

BONES, JOINTS AND MUSCLES

Indian Red Cross Society

SECTIONS

E.4 Fractures (Injuries

to Bones)

E.5 Injuries and Fractures to the Head, Neck, and

Spine

E.6

Injuries and Fractures to the Cheekbone, Nose, and Lower Jaw



Injuries to the Arm, Elbow, Wrist, Hand, or Fingers



Injuries to the Pelvis, Lower Limbs, Knee, Ankle, or Feet



Dislocation (Injuries to Joints)





E.7

Injuries to the Shoulder, Ribs, and Breastbone



Strains and Sprains (Injuries to Ligaments, Muscles, and Tendons

FRACTURE OF THE CHEEKBONE OR NOSE

CAUSES OF INJURIES AND FRACTURES OF THE CHEEKBONE OR NOSE

WHAT DO I SEE AND ENQUIRE?



2

WHAT DO I DO?



CAUSES OF INJURIES AND FRACTURES OF THE CHEEKBONE OR NOSE:

Injuries and fractures of the cheekbone or nose are often the result of deliberate blows to the face.





WHAT DO I SEE AND ENQUIRE?

You might observe following signs and symptoms

- Swelling or bruising.
- Deformity of the nose or face.
- The nose might be bleeding.
- There might be bleeding from the mouth.



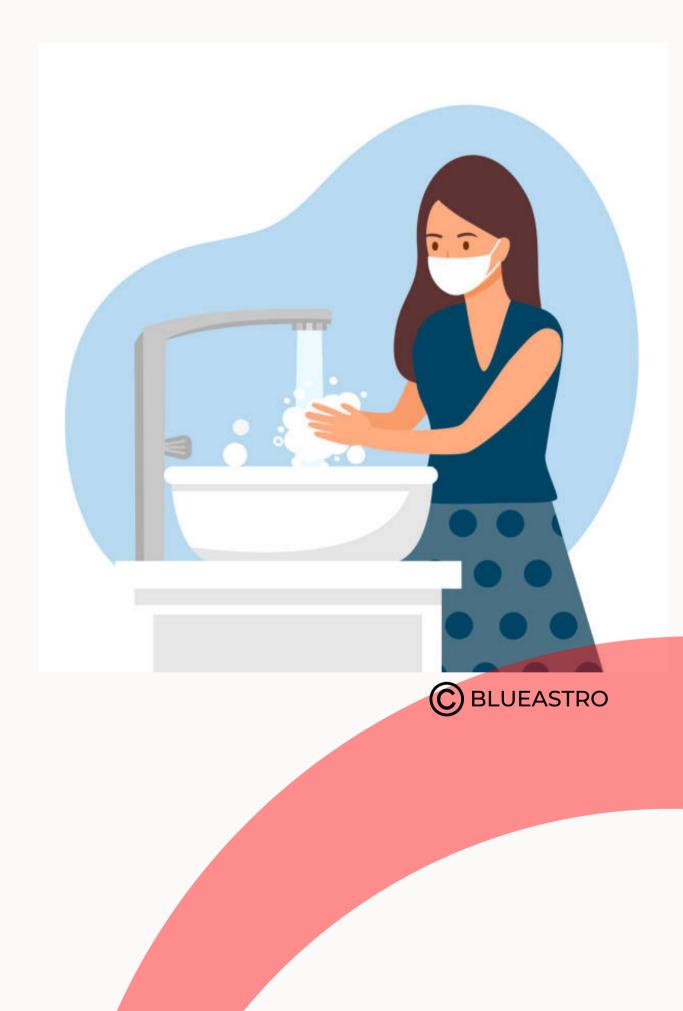
WHAT DO I DO?

1. Safety First

Make sure there is no danger to you and the person

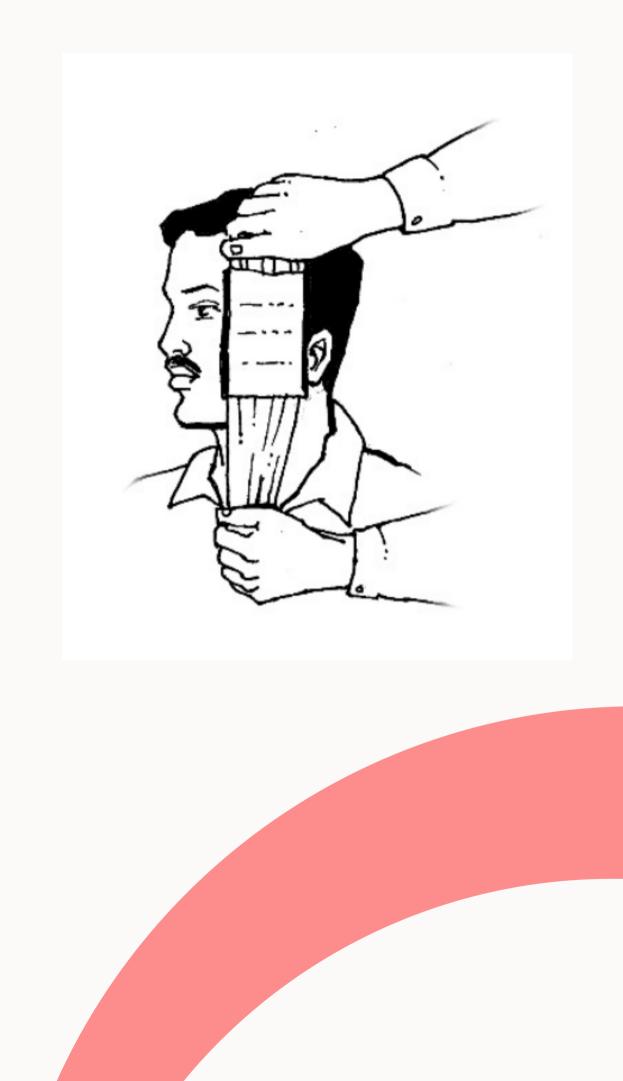
2. Hygiene

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available. Use gloves to protect yourself

