- Abdominal pain
- Deterioration of blood pressure and circulation (shock)

Bites from bees, wasps, hornets, yellow jackets and fire ants are typically the most troublesome. Bites from mosquitoes, ticks, biting flies, ants, scorpions and some spiders also can cause reactions. Scorpion and ant bites can be very severe. Some insects also carry disease such as West Nile virus or Lyme disease.

### For mild reactions:

- Remove the stinger, especially if it's stuck in your skin. This will prevent the release of more venom. Wash the area with soap and water.
- Apply a cold pack or cloth filled with ice to reduce pain and swelling.
- Try a pain reliever, such as ibuprofen (Advil, Motrin, others) or acetaminophen (Tylenol, others), to ease pain from bites or stings.
- Apply a topical cream to ease pain and provide itch relief. Creams containing ingredients such as hydrocortisone or lidocaine may help control pain. Other creams, such as calamine lotion or those containing colloidal oatmeal or baking soda, can help soothe itchy skin.
- Take an antihistamine such as diphenhydramine (Benadryl) or chlorpheniramine (Chlor-Trimeton)

Allergic reactions may include mild nausea and intestinal cramps, diarrhea, or swelling larger than 4 inches (about 10 centimeters) in diameter at the site, bigger than the size of a baseball. See your doctor promptly if you experience any of these signs and symptoms.

### For severe reactions:

Severe reactions affect more than just the site of the insect bite and may progress rapidly. Seek emergency medical assistance if the following signs or symptoms occur:

- Difficulty breathing
- Swelling of the lips or throat
- Faintness
- Dizziness
- Confusion
- Rapid heartbeat
- Hives
- Nausea, cramps and vomiting

Take these actions immediately while waiting with an affected person for medical help:

1. Check for medications that the person might be carrying to treat an allergic attack, such as an autoinjector of epinephrine (EpiPen). Administer the drug as directed — usually by pressing the autoinjector against the person's thigh and holding it in place for several seconds. Massage the injection site for 10 seconds to enhance absorption.
2. Loosen tight clothing and cover the person with a blanket. Don't give anything to drink.
3. Turn the person on his or her side to prevent choking if there's vomiting or bleeding from the mouth.
4. Begin CPR if there are no signs of circulation, such as breathing, coughing or movement.

## INTESTINAL DISEASES

**Food Poisoning** - all foods naturally contain small amounts of bacteria, but improper cooking or inadequate storage can result in bacteria multiplying in large enough numbers to cause illness. Parasites, viruses, toxins and chemicals also can contaminate food and cause illness.

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**Signs and symptoms** of food poisoning vary with the source of contamination. Generally they include:

- Diarrhea
- Nausea, sometimes Vomiting
- Abdominal pain
- Dehydration (sometimes) you might feel lightheaded or faint, or have a rapid heartbeat

Whether you become ill after eating contaminated food depends on the organism, the amount of exposure, your age and your health, High-risk groups include:

- Older adults immune systems doesn't respond as quickly or effectively to infectious organisms
- Infants and young children immune systems haven't fully developed
- People with chronic diseases have reduced immune response

**If you develop food poisoning:**

- Rest and drink plenty of liquids.
- Don't use anti-diarrheal medications because they may slow elimination of bacteria from your system

Foodborne illness improves on its own within 48 hours. Seek emergency medical care if you are ill for longer than 2-3 days or you have severe symptoms, such as watery diarrhea that turns bloody within 24 hours

**Gastroenteritis** is an inflammation of your stomach and intestines. Depending on the cause of the inflammation, symptoms may last from one day to more than a week. Common causes are:

- Viruses
- Food or water contaminated by bacteria or parasites
- Reaction to a new food (young children may develop signs and symptoms for this reason)
- Side effect from medications

**Characteristic signs and symptoms include:**

- Nausea or vomiting
- Diarrhea
- Abdominal cramps
- Low-grade fever (sometimes)

