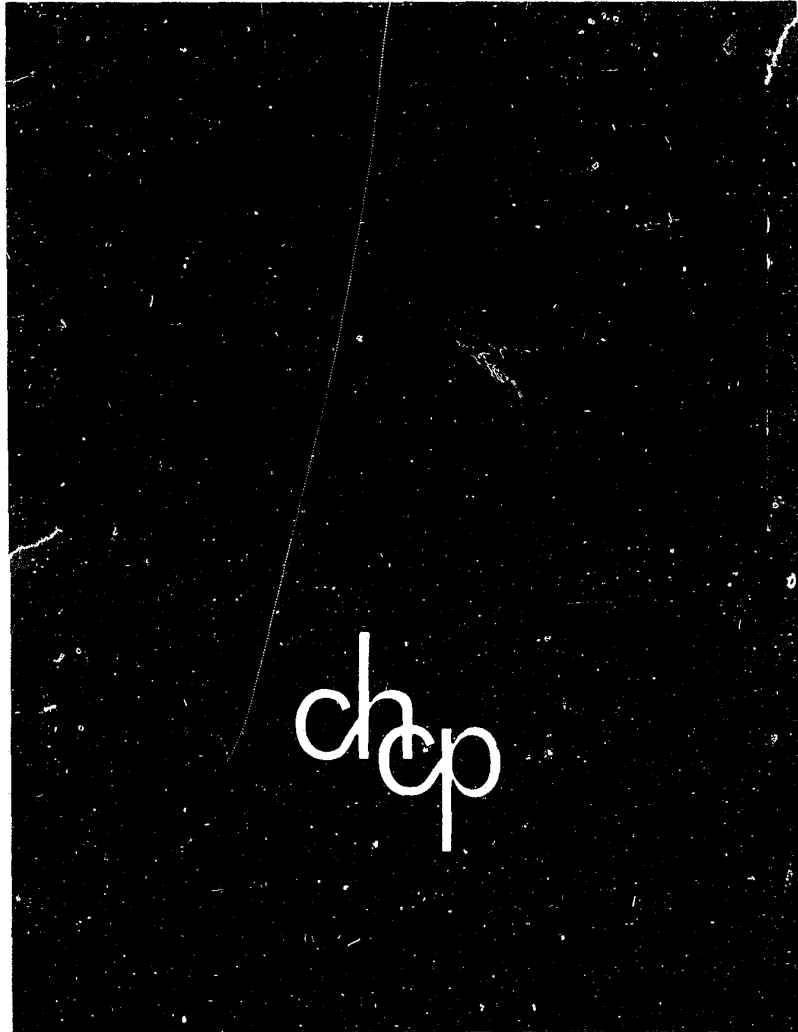


68733



CORRECTIONAL HEALTH CARE PROGRAM

Correctional Health Care Program

RESOURCE MANUAL

RESIDENT SELF CARE

NCJRS

JUN 25 1980

ACQUISITIONS

MICHIGAN DEPARTMENT OF CORRECTIONS
OFFICE OF HEALTH CARE

LAW ENFORCEMENT ASSISTANCE ADMINISTRATION
UNITED STATES DEPARTMENT OF JUSTICE

Correctional Health Care Program
Michigan Department of Corrections
Office of Health Care

RESIDENT GUIDE TO SELF CARE

Developed by:

Dean Rieger, M.D.
Huron Valley Women's Facility

Michael Shaw, D.O.
Kinross Correctional Facility

Edited by:

Marsha Tomczyk
Barbara L. Worgess

The Correctional Health Care Program is funded by Grant Number 77-ED-99-0026 awarded to the Michigan Department of Corrections by the Law Enforcement Assistance Administration, United States Department of Justice. The primary purpose of this grant is to assist a group of ten states in improving health care services in their correctional systems. Collaborating with the Michigan Department of Corrections on this project are the American Medical Association, the Department of Medical Care Organization of the University of Michigan and the Department of Community Health Science of Michigan State University. Major activities conducted as part of this project include the development of standards for health services in prisons; training programs for administrators, trainers and providers of health services in participating states; and on-site technical assistance in the ten states. This report was prepared as part of the technical assistance phase of the project. Points of view or opinions stated in this report are those of the authors and do not necessarily represent the official opinion of the United States Department of Justice.

This manual or any part thereof may be reproduced by a correctional entity for internal use without obtaining written permission from the Michigan Department of Corrections as long as proper credit is given to authors, the Correctional Health Care Program and the Law Enforcement Assistance Administration.

Michigan Department of Corrections
Office of Health Care
3222 South Logan - Logan Center
Lansing, Michigan 48913

A C K N O W L E D G E M E N T S

The authors would like to thank the health care staff at Kinross Correctional Facility and Huron Valley Women's Facility for assistance in developing this manual.

C H C P P R O J E C T S T A F F

Michigan Department of Corrections
Office of Health Care

University of Michigan
School of Public Health
Department of Medical Care Organization

Michigan State University
Colleges of Human and Osteopathic Medicine
Department of Community Health Science

American Medical Association
Division of Medical Practice
Program to Improve Health Care in Correctional Institutions

University Research Corporation

Manuals Available in This Series

Correctional Health Care: An Annotated Bibliography

Correctional Health Care Facilities: Planning, Design, and Construction

Dental Health Programs for Correctional Institutions

The Development of Policy and Procedure Manuals for Correctional Health Programs

Diet Manual for Correctional Health Care

Establishing Continuing Medical Education Programs

Establishing Health Education Programs

Establishing Protocol-Directed Health Care

Establishing Staff Development Programs

First Aid and Emergency Procedures Handbook

Information Systems for Correctional Health Care Programs

Informed Consent in Correctional Health Care Programs

Make-Buy Decision Analysis for Correctional Health Care

Mid-Level Practitioners in Correctional Institutions: An Analysis of Legislation

Pharmacy Services in Correctional Institutions

Problem Oriented Medical Records in Correctional Health Care

Quality Assurance: A Brief Overview for the Correctional Health Care Administrator