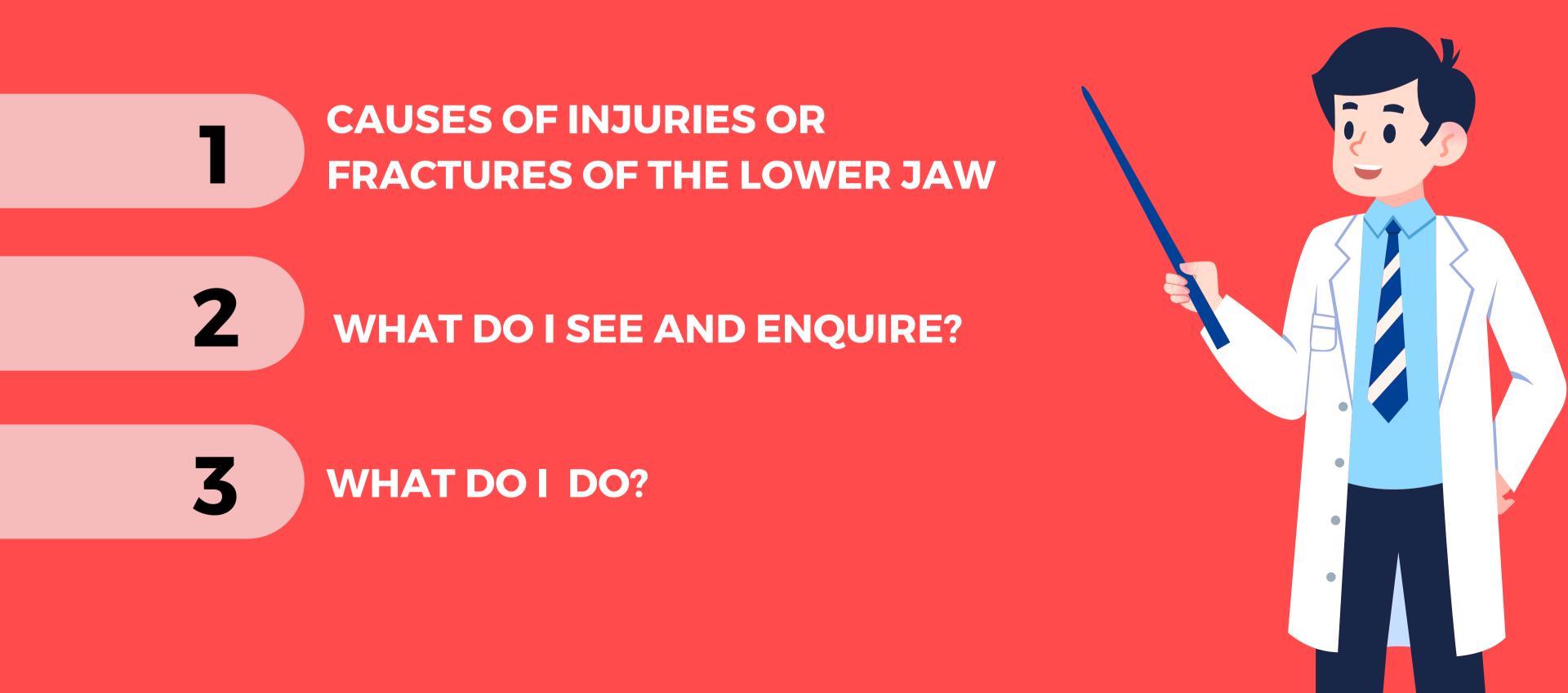


3. PROVIDE FIRST AID

- Apply a cold compress gently on the affected area to reduce the swelling.
- If the nose is bleeding, ask the victim to gently press the nostrils to stop the bleeding.
- Never try to put a deformed nose back into its normal position



FRACTURES OF THE LOWER JAW





CAUSES OF INJURIES AND FRACTURES OF THE LOWER JAW

 Injuries and fractures of the lower jaw are usually the result of a direct force, such as a heavy blow to the chin.

- Fall on the chin might result in fractures of both sides of the jaw.
- In some cases the jaw might also be dislocated.

WHAT DO I SEE AND ENQUIRE?

You might observe following signs and symptoms

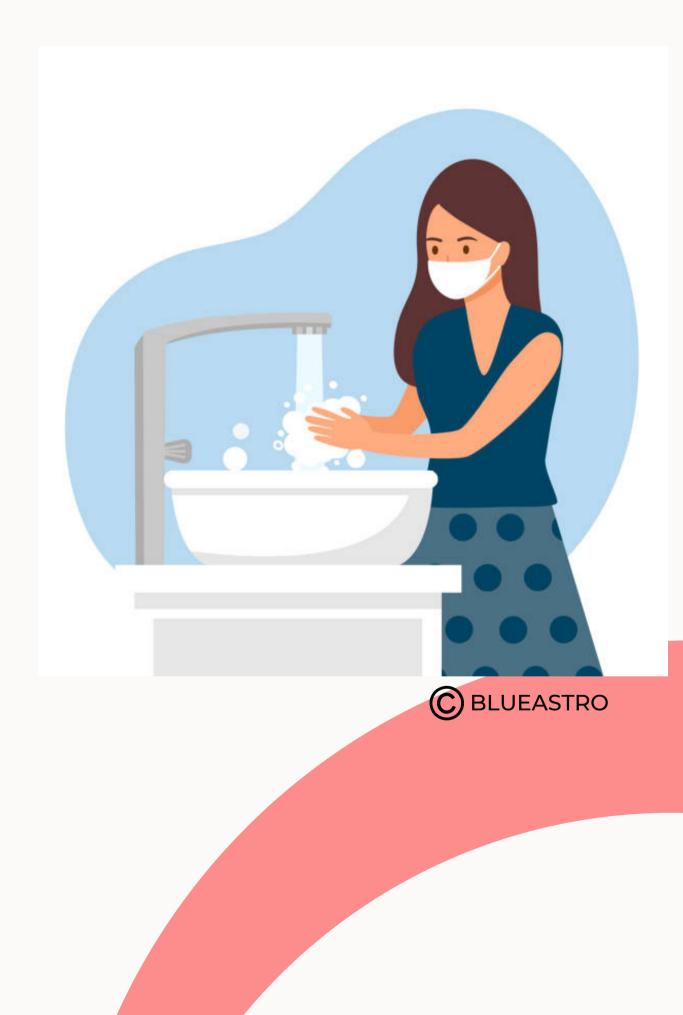
- Difficulty in speaking and/or opening his mouth.
- Saliva becomes blood-stained.
- Face and lower jaw is swollen.
- Teeth look irregular, some teeth may fall out.