**If you suspect gastroenteritis in yourself:**

- Stop eating for a few hours to let your stomach settle.
- Drink plenty of liquids, such as a sports drink or water, to prevent dehydration. If you have trouble tolerating liquids, take them in frequent sips. Make sure that you're urinating normally, and that your urine is light and clear and not dark. Infrequent passage of dark urine is a sign of dehydration. Dizziness and lightheadedness also are signs of dehydration. If any of these symptoms occur and you can't drink enough fluids, seek medical attention.
- Ease back into eating. Gradually begin to eat bland, easy-to-digest foods, such as crackers, toast, gelatin, bananas, rice and chicken. Stop eating if your nausea returns. Avoid milk and dairy products, caffeine, alcohol, nicotine, and fatty or highly seasoned foods for a few days.
- Consider acetaminophen (Tylenol, others) for relief of discomfort, unless you have liver disease.
- Get plenty of rest. The illness and dehydration can make you weak and tired.

**Get medical help if:**

- Vomiting persists more than two days
- Diarrhea persists more than several days
- Diarrhea turns bloody
- Fever is 101 F (38.3 C) or higher
- Lightheadedness or fainting occurs with standing
- Confusion develops
- Worrisome abdominal pain develops

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### NOSEBLEEDS

Nosebleeds are common, most often they are a nuisance and not a true medical problem.

#### To take care of a nosebleed

- **Sit upright and lean forward.** This reduces blood pressure in the veins of your nose and slows bleeding. Sitting forward will help you avoid swallowing blood, which can irritate your stomach.
- **Pinch your nose.** Use your thumb and index finger to pinch your nostrils shut. Breathe through your mouth. Continue to pinch for five to 10 minutes. Pinching sends pressure to the bleeding point on the nasal septum and often stops the flow of blood.
- **To prevent re-bleeding,** don't pick or blow your nose and don't bend down for several hours after the bleeding episode. Remember to keep your head higher than the level of your heart.
- **If re-bleeding occurs,** gently blow your nose to clear out blood clots and spray both sides of your nose with a decongestant nasal spray containing oxymetazoline (Afrin, Mucinex Moisture Smart) Pinch your nose again as described above.

#### Seek medical care immediately if

- The bleeding lasts for more than 20 minutes
- The nosebleed follows an accident, a fall or an injury to your head, including a punch in the face that may have broken your nose

### SPRAINS

Your ligaments are tough, elastic-like bands that connect bone to bone and hold your joints in place. A sprain is an injury to a ligament caused by tearing of the fibers of the ligament. The ligament can have a partial tear, or it can be completely torn apart.

Of all sprains, ankle and knee sprains occur most often. Sprained ligaments swell rapidly and are painful. Generally, the greater the pain and swelling, the more severe the injury is.

#### For minor sprains, you can treat the injury yourself by following the instructions for R.I.C.E.

1. **Rest** the injured limb. Try not to put any weight on the injured area for 48 hours, but don't avoid all activity. Even with an ankle sprain, you can usually exercise other muscles to minimize deconditioning
2. **Ice** the area. Use a cold pack or a compression sleeve filled with cold water to help limit swelling after an injury. Try to ice the area as soon as possible after the injury and continue to ice it for 15 to 20 minutes, four to eight times a day, for the first 48 hours or until swelling improves. If you use ice, be careful not to use it too long, as this could cause tissue damage.
3. **Compress** the area with an elastic wrap or bandage. Compressive wraps or sleeves made from elastic are best.
4. **Elevate** the injured limb above your heart whenever possible to help prevent or limit swelling.

After two days, gently begin using the injured area. You should feel a gradual, progressive improvement. Over-the-counter pain relievers, such as ibuprofen (Advil, Motrin) and acetaminophen (Tylenol, others), may be helpful to manage pain during the healing process. Seek medical care if your sprain isn't improving after two or three days.

#### Seek emergency medical assistance if:

- You're unable to bear weight on the injured leg, the joint feels unstable or numb, or you can't use the joint. This may mean the ligament was completely torn.
- Redness or red streaks spread out from the injured area. This means you may have an infection.
- You have re-injured an area that has been injured a number of times in the past.
- You have a severe sprain. Inadequate or delayed treatment may cause long-term joint instability or chronic pain.

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### SUNBURN

Signs and symptoms of sunburn usually appear within a few hours of exposure. If the exposure affects a large area of your skin, sunburn can cause headache, fever and fatigue in addition to pain, redness and blistering.