Resident Guide to Self-Care

Sample Policy Manual for Correctional Health Care

F O R E W O R D

The issues of adequacy, accessibility, and quality of health care service delivery in correctional institutions are increasingly receiving well-merited attention. Long plagued by neglect and paucity of resources, most correctional agencies throughout the country have recognized the need for clear direction in addressing these issues. The unique characteristics of prison populations and facilities pose a problem in applying directly the standards and policies which prevail in community health care settings. Once the basic ingredients common to good health care practice have been identified, the challenge remains of their adaptation without essential compromise to the correctional environment. Implementation of a system which meets statutory and professional standards is the responsibility of correctional health care administrators in the 1980's.

Through a grant from the Law Enforcement Assistance Administration, the Michigan Department of Corrections has provided technical assistance to ten states with a view to improving their health care system for residents of correctional institutions. This manual is one of a series published under auspices of the grant. Together, the manuals will support and extend the training sessions and technical assistance efforts of the past two years. Their purpose is to define concisely the major elements which must constitute a comprehensive health care program for a correctional agency.

There is no substitute for proper planning, adequate resources and good management. These manuals can assist in the planning effort to identify the kind of resources which will comprise an adequate program. In addition, they address the alternatives which must be considered, the integration of various components, and establish a foundation for the decisions which must be made by each agency.

The manuals have been compiled by persons who are experts in their professional field and by persons active in the delivery of health services to correctional residents. There are too many divergencies among correctional agencies to permit a single approach to be universally applicable. For this reason, the manuals are intentionally broad in scope and will require careful analysis and specification by each user.

A health care system does not stand alone and isolated from its environment. It can succeed only through a cooperative and carefully planned effort which involves health care personnel, staff of the correctional system, community health resources, and residents as interested consumers of the services. Where multiple institutions exist within a state correctional agency, appropriate central direction and coordination are essential for coherent and consistent form and quality of the services provided. It is at this level, in particular, that the overall planning, resource development, and management of policy should occur.

These manuals are written in a simple "how-to" format and are intended to be self-explanatory. Local regulatory agencies and other community and professional health resources can be helpful in their interpretation and application.

The goal which has prompted development and issuance of this manual and of others in the series has been attainment of professional quality health care for residents of correctional institutions comparable to that available in the community. The sponsors will consider their efforts well rewarded if, as a result, changes are implemented which improve access and cost-efficient delivery of needed health services.

Jay K. Harness, M.D.
Director
Correctional Health Care Program

P R E F A C E

Proper health care is essential for its own sake and for what it enables us to enjoy and accomplish in our lives. It is now being realized that patients can and should take a more active role in their own health care. There is nothing new about self-care; it has been and continues to be a substantial factor in our health care system.

An increasing number of health practitioners now believe that a great deal more responsibility can be turned over to the patient than ever before. Personal responsibility for various health-related behaviors and participation in various aspects of health care has become an active and characteristic requirement of effective health care. In this sense, self-care is viewed as a decision making process which involves self-observation, perception and labeling of symptoms, judgment concerning the severity of the illness, and choice of proper treatment.

In the face of steeply mounting costs of health care, steadily rising demands for health care and the increasing shortage of physicians and other care providers, it is especially important to take initiative and responsibility for our own health care. It is hoped that increased self care will reduce dependency on outside resources (including contacts with health professionals) while making health care more accessible and more efficiently delivered. With the proper utilization of health care resources, the time of physicians and other care providers can be more appropriately employed for those patients whose complaints require the attention of a trained provider.

In a correctional institution where utilization of health services is typically high and resources are typically scarce, a self care program can be particularly effective. It could reduce sick call visits for the large number of complaints that are self-treatable. Encouraging residents to assume responsibility for their own health status could be a positive influence on their rehabilitation potential as well. A self-care program in a correctional institution must, of course, be defined within the constraints imposed by security.

This guide is being presented to encourage you to advocate self-care programs in your correctional institutions. It outlines and describes many common health problems, the proper treatment for them, and the point at which the resident should go to health service. This guide provides an information base which you can adapt to the needs of your institution. The guide can be modified, copied and distributed to residents and custody personnel. It is hoped that this guide will increase competence in self-care while decreasing delays in seeking professional care when it is necessary.

Barbara L. Worgess, M.P.H.
Grant Coordinator
Office of Health Care

Marsha Tomczyk
Research Assistant
Office of Health Care

C O N T E N T S

	Page
Foreword.	i
Prefaceiii
How to Take Medicines	1
Sunburn and Medications	1
Health Conditions and Problems (In Alphabetical Order)	
Acne.	2
Artificial Respiration, Rescue Breathing Technique.	3
Blisters.	4
Boils	5
Bruises	6
Choking	7
Cold Sores.	8
Common Cold (Head Cold)	9
Constipation.	10
Cuts and Scrapes.	11
Diarrhea.	12
Douching.	13
Earache	14
Fainting Spell (Syncope).	15
Fever	16
Frostbite	17
Headache.	18
Head Injury	19
Heat Stroke	20

C O N T E N T S (Continued)

	Page
Hemorrhoids (Piles)	21
Hives.	22
Hyperventilation Syndrome (Pins and Needles)	23
Insect Bites and Stings.	24
Insomnia	25
Insulin Reactions.	26
Minor Burns.	27
Nausea and Vomiting.	28
Nosebleeds	29
Pain with Urination.	30
Poisoning.	31
Puncture Wounds.	32
Severe Bleeding.	33
Shave Bumps.	34
Sinus Problems	35
Sore Back.	36
Sore Throat.	37
Splinters.	38
Sprains and Strains.	39
Sunburn.	40
Toothache.	41
Upset Stomach.	42
Vaginal Discharge.	43
Drug Index.	44

HOW TO TAKE MEDICINES

Medicines are prescribed for specific lengths of time for very good reasons. Depending upon the medication involved, it is very important to take it as prescribed. What follows is a short list of medication types and what may happen if they are taken incorrectly:

Antibiotics must be taken for the full prescription. Otherwise the infection may come back.