WHAT DO I DO? 1. Safety First

Make sure there is no danger to you and the person

2. Hygiene

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available. Use gloves to protect yourself



3. PROVIDE FIRST AID

- Ask the casualty not to speak.
- Do not give them anything to eat or drink.
- Have them remove false teeth (if any).
- Check for airway obstruction caused by the tongue or blood.
- Press the jaw upwards against the upper jaw to splint the fracture.
- Apply a head bandage to support the jaw.
- If vomiting occurs, remove and reapply the bandage.

- If conscious, ask them to lean forward to prevent choking.
- Place an unconscious casualty in the recovery position.
- Start CPR if they stop breathing.
- Preserve fallen teeth in a closed container with egg white, coconut water, or milk, or in saliva. Mark the container and transport it to the hospital with the casualty.



INJURIES TO THE SHOULDER, RIBS OR BREASTBONE

Fractures of the Shoulder

Fractures of the Collar Bone 07

03 **Rib injuries and fractures**

04 Fractures of the breastbone(sternum)

Fractures of the Shoulder

 The most frequent causes of shoulder injuries are falls onto the shoulder or an extended arm.

 Shoulder fractures are rare and can be brought on by a direct strike or crush damage

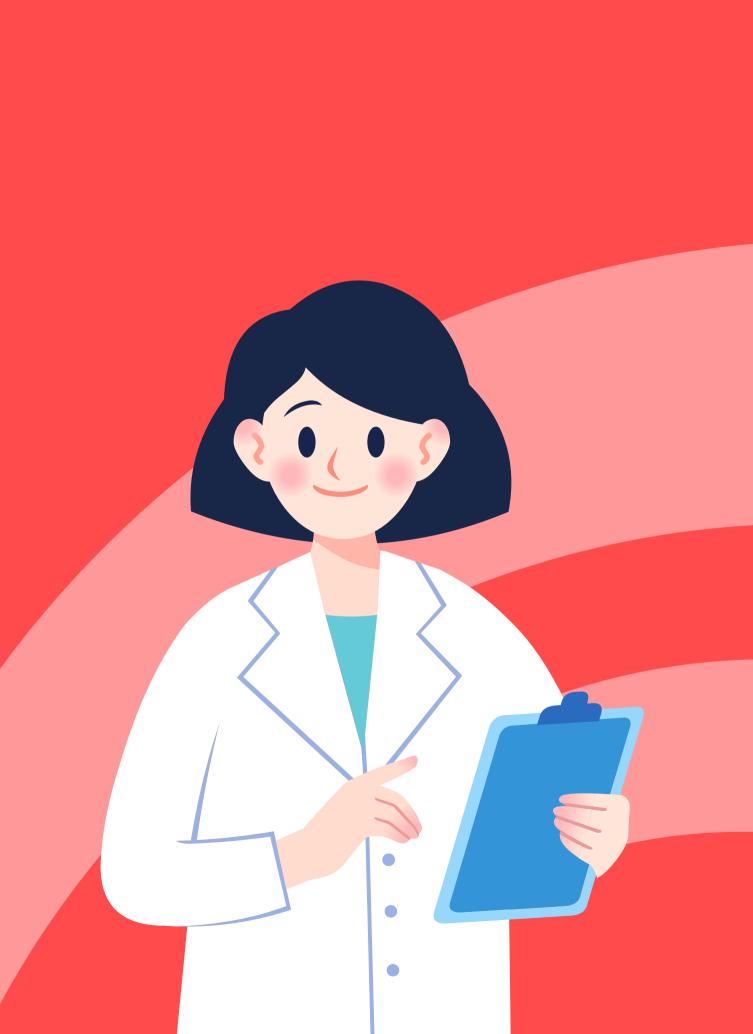
SYMPTOMS AND ENQURY



SYMPTOMS:

- The casualty is in terrible pain, which gets worse when they move.
- The victim could decide not to move the injured area because of the agony.
- The victim may lean their head to the affected side and support the injured arm in an effort to lessen their discomfort.
- It can be possible to see the shoulder blade in an unusual posture.

WHAT TO DO NOW?



• SAFETY:

1. Make sure there is no danger nearby

• HYGIENE :

- 1. Wash your hands before and after taking care of patient
- 2. Maintain hygiene by washing hands with soap and water or an alcohol based sanitizer

Providing First Aid

 Tell the person to hold their damaged arm close to their body to keep it immobilized.

 Retain any clothing that covers the wounded region.





 With the aid of a sling or other similar support, hold up the damaged side arm.

 Make plans for transportation to the closest medical facility for additional assessment and car

REFERRING

DOCTOR



 A casualty with a suspected shoulder fracture or dislocation should be transported or referred to a healthcare facility.

Fractures of the Collar Bone

 Falling on the tip of the shoulder or landing on the palm of an outstretched hand can result in collarbone (clavicle) fractures.

SYMPTOMS

ENQUIRY

AND



- The damaged arm is only partially functional and is frequently supported at the elbow with the opposite hand.
- The head of the victim may be slanted towards the wounded side, giving them a droopy appearance. There can be swelling and a visible shoulder deformity. The shattered ends of the clavicle bone may
- occasionally be felt or seen.

WHAT TO DO NOW?



