

# Accidents and Their Treatment

Advice to the Fisherman and Hunter by Horace Kephart, Author of "Camping and Woodcraft."

(Courtesy of Outing Publishing Co.)

The present article is a boiled-down version of the first of a series of articles on first aid to be published in the "Outing" magazine. It is intended to be a practical guide for the fisherman and hunter, and is written in a simple, direct, and authoritative manner. The author, Horace Kephart, is a well-known expert on outdoor life and has written several popular books on the subject.

**Wounds.**—If a person is wounded, the first thing to do is to stop the bleeding. This can be done by applying direct pressure to the wound with a clean cloth or bandage. If the bleeding is from an artery, it will be bright red and will flow in a steady stream. If it is from a vein, it will be dark red and will flow in a pulsating stream. If it is from a capillary, it will be a mixture of red and white and will flow in a oozing stream.

**Cleaning Wounds.**—After the bleeding has been stopped, the wound should be cleaned. This can be done by washing the wound with clean water. If the wound is deep, it should be washed with a solution of boric acid or salicylic acid. The wound should then be dried with a clean cloth. If the wound is on the face, it should be covered with a clean, dry cloth.

**Stitching Wounds.**—If a wound is deep and will not stop bleeding, it may need to be stitched. This should be done by a doctor or a person who is trained in first aid. The wound should be cleaned and dried before it is stitched. The stitches should be made with a sterile needle and thread. The wound should be covered with a clean, dry cloth after it has been stitched.

**Dislocations.**—A dislocation is a serious injury in which the bones of a joint are displaced. It should be treated as follows: First, the person should be kept calm. Then, the joint should be immobilized. This can be done by using a splint or a cast. The joint should not be moved until it has been treated by a doctor.

**Snake Bites.**—If a person is bitten by a snake, the bite should be treated as follows: First, the person should be kept calm. Then, the bite should be washed with clean water. The wound should be covered with a clean, dry cloth. The person should be taken to a doctor as soon as possible.

**Scalds and Burns.**—If a person is scalded or burned, the affected area should be cooled immediately. This can be done by holding the area under cool running water. The area should then be covered with a clean, dry cloth. The person should be taken to a doctor as soon as possible.

**Other Injuries.**—If a person is injured in any other way, the injury should be treated as follows: First, the person should be kept calm. Then, the injury should be immobilized. The person should be taken to a doctor as soon as possible.

as hot as can be borne, to be reheated as it cools; afterwards with poultices.

**Poultices.**—Poultices may be needed not only for bruises but for felons, boils, carbuncles, etc. They are easily made from cornmeal or oatmeal. Mix by adding a little water to the meal, and stirring to a thick paste; then spread on cloth. Renew from time to time as it cools.

**Cleaning Wounds.**—To remove a splinter, slip the point of a small knife-blade under the protruding end and catch with the thumb nail. A fish-hook imbedded in the flesh should be pushed through; then nip or file off the barb and wash the wound with clean water. Cleanse the wound of any foreign substances that may have entered it.

**Closing Wounds.**—Never cover a wound with court plaster, as it prevents the free escape of suppuration. Instead, use a clean, dry cloth to cover the wound. The cloth should be changed frequently as it becomes soiled.

**Dislocations.**—A dislocation of the finger can generally be reduced by pulling strongly and at the same time pushing the tip of the finger backward. If a shoulder is thrown out of joint, have the man lie down, place a pad in his armpit, remove your shoe, and seat yourself by his side, facing him. Then, put your foot in his hands, and push with your foot, pull on his arm, and swing the arm toward his body till a snap is heard or felt.

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stones or bottles of hot water, wrapped in towels, to the extremities and over the stomach. Then give hot tea or coffee. If there is no bleeding, a tablespoonful of whiskey and water, repeated three or four times an hour.

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narrow on the back and expand to wide blotches on the flanks, the shape being somewhat like that of a dumb-bell, with very short handle. Head, a bright copper color, with two small dark brown spots close together on the forehead at upper part of head shield, and with a cream-colored band around the neck.

**Copperhead.**—The copperhead inhabits the mountainous and hilly regions from Massachusetts southward to the Gulf, and westward to the Rocky Mountains. It is found in the mountains of Colorado, Kansas, Iowa, and Nebraska to Kansas, Indian Territory, and Texas.

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identified and their physiological action determined. However, I have received such positive and respectable testimony to the efficacy of the following three plants that I would like their properties thoroughly tested:

1. Common violet (*Viola cucullata*).  
2. Cedron seed (the fluid extract).  
3. Santele (*Santele, Marylandica*).  
When a man is bitten, he should instantly twist a tourniquet very tight between the wound and the heart, to keep the poison, as far as possible, from entering the system. Then cut the wound wide open, so it may bleed freely, and suck the wound, if practicable (the poison is harmless, if swallowed, but not if it gets into the circulation). Then, after the blood has been drawn out, apply the above remedies, or through a hollow tooth. Loosen the ligature before long to admit fresh blood to the injured part, but tighten it again very soon, and repeat this alternate tightening and loosening for a considerable time. The object is to admit only a little of the poison into the general circulation.

**Only One Species.**—The other so-called "moccasin" is either the copperhead or harmless snakes.

**Rattlesnakes.**—Of rattlesnakes we have no less than sixteen species, but only two are dangerous to man. One is the timber rattlesnake, and the other is the diamond rattlesnake. The timber rattlesnake is found in the eastern and central states. The little prairie rattlesnake is abundant in the prairie states of the south. The diamond rattlesnake is found in the southern states.

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dermic are practically nothing. Extract the same amount of care as in administering medicine by the mouth and no harm can be done; and as, in the case of a rattlesnake wound, the advantages are so immeasurably ahead of any other method by the mouth, even if it were dangerous, it would be worth taking the chance.

**Precautions.**—Be sure that the tablet is thoroughly dissolved, or you may force a piece into the nostrils, or into the ear. A drop of water will dissolve any one tablet, and fifteen will suffice for any two, especially if the water be warm. Do not use more tablets than this, unless by direction.

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After using the syringe, and before removing the needle, draw up some water and inject to clear the needle. A little vaselin or gum grease on the wire will prevent the needle from rusting.

**First-Aid.**—For venomous insect and snake bites, tie a piece of small rope, a heavy handkerchief, or a bandage, loosely around the limb two and one-half inches above the wound. If the wound be on the face or the body, this is manifestly impossible. Tighten this binder by twisting a stick in it till the binder sinks into the flesh and is quite painful. This is to stop circulation as much as possible. Prepare the syringe as usual, and inject the solve one or two strychnin tablets of potassium permanganate in two teaspoonfuls of water. Fill the syringe and inject at once half the contents directly into the wound, and the other half into the vein. Inject the remainder about an inch nearer the body. Use deep injection if possible, otherwise just under the skin. The strychnin tablets must now be made in the immediate neighborhood of the wound, each of them being about half a syringe and all being carefully watched and managed. As the swelling of the limb increases, the binder may be gradually loosened, and after half an hour it should be removed entirely.

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