Pain medications may be stopped at any time without problems.

Antidepressant medications must be taken for the full prescription or they may not be of use. An occasional missed dose is not important.

Seizure medications should be taken religiously in order to keep the possibility of seizure activity as low as possible. An occasionally missed dose will probably be of no significance.

Symptomatic medications (antacids, cold medications, muscle relaxers, skin creams, etc.) can be stopped at any time unless there is an order by the physician or physician assistant stating it should not be stopped.

SUNBURN AND MEDICATIONS

Many medications can sensitize your skin to the sun. This includes most psychological medications and many antibiotics (of which tetracycline is a bad offender). If you are taking a medication and are not sure if it can cause problems, check in the Physicians Desk Reference (available in the library) or ask at Health Services.

ACNE

Acne is caused by an overactivity of the oil glands of the skin. It is most common on the face, back and chest.

Treatment:

1. Wash your face with a washcloth, using an acne soap, Dial, Zest or Coast.
2. Do not use face creams or oils of any kind other than those advised by Health Services.
3. Do not use hair creams or oils.
4. Get plenty of sleep.
5. Drink 8 glasses of water daily.
6. Avoid vigorous physical activity.
7. Avoid the following foods:
 - a. Chocolate
 - b. Cola
 - c. Peanuts
 - d. Peanut Butter
 - e. Butter
 - f. Ice Cream
 - g. Sweets

When to go to Health Services:

1. If large bumps appear on your face in the area of the pimples.
2. If acne becomes painful.
3. If area surrounding pimples becomes red and hot.

ARTIFICIAL RESPIRATION, RESCUE BREATHING TECHNIQUE

Artificial respiration is to be used for a resident who has ceased breathing due to drowning, choking, electric shock, or other cause.

Treatment:

1. Have someone contact Health Services while you stay with the resident. Begin artificial respiration IMMEDIATELY and DO NOT STOP until the resident can breathe on their own or until help arrives.
2. Try to keep the resident warm while giving artificial respiration.
3. Quickly clear the mouth and throat by wiping out any fluid, vomitus, mucus, or other object with fingers or with cloth around fingers.
4. Place resident flat on their back. Place a hand or a soft object under the neck, keeping the head tilted back as far as possible.
5. Grasp the angle of the jaw and lift the jaw so that it juts forward. This will pull the tongue away from the back of the throat so that air can get in.
6. Pinch the resident's nose and blow into the mouth with smooth, steady action until the chest is seen to rise. If the chest does not rise quickly, recheck the position of the head and jaw. If air is still blocked, look into the mouth and try to dislodge all material from the airway.
7. After blowing air into resident's mouth for three to four seconds, remove your mouth and allow the lungs to empty.
8. Continue with breaths every three or four seconds.

When to go to Health Services

Contact Health Services immediately.

BLISTERS

Blisters are small pockets of pus, blood, or serum resulting from pressure, rubbing, minor burns, or other irritating factors.

Treatment:

1. Leave the blister alone. Do not break it. The skin is "nature's bandaid" over the tissue.
2. If the skin blister breaks, it is essentially an open wound and it should be treated in the following manner:
 - a. Keep it clean.
 - b. Soak it in warm water for 15 minutes, 3 times a day.
 - c. Keep a sterile dressing or bandaid over the exposed skin.
 - d. Apply a medicated antibacterial ointment (see Drug Index).
 - e. Keep pressure off the site.

When to go to Health Services:

1. If the blister becomes infected.
2. If the blister is very large or painful.
3. If you are diabetic.

BOILS

A boil is an infection of one of the glands of the skin. In its normal course, it will come to a head, pop, and drain.

Treatment:

1. Do not pick or squeeze it.
2. Apply warm, moist soaks as often as possible.
3. Cover with bandaid and put on antibacterial ointment when it starts to drain. (see Drug Index)
4. Take Tylenol or aspirin for the pain. (see Drug Index)

When to go to Health Services:

1. If the boils occur often.
2. If there are many boils in one area.
3. If it is severely painful and has not popped.
4. If red streaks develop under the skin near the boil.

BRUISES

A bruise is caused by the blood from a rupture of small blood vessels spreading into the surrounding tissue.

Treatment:

1. Apply ice or cold water to the bruise as soon after it happens as possible.
2. After 48 hours of intermittent icing (or cold water), begin applying warm, moist heat to the area.
3. Avoid using the bruised area.
4. Avoid sports and pumping iron.
5. Take Tylenol or aspirin (see Drug Index) for the pain.

When to go to Health Services:

1. If a large area is involved.
2. If the bruise is slow to heal (normal healing takes two weeks).
3. If a lump develops where the bruise was.
4. If the bruise swells severely.

CHOKING

Choking may be caused by food or other objects being lodged in the throat. It may stop breathing.

Treatment:

1. Forcefully hit the choking resident on the back between the shoulder blades in an effort to propel the object from the windpipe.
2. If this is not instantly successful, stand behind the choking resident, clasp your hands around their chest with your hands just below the breast bone and suddenly squeeze their chest as quickly and as hard as you can. Repeat if necessary.
3. If there is no breathing after these attempts to dislodge the object, apply artificial respiration and have someone contact Health Services IMMEDIATELY while you continue artificial respiration until help arrives.

When to go to Health Services:

Contact Health Services immediately if you are unable to dislodge the object.