• SAFETY:

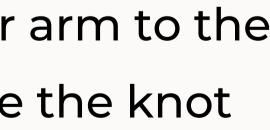
1. Make sure there is no danger nearby

- HYGIENE :
- 1. Wash your hands before and after taking care of patient
- 2. Maintain hygiene by washing hands with soap and water or an alcohol based sanitizer

Providing First Aid

- Tell the person to hold the damaged side arm close to the body to immobilise it.
- Don't take off the individual's clothes.
- For support, put a pad in the armpit on the side that is injured.
- To make a sling, wrap a bandage in a triangle.
- Using the triangular bandage, secure the upper arm to the side of the chest, leaving the forearm free. Place the knot on the side farthest from the wound.
- Make transportation arrangements to the nearest medical centre.









Referring to the doctor

- A casualty with a suspected
 - collarbone fracture should
 - be transported or referred
 - to a healthcare facility.

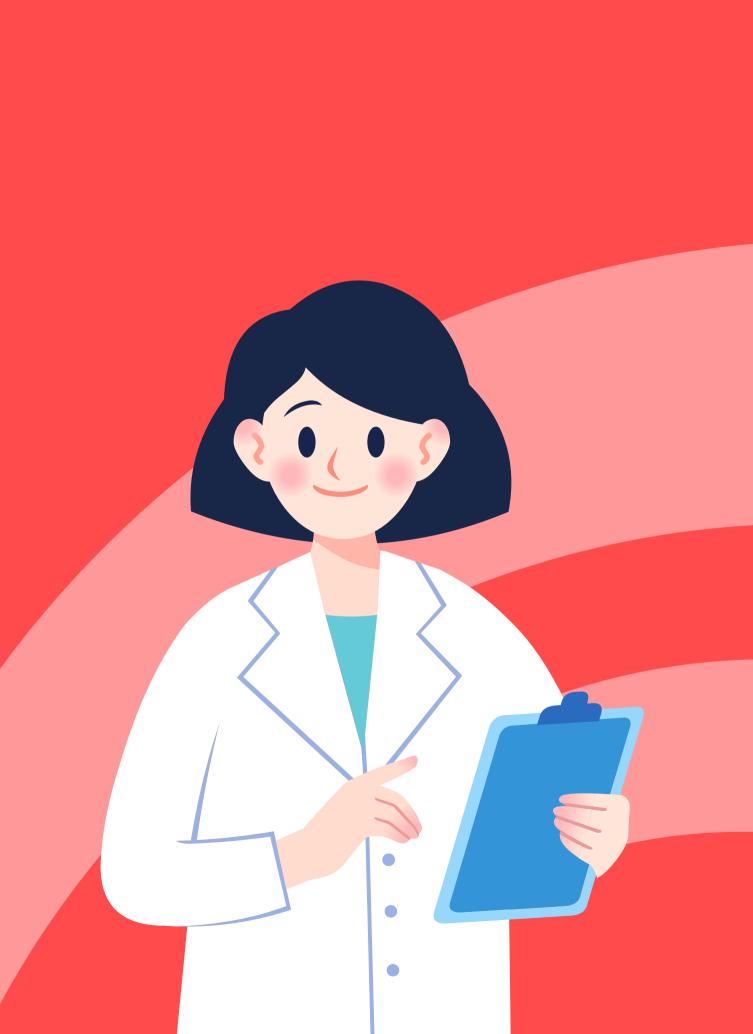
Rib Injuries And Fractures

- Direct forces, such as a blow, a fall on the chest, or a collision with an object during a car accident, can result in rib fractures and injuries.
- Lung damage can result from these fractures.
- By pushing the fracture ends outward, pressure applied to the front and rear of the chest might also indirectly result in rib fractures.
- Crush injuries could result in less severe lung damage.

SYMPTOMS AND ENOUIRY



WHAT TO DO NOW?



• SAFETY:

1. Make sure there is no danger nearby

- HYGIENE :
- 1. Wash your hands before and after taking care of patient
- 2. Maintain hygiene by washing hands with soap and water or an alcohol based sanitizer

Providing First Aid

- First, bandage any chest wounds that are still open.
- Help the casualty sit comfortably, usually in a half-sitting position, if there is no chest wound or if it has been bandaged.
- Use a sling to support the injured arm.
- Arrange for transportation to the closest medical centre.
- There is a chance that air will be drawn into the chest cavity if there is a penetrating chest wound. For more information, see the "Heart and circulation" chapter's "Chest injuries" section.

Referring to the doctor

- Always transport a casualty
 - with potential rib injury or
 - fractures to the nearest
 - healthcare facility for further
 - medical follow up.

Fractures of the Breastbone

 Crush injuries frequently result in breastbone fractures.

 Due to the risk of damage to the heart and underlying blood vessels, these fractures can be dangerous.

SYMPTOMS

ENQUIRY

AND



The casualty experiences pain in the area of the fracture.

- Breathing becomes difficult for the
 - casualty.
- Irregularity can be felt when running fingers along the breastbone.

WHAT TO DO NOW?



• SAFETY:

1. Make sure there is no danger nearby

- HYGIENE :
- 1. Wash your hands before and after taking care of patient
- 2. Maintain hygiene by washing hands with soap and water or an alcohol based sanitizer

Providing First Aid

- Loosen tight clothing.
- Support the casualty into his most comfortable position.
- Cover the casualty with the light material.
- Arrange transport to the nearest healthcare

facility.



Referring to the doctor

Always urgently transport a

casualty with a suspected breast

bone fracture to the nearest

healthcare facility.

nsport a ected breast

INJURIES TO THE ARM, ELBOW, WRIST, HAND OR FINGERS



INJURIES AND FRACTURES OF THE ARM (UPPER ARM, FOREARM, WRIST)



CAUSES OF INJURIES AND FRACTURES TO THE ARM

Fractures and injuries of the upper arm, forearm and wrist can be caused by direct impact or by falls.

WHAT TO SEE AND ENQUIRE?