#### **If you have a sunburn**

- Take a cool bath or shower. You can also apply a clean towel dampened with cool water.
- Apply an aloe vera or moisturizing lotion several times a day.
- Leave blisters intact to speed healing and avoid infection. If they burst on their own, apply an antibacterial ointment on the open areas.
- Take an over-the-counter pain reliever such as ibuprofen (Advil, Motrin), or acetaminophen (Tylenol, others). Do not use in children under the age of 2.
- Don't use petroleum jelly, butter, egg whites or other home remedies on your sunburn. They can prevent or delay healing.

If your sunburn begins to blister or if you experience complications, such as rash, itching or fever, seek care.

### TOOTHACHES

Tooth decay is the primary cause of toothaches for most children and adults. The first sign of decay may be a sensation of pain when you eat something sweet, very cold or very hot. A toothache often indicates that your dentist will need to work on your teeth.

#### **Self-care tips**

Until you can see your dentist, try these tips for a toothache:

- Rinse your mouth with warm water.
- Use dental floss to remove any food particles wedged between your teeth.
- Take an over-the-counter (OTC) pain reliever (Tylenol) to dull the ache.
- Apply an OTC antiseptic containing benzocaine directly to the irritated tooth and gum to temporarily relieve pain. Don't use benzocaine in children younger than age 2. Never use more than the recommended dose of benzocaine. Direct application of oil of cloves (eugenol) also may help. Don't place aspirin or another painkiller directly against your gums, as it may burn your gum tissue.

#### **Call your dentist**

- If you have signs of infection, such as swelling, pain when you bite, red gums or a foul-tasting discharge
- If the pain persists for more than a day or two
- When you have fever with the toothache
- If you have trouble breathing or swallowing

### WOUND CARE

A puncture wound - such as from stepping on a nail - can be dangerous because of the risk of infection. A puncture wound doesn't usually cause excessive bleeding but still needs treatment. Wounds resulting from human or animal bites are especially prone to infection and almost always require medical care.

#### **See your doctor if the puncture wound**

- Is deep
- Is in your foot
- Has been contaminated with soil or saliva
- Is the result of an animal or human bite

Minor cuts and scrapes usually don't require a trip to the emergency room. Yet proper care is essential to avoid infection or other complications. These guidelines can help you care for simple wounds:

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1. **Stop the bleeding.** Minor cuts and scrapes usually stop bleeding on their own. If they don't, apply gentle pressure with a clean cloth or bandage. Hold the pressure continuously for 20 to 30 minutes and if possible elevate the wound. Don't keep checking to see if the bleeding has stopped because this may damage or dislodge the clot that's forming and cause bleeding to resume. If blood spurts or continues flowing after continuous pressure, seek medical assistance.
2. **Clean the wound.** Rinse out the wound with clear water. Soap can irritate the wound, so try to keep it out of the actual wound. If dirt or debris remains in the wound after washing, use tweezers cleaned with alcohol to remove the particles. If debris still remains, see your doctor. Thorough cleaning reduces the risk of infection and tetanus. To clean the area around the wound, use soap and a washcloth. There's no need to use hydrogen peroxide, iodine or an iodine-containing cleanser.
3. **Apply an antibiotic.** After you clean the wound, apply a thin layer of an antibiotic cream or ointment such as bacitracin to help keep the surface moist. The products don't make the wound heal faster, but they can discourage infection and help your body's natural healing process. Certain ingredients in Neosporin can cause a mild rash in some people. If a rash appears, stop using the ointment.
4. **Cover the wound.** Bandages can help keep the wound clean and keep harmful bacteria out. Change the bandage daily or if it becomes wet or dirty. After the wound has healed enough to make infection unlikely, exposure to the air will speed wound healing.
5. **Get stitches for deep wounds.** A wound that is more than 1/4-inch (6 millimeters) deep or is gaping or jagged edged and has fat or muscle protruding usually requires stitches. Adhesive strips or butterfly tape may hold a minor cut together, but if you can't easily close the wound, see your doctor as soon as possible. Proper closure within a few hours reduces the risk of infection.
6. **Watch for signs of infection.** See your doctor if the wound isn't healing or you notice any redness, increasing pain, drainage, warmth or swelling.