COLD SORES

Cold sores are viral infections in the skin that return over and over again. The main cause of cold sores is stress (fever, sunburn, nerves, etc.). Cold sores are contagious by direct contact and can be contracted on any part of the body.

Treatment:

1. Keep the area clean and moist.

When to go to Health Services:

1. If cold sores seem to be swelling.
2. If the cold sore develops pus.

COMMON COLD (HEAD COLD)

The common cold is a virus infection which usually involves the nose, throat and sinuses. You may get a runny or stopped up nose, a sore throat, hoarseness, a dry cough, weakness, an overall sick feeling, and aches and pains. The common cold may last approximately one week. Antibiotics (Penicillin, Tetracycline, Sulfa, etc.) are not of any value and may make things worse.

Treatment:

All medicine and instructions needed to treat your cold are available at the resident store. You should do the following:

1. Take an antihistamine-decongestant (see Drug Index) for a runny nose, sniffles, and nasal congestion.
2. Take Tylenol or aspirin (see Drug Index) for generalized aches and pain.
3. Avoid excessive cold temperatures and fatigue.
4. Get plenty of rest.
5. Stop smoking.
6. Use throat lozenges (see Drug Index).
7. Increase your liquid intake; drink eight ounces (one glass) of water every hour.

When to go to Health Services:

1. If throat pain increases.
2. If white or yellow spots appear on tonsils or throat.
3. If you have shaking chills.
4. If you have chest pain.
5. If you have shortness of breath.
6. If you have an earache.
7. If a skin rash appears.
8. If you have pain in your teeth or sinuses.
9. If the cough produces yellow, green or gray phlegm (sputum).
10. If you are not better in five days.

CONSTIPATION

To most people, constipation means stools (bowel movement) that are so hard or large that they are difficult to pass. It may also mean infrequent passage of normal bowel movements (more than three days between movements), or a change in bowel patterns. The causes of constipation may be improper diet, poor bowel habits, emotional problems and others.

Treatment:

1. Avoid all starches such as bread, potatoes, pastries, macaroni products, and baked goods.
2. Avoid dairy products such as milk, cream, and cheese.
3. Eat natural laxatives such as fruits, vegetables, prunes and prune juice, fruit juices, bran flakes, bran muffins. However, do not eat apples, bananas, or pears.
4. Drink plenty of water.
5. Use Milk of Magnesia (see Drug Index), and gradually decrease the dosage as bowel movements become more normal.
6. Exercise regularly.

When to go to Health Services:

1. If you have continuous belly pain after having tried all the above treatments.
2. If you go for four or more days without a bowel movement.

CUTS AND SCRAPES

Cuts and scrapes occur when the skin is broken. Usually a cut or a scrape will bleed indicating that blood vessels are broken.

Treatment:

1. Wash the wound well using soap and water. Be sure to get all the dirt out because dirt causes infection.
2. Rinse the area under running water.
3. Do not rub the wound dry with a towel; use a sterile or clean cloth and pat it dry or let it dry in the air.
4. Apply a thin layer of antibacterial ointment (see Drug Index).
5. Cover the wound with a bandaid or gauze pad.

When to go to Health Services:

1. If the bleeding will not stop.
2. If the cut is very deep or large.
3. If there is a foreign object in the cut.
4. If pus, fever, or swelling develop.

DIARRHEA

Diarrhea is the passage of many loose, watery, or unformed stools (bowel movements). It is usually caused by viruses, emotional problems, or improper eating habits.

Treatment:

1. Rest in bed.
2. Drink clear liquids such as tea, water, broth, bouillon, or ginger ale in large, infrequent doses (example: 2 cups 3 times a day).
3. Do not eat or drink natural laxatives such as prunes, coffee, fruit, etc.
4. Use Kaopectate (see Drug Index).

When to go to Health Services:

1. If blood, mucus, or worms appear in the stools.
2. If you have abdominal or rectal pain.
3. If you have severe abdominal cramps.
4. If you are not better in three days.
5. If you are diabetic.

DOUCHING

Douching is the procedure of washing out the vagina with various substances. Many women like to douche after their menstrual periods to eliminate the left over blood. This can be a very good hygienic practice but is not necessary for good vaginal health. While a mild vinegar douche (one tablespoon of vinegar in a quart of warm water) is fine, too frequent douching or douching with strong chemicals (including commercially available douches or vaginal deodorants) can cause vaginal irritation or discharge. One douche a month is quite enough.

EARACHE

Earache is usually caused by an infection or an increase in pressure in the ear. Sometimes the outer canal of the ear will become infected.

Treatment:

1. Never use Q-tips in your ears.
2. Never put anything smaller than your small finger in your ear.
3. Chew gum three times a day while you have the problem. (Will help relieve pressure in your ear.)
4. Swallow while holding your nose. (Will help relieve pressure in your nose.)
5. Take Tylenol or aspirin (see Drug Index) for pain.

When to go to Health Services:

1. If the pain is severe.
2. If there is drainage from the ear.
3. If you notice a change in hearing.
4. If there is a bad odor from ear.
5. If there is an insect or other object in your ear.

FAINING SPELL (SYNCOPE)

Syncope means a "sudden loss of strength," and it is what we ordinarily call a fainting spell. It is caused by a temporary disturbance in the function of the cells of the brain brought about by a decrease in the amount of blood being transported to the brain.

Treatment:

1. Have the patient lie flat or, if in a sitting position, have the patient put his head between his legs.
2. Untie anything that is around neck so as to decrease pressure in this area.
3. Provide ventilation to the patient by means of a fan if available.
4. Keep the patient at rest until completely recovered, after which he can continue with moderate activity.

When to go to Health Services:

1. If you have a persistent headache.
2. If your vision is disturbed.
3. If you have nausea, vomiting, or diarrhea.
4. If you experience weakness in your arms or legs.
5. If another period of fainting occurs shortly after the first episode.
6. If the person does not awaken within 30 seconds to one minute.