You might observe the following signs and symptoms:

- The casualty complains of pain that increases with movement.
- There might be tenderness and deformity over the site of the fracture.
- There might be swelling of the affected area.
- There might be bruising observed (though this might develop slowly). • If there is an open fracture, a wound and bleeding can be observed.

WHAT TO DO WHEN YOU SUSPECT A BROKEN ARM?

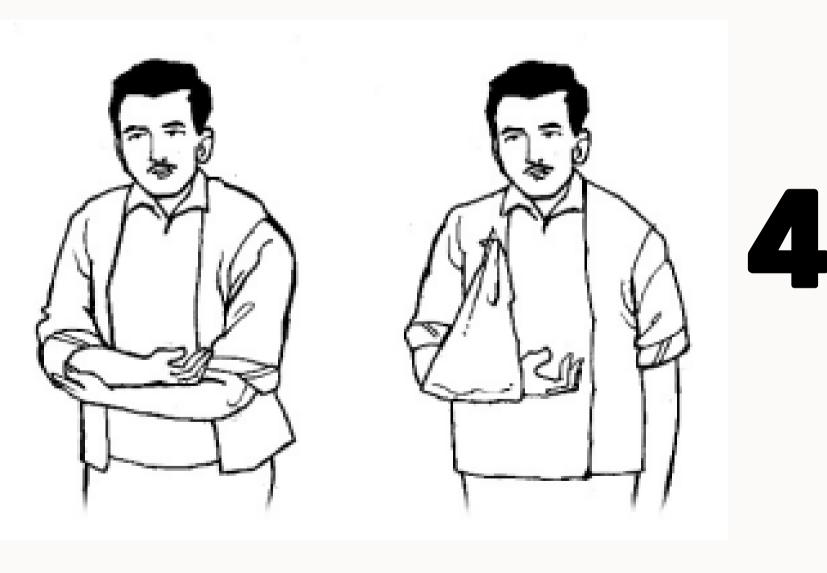


Safety first and call for help: Make sure there is no danger to you and the person.



Hygiene: If possible, wash your hands before taking care of the injured. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available. Use gloves to protect yourself. If no gloves are available, you can use a clean plastic bag.

Try not to come in contact with the person's blood.



arm to form a sling.

- Tell the person to immobilise the affected arm by holding his arm close to his body until he obtains medical care.
- If the person cannot support the arm, provide a sling with a triangular bandage or improvise by turning up the lower end of the clothing and pining it above the



In case of a suspected upper arm fracture, you might bandage the upper arm to the chest:

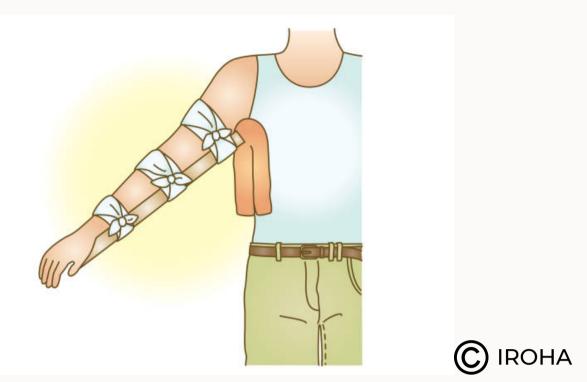
- Do not apply the bandage on the immediate site of the fracture.
- Always tie the knots (reef knot) on the opposite side of the thorax and not on the fractured forearm.
- The bandaging should be fairly firm so there is no movement of the fracture ends, but it should not be too tight in which case the circulation of blood might be stopped.
- Always check that the fingers are not too cold and the splint is not too tight. There might be further swelling of the injured area and readjustment of the bandages might be necessary.





In case of a suspected forearm fracture, you might apply a splint (only when the necessary expertise is available)

- A splint is a rigid piece of wood, plastic or metal that is applied to the fractured limb to support it and to prevent further movement of the broken bone(s).
- Reasonably wide splints are better than narrow ones.
- In emergency cases splints can be improvised: a folded newspaper, a piece of wood or a book can be used.
- The splint should be long enough to immobilise the elbow and the wrist of the fractured forearm.
- The splint should be padded with cotton or cloth to make it fit softly and snugly on the injured forearm.
- The splint is best applied over the clothing.



If the broken arm looks deformed or dislocated, do not try to reset it. This might make the injury worse and will cause pain.



Do not raise an injured arm to ensure that there is no further damage or increase in pain.



Refer the injured to the nearest healthcare facility.

Hygiene:

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available.



WHEN TO REFER TO A HEALTHCARE FACILITY?

Always transport or refer a casualty with a suspected upper or lower arm fracture to a nearby healthcare facility.

INJURIES AND FRACTURES OF THE ELBOW



CAUSES OF INJURIES AND FRACTURES TO THE ELBOW

Injuries and fractures of the elbow are usually caused by a fall on to the hand, or by the direct impact on the elbow.

WHAT TO SEE AND ENQUIRE?

You might observe the following signs and symptoms:

- The casualty complains of pain that increases with movement.
- There might be swelling of the affected area.
- There might be bruising observed (though this might develop slowly).
- There is no movement in the elbow or arm.

WHAT TO DO WHEN YOU SUSPECT AN INJURY TO THE ELBOW?



Safety first and call for help: Make sure there is no danger to you and the person.



Hygiene: If possible, wash your hands before taking care of the injured. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available. Use gloves to protect yourself. If no gloves are available, you can use a clean plastic bag.

Try not to come in contact with the person's blood.



If the elbow can be bent, provide a broad or narrow triangular bandage in figure of eight and strap the arm to the chest and support the forearm in a triangular sling.



If the elbow cannot be bent:

- Help the casualty to lie down
- Place paddings under and between the elbow and the body to immobilise the elbow.
- Strap the arm and forearm on the side of the body using three folded (narrow) triangular bandages. Knots are tied on the opposite side of the body.



Hygiene:

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available.



WHEN TO REFER TO A HEALTHCARE FACILITY?