FEVER

Fever is an elevated body temperature and may be caused by infection or stress. Sometimes fevers are indicators of severe problems.

Treatment:

1. Take Tylenol or aspirin (see Drug Index).
2. Drink plenty of liquids.

When to go to Health Services:

1. If the fever lasts more than three days.
2. If the fever is over 102° Fahrenheit.

FROSTBITE

Frostbite is cold (freezing) damage to tissues. Frostbitten hands, feet, ears, etc., will appear pale or white at first and will not have any sensation. There will be much pain when warmed.

Treatment:

1. Warm the affected parts immediately with lukewarm (not hot) water or, if warm water is not available, use body heat.
2. Do not rub the affected area.

When to go to Health Services:

1. Contact Health Services as soon as possible.

HEADACHE

A headache can result from stimulation of or pressure on any of the pain sensitive structures in the head. Common causes are fatigue, tension, emotional upset, eye strain and head colds.

Treatment:

1. Try to figure out what caused the headache and avoid the situation.
2. Take Tylenol or aspirin (see Drug Index) for the pain.
3. Apply cold water compresses to the area of the headache.

When to go to Health Services:

1. If headache persists in spite of above treatment.
2. If you have a stiff neck.
3. If your vision is disturbed.
4. If you experience weakness in arms or legs.
5. If you are dizzy.
6. If you have nausea or are vomiting.

HEAD INJURY

(Care of Patient Not Requiring Hospitalization)

Whether or not the injured person becomes unconscious, any head injury may be dangerous. The presence or absence of swelling at the site of injury has no bearing on its seriousness. The real extent of injury can be determined only after careful examination and observation of the patient over a period of time. The first 24 hours following the injury are the most critical. Serious after effects may appear, however, considerably later.

Treatment:

1. Most important in the treatment of a head injury is for a responsible person to stay with the patient and watch carefully for the appearance of possibly serious symptoms.
2. Waken the injured patient every 2 hours for the first 24 hours.
3. Eat lightly for a day or two.
4. Do not take any medications unless they are prescribed by the doctor.

When to go to Health Services:

1. Call Health Services if any of the following symptoms occur during the first 24 hours of observation:
 - a. Inability to wake or arouse the patient.
 - b. Vomiting.
 - c. Convulsions.
 - d. Marked restlessness.
 - e. Inability to move arms and legs equally well on both sides.
 - f. Severe headache that does not go away within the first 24 hours after injury.
 - g. Mental confusion.
2. Report to the doctor for a second examination the day after the injury if any of the above symptoms persist.

HEAT STROKE

Heat stroke occurs during the summer or early fall and may be caused by exercise or other hot situations. During heat stroke, the person stops sweating, gets red and hot, and loses consciousness.

Treatment:

1. Get the person into shade and cool them rapidly by completely wetting their clothes and body.
2. Give the person sips of cool (not cold) fluids to drink if they are conscious.

When to go to Health Services:

1. Contact Health Services immediately.

HEMORRHOIDS (PILES)

Hemorrhoids are dilated veins located in and around the rectum and anus. They may become slightly inflamed, producing a small amount of discomfort or bleeding. If the bleeding stops spontaneously, or if it is small, there is no need to be seen immediately.

Treatment:

1. Avoid highly seasoned foods such as chili, spaghetti, pizza, etc.
2. If constipation is a problem, eat foods which have a mild laxative effect such as prunes or other fruits.
3. Sit in warm water for 10 to 15 minutes 4 times a day.
4. If you feel a bump at the rectal area, try to gently put it back up your rectum by lubricating the finger of a glove and pushing the bump inward toward the center of the rectum.
5. Take Tylenol or aspirin (see Drug Index) for pain or discomfort.
6. Use hemorrhoid suppositories (see Drug Index).

When to go to Health Services:

1. If bleeding is excessive.
2. If pain is severe.

HIVES

Hives are whitish, slightly raised areas surrounded by reddish areas which vary in size and shape. They may or may not itch. Hives can be caused by nerves or by allergies to food or other substances. Usually they will go away by themselves.

Treatment:

1. Avoid the substance to which you are allergic.
2. Apply cold water or ice to relieve itching.

When to go to Health Services:

1. If the itching is very severe or persistent.

HYPERVENTILATION SYNDROME (Pins and Needles)

Hyperventilation means breathing too fast. Hyperventilation may accompany fever, diseases of the heart and lungs or, frequently, in the absence of any disease, it may be a manifestation of anxiety. In addition to the obvious symptom of breathing faster than other people, most patients feel numbness and tingling of the skin about the mouth, hands, and feet. There is usually a feeling of weakness or lightheadedness. In its most dramatic forms, hyperventilation may lead to spasms and contractions of the muscles of the hands and feet, and even to a loss of consciousness. These symptoms are caused by an imbalance of gases in your body, brought about by breathing out too much carbon dioxide.

Treatment:

1. When the symptoms are caused by anxiety, one of the most important things is for you to realize this fact.
2. To get the carbon dioxide back into the blood stream, get a paper bag large enough to cover your mouth and nose completely and hold it close to your face. Breathe into the bag, then rebreathe the air from the bag. The concentration of carbon dioxide in the air which you have breathed into the bag is sufficient to build up a normal concentration in your blood stream. Try to breathe 10 times in and out of the bag, put the bag aside and breathe normally a few times, then repeat the breathing in and out of the paper bag.
3. When the symptoms have been reduced or have disappeared, you may stop breathing into the paper bag and breathe normally. If you feel the symptoms returning at any future time, repeat the breathing into the bag as often as needed.

When to go to Health Services:

There is usually no need to see a doctor for the treatment of an acute episode of hyperventilation. You should, however, go to Health Services at a later date if these attacks of hyperventilation continue.

INSECT BITES AND STINGS

Most of these problems are minor and do not require a doctor's attention.

Treatment:

1. If only a minor discomfort exists, apply cold water compresses to the bit or sting.
2. Remove stinger if possible.
3. Take Tylenol or aspirin and apply Calamine Lotion (see Drug Index).
4. Do not scratch the area.

When to go to Health Services:

1. If the person faints or has trouble breathing.
2. If you develop a rash all over.
3. If infection develops in a scratched bite.

INSOMNIA

Insomnia is the inability to fall asleep. It has many causes: nervous tension, depression, lack of adequate exercise. A full nights sleep is not necessary every night.

Treatment:

1. Get plenty of exercise prior to your evening meal. (Late exercise will sometimes cause insomnia.)
2. Get adequate fresh air.
3. Eat a few soda crackers prior to retiring.
4. Try to relax your whole body while in bed.

When to go to Health Services:

1. If insomnia is of many days duration.
2. If you are becoming physically run down.

INSULIN REACTION

Diabetics taking insulin and not eating properly may have an insulin reaction. Excessive exercise can also start an insulin reaction. Early symptoms include changes in mental status, irritability, palpitations, confusion, hunger, sweating and eventually, loss of consciousness. It can be fatal.

Treatment:

1. If you are diabetic, take some sugar and water and notify Health Services.
2. If you are not diabetic, assist the diabetic in the above actions.

When to go to Health Services:

Contact Health Services as soon as possible if an insulin reaction occurs or coma is noted.

MINOR BURNS

(Sunburn has Separate Listing)

A burn is a wound caused by excessive heat, electricity, or certain chemicals. The end result is the same: tissue damage. Our primary concern is with first and second degree burns. A first degree burn is a burn which causes reddening and pain but no blister formation. A second degree burn is a burn which does cause blisters, but does not cause underlying tissue damage. A first degree burn can almost always be treated at home. A second degree burn, assuming it does not cover a large or critical area (face, genitals), can usually be treated at home also. A third degree burn is characterized by deep tissue damage and lack of pain. This type of burn should be treated by a doctor.

Treatment:

1. Wash area with comfortably cool water and a mild soap.
2. Do not pop open or peel blisters.
3. Apply a cold compress immediately to the burn. This may help prevent swelling.
4. Take Tylenol or aspirin (see Drug Index) to reduce pain and inflammation.
5. Apply a thin cover of antibacterial ointment (see Drug Index).

When to go to Health Services:

1. If there is damage to the following areas:
 - a. Face
 - b. Neck
 - c. Eyes
 - d. Respiratory system
 - e. Groin area
2. If blistered areas become infected.
3. If foreign particles are imbedded in the burn.
4. If the burn area is extensive.

NAUSEA AND VOMITING

Nausea and vomiting are usually self limited and require no more than self treatment unless certain other signs are present.

Treatment:

1. Avoid all solid foods.
2. Drink plenty of water and fluids such as soup or bouillon.

When to go to Health Services:

1. If there is blood in the vomitus.
2. If the problem lasts over three days.
3. If the pain is severe, steady, or prolonged.
4. If you have recently had a head injury.
5. If you are diabetic.

NOSEBLEEDS

Inside your nose, near the tip, there are many tiny blood vessels which are easily broken. These are the sources of most nosebleeds. They may bleed with the slightest injury during a cold, or if there is a lack of humidity in the air you breathe.

Treatment:

1. Hold nose between thumb and forefinger with firm pressure for five full minutes, breathing through your mouth.
2. Place a folded piece of tissue paper (1/4 inch thick) between upper lip and gums.
3. Place a cold object on the back of the neck.
4. Sit up! Do not lie down!!
5. If the room air is dry (low humidity) place a pan of water near your heat source to prevent a nosebleed.

When to go to Health Services:

1. If bleeding persists after you have tried the above treatment.
2. If you have many nosebleeds.

PAIN WITH URINATION

Pain with urination can be caused by eating irritating foods or by an infection.

Treatment:

1. Stop eating chocolate.
2. Stop drinking tea, coffee, cocoa and cola.
3. Drink at least 8 glasses of water a day.

When to go to Health Services:

1. If you have pain in lower belly.
2. If there is pain with urination for more than one day.
3. If you have a pustular discharge before or after urination.
4. If there is blood in your urine.

POISONING

Anything, even water, may be poisonous. Different poisons need different treatments and certain poisons are extremely dangerous.

Treatment:

1. Contact Health Services for instructions.
2. Do not induce vomiting unless instructed to do so by Health Services.
3. Note time of poisoning, save the container or sample of the poison, and save the vomitus or other excretus that may contain the unknown poison.

When to go to Health Services:

1. Contact Health Services immediately.

PUNCTURE WOUNDS

Puncture wounds are caused by long, sharp objects (i.e. knife, pin, etc.). They are dangerous because of the possibility of infection from dirt and the difficulty in determining damage and depth of the wound. They may or may not bleed.

Treatment:

1. Clean the wound as well as you can with soap and water, rinsing it under running water.
2. Remove all foreign objects from the wound.
3. Cover the wound with a bandaid or gauze pad.
4. If the wound continues to hurt, soak it in warm water four times a day for 3 - 5 days.

When to go to Health Services:

1. If there's a foreign object left in the wound.
2. If you have not had a tetanus shot in the past year.
3. If pus, fever, or severe pain develop.
4. If there is a large amount of uncontrolled bleeding.
5. If numbness or tingling that started at the time of the wound persists.

SEVERE BLEEDING

Severe bleeding means bleeding that does not stop easily or bleeding that spurts from a wound.

Treatment:

1. Press firmly and constantly with any clean material - gauze pads are best - for at least five minutes. If the bleeding is very severe and there is no material available, use your hand.