A casualty with an expected elbow fracture should always be transported or referred to a nearby healthcare facility.

INJURIES AND FRACTURES OF THE HAND OR FINGERS



CAUSES OF INJURIES AND FRACTURES OF THE HAND OR FINGERS

- Injuries and fractures of the hand and fingers are mostly due to direct force injuries. There might be a severe bleeding in the palm.
- Hand crush injuries often result in multiple hand fractures.

WHAT TO SEE AND ENQUIRE?

You might observe the following signs and symptoms:

- The casualty complains of pain, increased by movement.
- Swelling, bruising and deformity might occur.
- If an open fracture: a wound and external bleeding appear.

WHAT TO DO?

Safety first and call for help: Make sure there is no danger to you and the person.



Hygiene: If possible, wash your hands before taking care used, if available.



of the injured. Use soap and water to wash your hands. Alcohol-based sanitizers can also be



Use gloves to protect yourself. If no gloves are available, you can use a clean plastic bag.

Try not to come in contact with the person's blood.



If there is bleeding, stop the bleeding by direct pressure.

If possible, remove any rings, bangles etc. before the hand begins to swell.





Eventually, apply a splint to broken fingers.



Arrange transport to the nearest healthcare facility.

Hygiene:

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available.



WHEN TO REFER TO A HEALTHCARE FACILITY?

A casualty with an expected hand or finger fracture(s) should always be transported or referred to a nearby healthcare facility

INJURIES TO THE PELVIS, LOWER LIMBS, KNEE, ANKLE OR FEET



INJURIES AND FRACTURES OF THE PELVIS



CAUSES OF INJURIES AND FRACTURES TO THE ARM

- Pelvis injuries and fractures are often caused by indirect impact, such as a car crash or by crushing, or by fall on hips.
- Pelvis fractures often are complicated by internal injuries to the tissues and organs located inside the pelvis.
- The internal bleeding caused by the pelvis injury might be severe!

WHAT TO SEE AND ENQUIRE?

You might observe the following signs and symptoms:

- The casualty is unable to walk or even stand, although his legs appear to be uninjured.
- The casualty complains of pain and tenderness in the region of the hip, groin or back. The pain increases with movement.
- Signs of internal bleeding and shock.
- The casualty might have difficulty in passing urine and there might be traces of blood in the urine.

WHAT TO DO?

Safety first and call for help: Make sure there is no danger to you and the person.



Hygiene: If possible, wash your hands before taking care used, if available.



of the injured. Use soap and water to wash your hands. Alcohol-based sanitizers can also be

Use gloves to protect yourself. If no gloves are available, you can use a clean plastic bag.

Try not to come in contact with the person's blood.

Help the casualty to lie down in the position most comfortable to him.

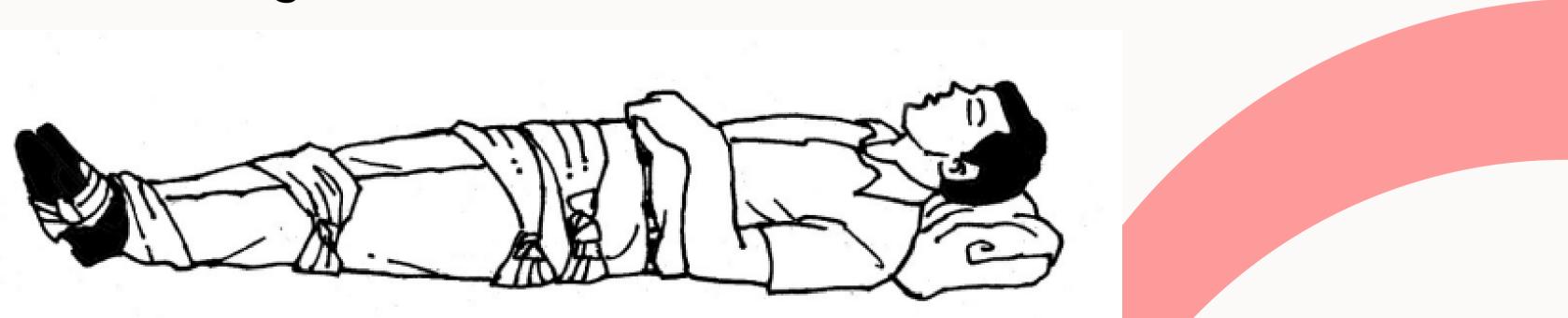


Ask the casualty to avoid passing urine.



If the travel distance is long or the road is rough:

- Place the centre of a broad bandage on the hip joint at the injured side. Pass one end around the pelvis and tie it on the other side.
- Tie another broad bandage so that it overlaps with the first by half its breadth and tie similarly. Place some padding between the thighs. This bandage should be firm, but not too tight.



Avoid pressing the broken bone parts.



Observe the casualty for signs of shock.

Keep the person warm by putting a blanket over him, but do not overheat him.

Hygiene:

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available.



WHEN TO REFER TO A HEALTHCARE FACILITY?

Always urgently transport a casualty with an expected pelvis fracture to the nearest healthcare facility.

INJURIES AND FRACTURES OF THE LEG (THIGH OR LOWER LEG) OR ANKLE



CAUSES OF INJURIES AND FRACTURES OF THE LEG

- It takes a strong force to fracture the thigh bone (femur).
- A fracture of the neck of the thigh bone occurs quite frequently in elderly, mostly as a result of a fall. Always assume a fracture and not a simple bruising in these cases. Deal it as a case of fracture of pelvis.
- Fractures of the thigh bone are a serious injury. There will be bleeding into the surrounding tissues and this might result in shock. The healing of the bone takes long time and is even more prolonged in older people.
- Fractures of the lower leg include fractures of the shin bone (tibia) and the splint bone (fibula). Shin bone fractures are mostly the result of a heavy blow. The splint bone and ankle fractures can result because of twisting of the ankle.

WHAT TO SEE AND ENQUIRE?

You might observe the following signs and symptoms:

- The casualty complains of pain at the injury site.
- There might be swelling.
- There might be bruising.
- The leg might look shortened, turned or deformed.
- The casualty can't walk.
- There might be signs of shock (i.e. in case of pelvis or femur fractures).
- In case of an open fracture: a wound and external bleeding.

WHAT TO DO WHEN YOU SUSPECT A BROKEN LEG OR BROKEN ANKLE?



Safety first and call for help: Make sure there is no danger to you and the person.



Hygiene: If possible, wash your hands before taking care of the injured. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available.



Use gloves to protect yourself. If no gloves are available, you can use a clean plastic bag.

Try not to come in contact with the person's blood.



If the broken leg looks deformed or dislocated, do not try to reset it. This might make the injury worse and will cause pain.

To transport the injured person, keep the leg still by bandaging or splinting one leg to the other nonbroken/non-dislocated one.

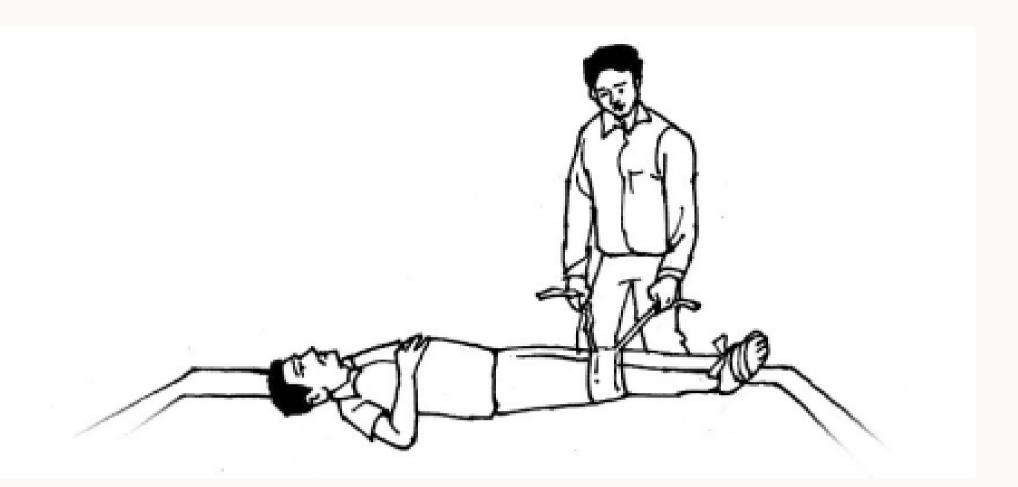


To do so:

- Carefully move the uninjured leg to the injured leg.
- Use suitable padding to fill in the hollow areas (between the legs).
- Use bandages or strips of cloth to attach both legs together.
- Do not apply the bandages on the immediate site of the fracture.
- The bandaging should be passed through the natural hollows such as knees or just above the ankles to avoid unnecessary movement of the bones.



 Always tie the knots on the uninjured leg side.



- The bandaging should be fairly firm so that there is no movement of the fracture ends, but it should not be too tight in which case the circulation of blood might be stopped.
- Always check that the toes are not too cold and the splint is not too tight.
- There might be further swelling of the injured area and readjustment of the bandages might be necessary.

Eventually you can apply a splint (only when the first aider has the necessary expertise)

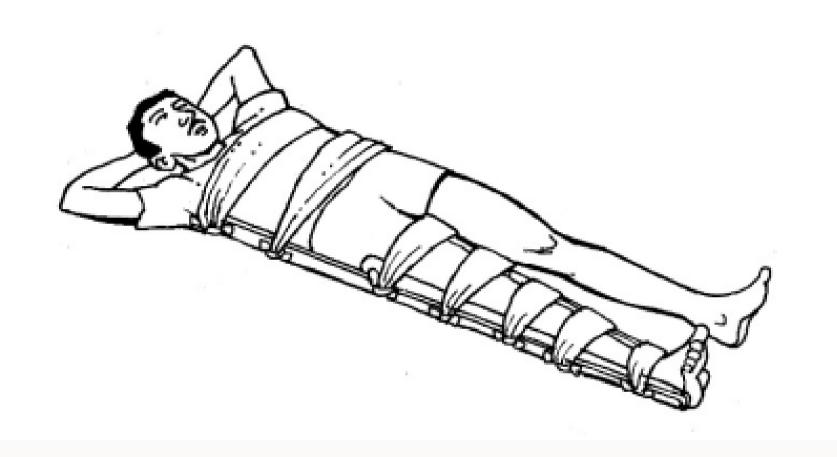


Ask the person to keep still.

Do not raise the injured leg as it may further worsen the injury and increase the pain.

Arrange transport to the nearest healthcare facility.





- A splint is a rigid piece of wood, plastic or metal that is applied to the fractured limb to support it and to prevent further movement of the broken bone(s).
- Reasonably wide splints are better than narrow ones.



- In emergency cases splints can be improvised: a walking stick, an umbrella or a piece of wood can be used.
- Splints should be long enough to immobilise the joints above and below the fractured bone.
- Splints should be padded with cotton or cloth to make them fit softly and snugly on the injured limb.
- Splints are best to be applied over the clothing.
- Splints are only obligatory to be used when both legs are broken.
- g. oth legs are brok<mark>en.</mark>

Hygiene:

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available.



WHEN TO REFER TO A HEALTHCARE FACILITY?

Always urgently transport a casualty with a suspected fracture to the thigh to the nearest healthcare facility. A fracture of the thigh is a serious injury and can result in shock.

Always transport or refer a casualty with suspected lower leg fracture(s) to a nearby healthcare facility.

FRACTURE OF THE KNEE CAP (PATELLA)



CAUSES OF FRACTURES OF THE KNEE CAP

Kneecap fractures are often the result of direct fall on the knee or blow, violent twists or strains.

WHAT TO SEE AND ENQUIRE?