When to go to Health Services:

1. Contact Health Services as soon as possible.

SHAVE BUMPS

Shave bumps are caused by hairs getting caught below the skin surface, growing under the skin and becoming infected.

Treatment:

1. Wash face with soap and water at least twice daily.
2. If they do get infected, apply warm soaks to the area three times a day or more.
3. Do not pinch, pick or squeeze the bumps.

When to go to Health Services:

1. If the infection of the shave bump is not better in three days.
2. If the bump gets larger, sorer, or redder.
3. If lumps develop in the area of the jaw or behind the ears.

SINUS PROBLEMS

Sinus congestion and sinus headaches are caused by pressure in the sinuses from secretions which cannot drain out of the small opening of the sinuses.

Treatment:

1. Stop smoking (will decrease the secretions).
2. Drink plenty of liquids.
3. Apply warm, moist compresses over the affected sinus area.
4. Place a container with water near heater in room (to put moisture into the air).
5. Take decongestant (see Drug Index) to help drain your sinuses.

When to go to Health Services:

1. If the pain becomes severe.
2. If swelling is present over the affected sinus.
3. If a nosebleed develops.
4. If a fever develops.

SORE BACK

Your back is a large but fragile structure. It is much easier to keep your back healthy than to fix it when it is hurt. To keep your back healthy, you must lift by using your legs instead of your back.

Lift like this:



not like this:



To keep your back strong and avoid any problems, the following two exercises are very helpful:

1. Do sit ups with your knees bent and your feet held down.



Slowly increase the number of sit ups you do.

2. Sit on the floor and pull your knees to your chest.



Do this until your knees can be held tightly against your chest. Continue doing both of these exercises to keep your back healthy.

SORE THROAT

Most sore throats are caused by viruses or irritation from shouting, coughing, or smoking. A few sore throats, however, are caused by bacteria, such as a strep throat. This kind of sore throat requires an antibiotic to be properly treated.

Treatment:

1. Take Tylenol or aspirin (see Drug Index) for the pain.
2. Gargle with warm salt water every two hours.
3. Use throat lozenges (see Drug Index).
4. Stop smoking.
5. Drink plenty of liquids.

When to go to Health Services:

1. If your sore throat does not get better after three days of the above treatment.

SPLINTERS

A splinter is a particle of wood, pencil lead, or other substance that is embedded in the skin.

Treatment:

1. Wash area with soap or phisoex (see Drug Index) and water.
2. Remove the particle with tweezers if it is protruding above the skin surface. Do not probe under the skin.
3. Wash the area again and apply a clean dressing.

When to go to Health Services:

1. If the splinter is large or deeply embedded.
2. If you cannot remove the splinter.
3. If pus or redness develops.

SPRAINS AND STRAINS

When the ligaments which hold the joints of the body are stressed too much they stretch (strain) and can partially break (sprain). Every joint in the body can be affected by this. Symptoms include pain and swelling in the strained or sprained area. The most commonly affected areas are the ankle, knee and wrist.

Treatment:

1. Apply ice for six to twenty-four hours (will decrease the swelling and pain).
2. Take Tylenol or aspirin (see Drug Index) for the pain.
3. Do not use the injured part.
4. Try to keep the injured part elevated.

When to go to Health Services:

1. Contact Health Services as soon as possible.

SUNBURN

Sunburn results from overexposure to the sun or a sun lamp. Since the sun's rays can filter through the clouds, it can occur even on cloudy days. The best prevention for sunburn is careful, gradual exposure to the sun, avoiding the hot afternoon hours. Many lotions are available as protective sunscreens.

Treatment:

1. The best treatment is prevention!
2. Drink plenty of liquids.
3. Take Tylenol or aspirin (see Drug Index) (will help the pain and reduce the inflammation).
4. If blisters develop, follow the treatment for blisters in this booklet.

When to go to Health Services:

If vomiting or dizziness occurs.

TOOTHACHE

Toothache is a condition characterized by pain in and/or around a tooth. It can be caused by infection in the tooth or gum, food particles between the teeth or, most commonly, a tooth decay.

Treatment:

1. Take Tylenol or aspirin (see Drug Index). Do not put aspirin directly on the painful tooth because aspirin will destroy the tooth's enamel.
2. Avoid extremely hot and extremely cold food and drinks.

When to go to Health Services:

See the dentist as soon as possible.

UPSET STOMACH

Upset stomach can be caused by many factors including irritating foods, emotional upset and viruses.

Treatment:

1. Do not eat or drink any food for 12 hours.
2. Slowly drink about a shot glass of water every 15 minutes.
3. Take an antacid (see Drug Index).
4. When your stomach is settled, begin drinking clear fluids, then soft bland foods and, finally, return to your ordinary diet.

When to go to Health Services:

1. If there is no improvement in 24 hours.
2. If you have belly pain.

VAGINAL DISCHARGE

Some discharge from the vagina is normal at various times of the menstrual cycle. When a discharge is irritating, smells badly, or comes out in large amounts, it is abnormal. Occasionally tampons or chemical douches may cause vaginal discharge.

Treatment:

1. An examination is necessary to make a diagnosis. Treatment usually involves medication prescribed by a physician.

When to go to Health Services:

1. If the discharge is irritating.
2. If the discharge smells badly.
3. If the discharge comes out in large amounts.

DRUG INDEX

The following pages contain brief descriptions of many of the medications available to you at the resident store. If you have any further questions, contact Health Services.

ACETAMINOPHEN - See Tylenol

ACNE PREPARATIONS - Many similar products available - see Fostex.

ANALGESTIC BALM

Indications: For temporary relief of minor muscle aches and pains due to strain or exertion and, also, to speed healing. It should be used only after ice has been applied for at least 24 hours.

Directions: Apply thin layer to affected area; rub in lightly. Do not use with direct heat since this may cause burns.