You might observe the following signs and symptoms:

- The casualty complains of pain at the injury site.
- There might be swelling.
- There might be bruising.
- The casualty can't walk.
- In case of an open fracture: a wound and external bleeding.
- The knee might appear 'locked', the casualty complains of acute pain when trying to straighten the leg.
- Deformity can be felt by a simple touch.

WHAT TO DO?

Safety first and call for help: Make sure there is no danger to you and the person.



Hygiene: If possible, wash your hands before taking care used, if available.



of the injured. Use soap and water to wash your hands. Alcohol-based sanitizers can also be



Use gloves to protect yourself. If no gloves are available, you can use a clean plastic bag.

Try not to come in contact with the person's blood.

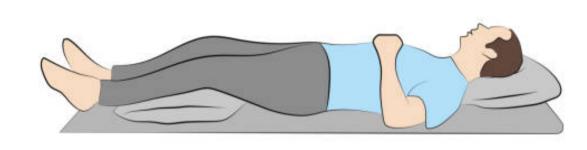


Help the person to lie down in the most comfortable position.



Do not attempt to straighten the knee forcibly. Displaced cartilage or internal bleeding might make it impossible to straighten the knee joint.

Place a soft padding, like a pillow, under the knee to support it in the most comfortable position.



Apply a padded splint (if the first aider has sufficient technical knowledge to do so) under the limb from the buttocks to the heel. The ankles should be raised from the splint by padding.

C IRINA KIT



Fix the splint:

- A broad bandage around the upper part of the thigh
- A narrow bandage in a figure-of-eight bandage around the knee. Place the center of the narrow bandage above the upper part of the fractured piece, cross it behind the knee and bring it up crossing the lower fractured bit to the back of the knee. Tie it off at a point just below the knee cap.
- A broad bandage around the lower leg.



If possible, keep the injured limb a little raised, e.g. on a blanket

Hygiene:

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available.



WHEN TO REFER TO A HEALTHCARE FACILITY?

A casualty with a suspected fracture to the knee should be transported or referred to a nearby healthcare facility.

INJURIES AND FRACTURES OF FOOT OR TOES



CAUSES OF INJURIES AND FRACTURES OF THE FOOT OR TOES

Foot injuries and fractures are often caused by direct injury as a crush injury (e.g. a wheel driving over the foot).

WHAT TO SEE AND ENQUIRE?

You might observe the following signs and symptoms:

- The casualty complains of pain at the injury site.
- There is stiffness of movement or loss of power in the foot.
- There might be swelling.
- There might be bruising.
- The casualty can't walk.

e. r in the foot

WHAT TO DO?

Safety first and call for help: Make sure there is no danger to you and the person.



Hygiene: If possible, wash your hands before taking care used, if available.



of the injured. Use soap and water to wash your hands. Alcohol-based sanitizers can also be



Use gloves to protect yourself. If no gloves are available, you can use a clean plastic bag.

Try not to come in contact with the person's blood.



Help the person to sit down in the most comfortable position.



Raise the injured foot to reduce the blood flow.



If the casualty wears shoes and no wound is visible or expected, leave the shoes on.

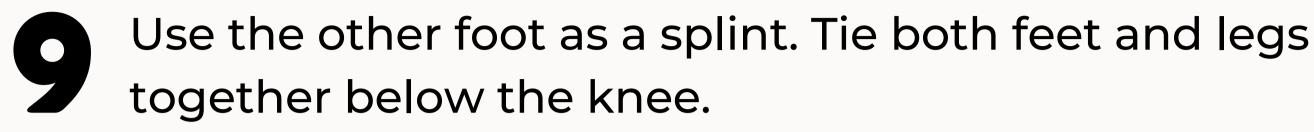
If a wound is visible or expected,

- Remove the footwear carefully and remove (or cut) the socks.
- Stop the bleeding and cover the wound.



Apply an open triangular bandage to the injured foot:

- Place the center of the open bandage over the injured foot.
- Cross the ends over the foot and carry them to the back of the ankle and tie the knot on the front side.



- Put padding between knees, ankles and feet.
- Tie both feet and legs together below the knee.

Transport the injured to the healthcare facility.

If possible, keep the injured foot raised, e.g. on 11 a rolled blanket.

Hygiene:

Always wash your hands after taking care of a person. Use soap and water to wash your hands. Alcohol-based sanitizers can also be used, if available.



WHEN TO REFER TO A HEALTHCARE FACILITY?

A casualty with a suspected fracture(s) to the foot should be transported or referred to a nearby healthcare facility.

STRAINS AND SPRAINS



INTRODUCTION

- Strains occur when a muscle is overstretched or torn, while sprains involve tearing of ligaments or surrounding joint tissues.
- Ruptured muscles or tendons can also be categorized as strains.
- Understanding the causes and signs of strains and sprains is crucial for effective first aid.



Causes of Strains and Sprains

- Strains can result from twists or sudden efforts, such as lifting heavy objects.
- Sprains often occur due to sudden wrenching or twisting of a joint, with ankle sprains being a common example

SIGNS AND SYMPTOMS



Signs and symptoms of strains:

- Pain in the affected muscle
- Swelling
- Bruising
- Loss of movement.





Signs and symptoms of sprains:

- Complaints of pain around the affected joint.
- Report of a sudden sharp pain in the muscle.
- Inability to use or put weight on the joint.
- Presence of: 1. Swelling. 2. Bruising. 3. Tenderness.



Providing First Aid

- Avoid applying crepe or compression bandages for muscle or joint injuries.
- Apply ice wrapped in a cloth or towel to the injury. Ice helps reduce pain and promote healing.
- Ensure the ice does not directly touch the skin.
- If ice is not available, use cold water to create a cold compress.
- Apply ice or cold compress for a maximum of 20 minutes.



- Do not massage the injury.
- Avoid applying heat to the injury.
- Advise the injured person to rest and refrain from continuing the activity.
- Arrange transportation to a healthcare facility for further evaluation and treatment.
- Seek medical attention for proper diagnosis and management of strains and sprains.