ANTACID LIQUID OR TABLETS - See ArnoLox

ANTIBACTERIAL OINTMENT - See Bacitracin Ointment

ANTI-HISTAMINE DECONGESTANT (many brands available)

Indications: For relief of nasal and sinus congestion, runny nose, sneezing and watery and itching eyes associated with the common cold, sinuses and hay fever.

Directions: Adults: 1 tablet every 4 hours, not to exceed 4 tablets in 24 hours.

Caution: Individuals with high blood pressure, heart disease, diabetes, or thyroid disease should use only as directed by a doctor. This preparation may cause drowsiness. Do not operate machinery while taking this medication.

ANUSOL SUPPOSITORIES

Indications: For temporary relief of the discomforts of hemorrhoids (piles).

Directions: Remove foil wrapper and insert one suppository as deeply as possible into rectum after each bowel movement and at bedtime. If bleeding occurs or condition persists beyond 2 weeks, recheck with nurse or physician.

ARNOLOX, MAALOX, MYLANTA or OTHER ANTACID

Indications: For relief of heartburn, acid indigestion, and upset stomach due to excess stomach acid.

Directions: Liquid: 3 teaspoonfuls (1 tablespoonful) 1 hour after meals and at bedtime or whenever symptoms of hyperacidity occur.

Tablets: Should be chewed. 2 to 4 tablets 1 hour after meals and at bedtime, or whenever symptoms of hyperacidity occur.

ASPIRIN (same as Bufferin) - See Tylenol also.

Indications: For relief of pain from simple headache, neuralgia, fever, and common colds.

Directions: 1 to 2 tablets every 3 to 4 hours as needed.

Note: If allergic to aspirin, or if taking anticoagulants or drugs for gout, use Tylenol.

MACITRACIN OINTMENT (many preparations available - examples: Neosporin, Baciguent)

Indications: For minor cuts, burns and abrasions (scratches).

Directions: Apply ointment liberally once or twice a day as the condition indicates and cover with bandaid or sterile gauze.

Caution: If redness, irritation, swelling, or pain persists or increases or if infection develops, discontinue use and consult a doctor or nurse.

BEN-GAY - See Analgesic Balm

CALAMINE LOTION, PHENOLATED

Indications: For relief of itching and as a protective agent for skin.

Directions: Apply with fingers or cotton pad to the itching skin. Dab, do not rub.

CEPACOL AND CEPASTAT LOZENGES

Indications: For temporary relief of dryness and minor irritations of the mouth and throat and resulting cough.

Directions: Use as needed. Dissolve slowly in mouth.

COLD PREPARATIONS - See Tylenol, Antihistamine-Decongestant

COUGH PREPARATIONS - See Robitussin D.M.

DEBROX

Indications: For softening of ear wax and allowing for normal drainage.

Directions: See package.

Caution: If pain persists, see doctor or nurse.

DECONGESTANT - See Sudafed

DESENEK POWDER

Indications: For prevention of athlete's foot and ringworm of the body. Not for the nails or hairy areas of the body.

Directions: Cleanse and dry affected part. Apply powder to shoes, feet and socks.

EAR DROPS - See Debrox

FIRST AID OINTMENT - See Bacitracin Ointment

FOOT PREPARATIONS - See Desenex and Tinactin

FOSTEX CREAM AND CAKE

Indications: For topical treatment of blackheads, acne, dandruff and other skin conditions characterized by excessive oiliness.

Directions: Use instead of face soap. Wash 2-3 times daily. If face becomes too dry, use less often.

HEMORRHOIDAL PREPARATION - See Anusol Suppository

KAOPECTATE

Indications: For the treatment of uncomplicated diarrhea.

Directions: 4 to 8 tablespoons after each bowel movement.

Caution: Should NOT be used when there is a high fever.

MILK OF MAGNESIA AND METAMUCIL

Indications: For relief of hyperacidity and mild constipation.

Directions: As an antacid - 1 to 2 teaspoonfuls with water. As a mild laxative - 1 to 2 tablespoonfuls with water.

Caution: Do NOT use when abdominal pain, nausea or vomiting is present.

PETROLEUM JELLY (Vaseline)

Indications: For retention and increase in the amount of oil on hair or skin.

Directions: Apply as you feel is indicated.

PHISOHEX

Indications: For cleansing and the control of acne.

Directions: Use no more than twice daily.

ROBITUSSIN DM

Indications: For loosening of cough phlegm due to common colds, and for the control of cough.

Directions: Adults: 1 to 2 teaspoonfuls every 3 to 4 hours as needed.

SELSUM BLUE

Indications: For dandruff control.

Directions: Lather, rinse thoroughly, repeat. May be used twice weekly.

SENAKOT TABLETS

Indications: For relief of hyperacidity and mild constipation.

Directions: 2 to 4 tablets at night.

Caution: Should not be used if there is severe abdominal pain.

SUDAFED

Indications: For opening nasal passages and draining sinuses.

Directions: 1 to 2 pills every four hours, as needed.

Caution: If symptoms persist for five days, go to Health Services. Reduce dosage if nervousness, dizziness, sleeplessness, nausea or headache occur. Individuals with high blood pressure, heart disease, diabetes, urinary retention, glaucoma or thyroid disease should use only if directed by Health Services personnel.

THROAT LOZENGES - See Cepacol Lozenges

TINACTIN CREAM

Indications: For athlete's foot or jock itch.

Directions: Wash and dry area, then apply a thin layer of cream to the affected area. For complete cure, apply cream for two weeks after symptoms disappear.

TYLENOL TABLETS

Indications: For relief of pain from simple headache, fever, neuralgia and the common cold.

Directions: Adults: 1 to 2 tablets every 3 to 4 hours as needed.

VASELINE - See Petroleum Jelly

END