The importance of child safety: common situations with harmful consequences

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The importance of keeping children safe has recently consumed the minds of parents in USAFE. In the Kaiserslautern Military Community (KMC), an incident occurred where a child fell from a fourth story window in military housing. The child was in his own home when the incident occurred.

When we think of child safety, we usually are concerned about incidents occurring outside of the home, like at school, on the bus, on a busy street or in a car. But, most accidents, where children are involved, occur while the child is at home and in the care of their parents.

According to the August issue of *Pediatrics*, a series of four studies of child injuries in small children has found an increase in health hazards to children. The article discusses the importance of situational awareness

of parents for their children. No matter if your child is two months or 16 years old, parents must always consider the possible outcomes of activities in and out of the home.

The first study was conducted on shopping carts. It was determined that in the U.S. approximately 20,000 children were treated for shopping cart-related injuries in 2005. Three percent were admitted to a hospital, these were due to improper restraint. Death resulting from shopping cart injuries was also reported.

The second study concentrated on lawn mower accidents. This study determined that an average of 9,400 children, ages 20 and below, are treated annually in emergency rooms for lawn mower-related injuries. Twenty-five percent are younger than five and 78 percent are males. The most common injuries include burns, fractures and amputations. These types of injuries occur when children operate the mower, ride on a parent's lap and fall off or when parents back up over a child.

The third study dissected escalator-related injuries. The most common injury from an escalator was falling and becoming entangled. There are more than 33,000 escalators in the U.S. and there are about 2,000 child injuries each year.

The final study researched the effects of ice skating. The study found that children are more likely to suffer head and facial injuries when ice skating than when roller skating or in-line skating.

In the event that occurred in the KMC, the child was very lucky to have sustained non-life-threatening injuries. The incident could have had a very different ending. It is so important to be vigilant in the observance of surroundings, as well as to think ahead to possible accidents. Children need constant supervision by parents or guardians. Education and foresight can save the life of the little person who relies solely on you.

Preventing Falls

Beware of heights:

Don't let young children play alone on fire escapes, high porches or balconies.

Keep stairs clear:

Clutter on the stairs increases the risk of tripping and falling.

Install safety gates:

Block a toddler's access to stairs with safety gates. If you're putting a safety gate at the top of a staircase, make sure to attach it to the wall.

Keep windows locked:

Young children can squeeze through a 5 inch window opening. Screens aren't strong enough to keep children inside.

Secure area rugs:

Use foam carpet padding, double-side tape or a rubber pad under area rugs to keep them from sliding.

Avoid extension cords:

It's easy to trip on extension cords

Use tub mats:

Rubber pads in bathtubs help prevent slipping.

Fasten safety belts:

Always strap children into high chairs, strollers and shopping carts.

Courtesy of the Mayo Clinic website

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The unintentional injury-related death rate among children ages 14 and under declined more than 40 percent from 1987 to 2001. However, unintentional injury remains the leading cause of death among children of those ages in the United States. In 2001, 5,526 children ages 14 and under died from unintentional injuries. In addition, each year more than 92,000 children are permanently disabled and one out of every four children (totaling more than 14 million) sustains an injury serious

enough to require medical attention.

In general, children are primarily at risk of unintentional injury-related death from: motor vehicle injuries, which include children as occupants, pedestrians and bicyclists; drowning; fire and burns; airway obstruction injury (including suffocation and choking); unintentional firearm injuries; falls; and poisoning. Injury rates vary with a child's age, gender, race and socioeconomic status. Younger children, males and poor children suffer disproportionately. Additionally, the causes and consequences of injuries vary considerably by age and developmental level, reflecting differences in children's cognitive, perceptual, motor and language abilities as well as environment and exposure to hazards.

It's scary to think of your child experiencing a serious injury or illness. The best way to handle an emergency is to be prepared for one. Knowing what to do ahead of time can help you stay calm enough to help. It is important to learn and recognize when immediate medical care is necessary and when you can manage the situation at home. Many minor injuries or illnesses can be handled at home. Contact your local health care provider to help you care for cold symptoms, minor cuts and scrapes, vomiting and/or diarrhea, rashes, broken fingers/ toes, earaches, sore throats, fever lower than 103° in children over the age of three months or other minor injuries.

There are times when a trip to the emergency department is needed. When to take your child to the emergency room and when to activate your local emergency system can be a tough decision to make. What action you take depends on the nature of the problem and availability of medical care. Remember, these are general guidelines. If there is any doubt, do not hesitate to call for help. Activate your local emergency response system for LIFE-THREATENING EMERGENCIES such as:

- Breathing difficulty/shortness of breath/ breathing has stopped
 - Choking (can't talk or breathe)
 - Uncontrollable bleeding
 - Drowning
- Electrocution with loss of consciousness, breathing or pulse
 - Drug overdose/poisoning
 - Gunshot wounds, stabbings
 - Vomiting blood
 - Sudden fainting/unconsciousness
- Convulsions/seizures (uncontrolled jerking movements, the patient may fall to the floor)
- Severe allergic reaction (difficulty breathing/unresponsive)
- Major burns (white or charred skin: blisters and redness over large area)
- Someone who will not wake up, even when you shake them
 - ❖ SEVERE injuries from:

- · Traffic accidents
- · Head Injury
- · Significant falls

There are times when your child may need to be seen in an emergency room (rather than waiting for an appointment with your doctor), but does not require transport in an ambulance. These could include:

- Increasing effort or trouble breathing, shortness of breath, or wheezing
 - * Blue or purple color to lips, skin, or nail beds
- Any loss of consciousness, confusion, headache or vomiting after a head injury
 - Sudden dizziness, weakness, or change in vision
 - Seizures
 - Animal, snake, or human bites
- Severe bleeding or bleeding that does not stop with direct pressure for 5 minutes
- Severe burns or burns on the face, hands, feet, groin or chest

Informative Websites:

http://kidshealth.org/parent/firstaid_safe/ http://www.nlm.nih.gov/medlineplus//childsafety.html http://www.usa.safekids.org/tier3_cd.cfm?folder_ id=540&content_item_id=1031 http://www.mayoclipic.com/health/child.safety/FI_000

 $http://www.mayoclinic.com/health/child-safety/FL00003\\ http://www.cdc.gov/$

- Broken bones
- Puncture wounds/cuts that are large or deep
- Injury to the eyes
- Signs of an allergic reaction such as hives, swelling of the face, lips, eyes, or tongue, fainting, trouble breathing, difficulty swallowing, or wheezing
- ❖ Fever greater than 100.4° in infant less than 3 months of age or any fever greater than 105°.

Remember, for non-emergency conditions first call your child's medical provider. If you believe that an injury or illness is threatening your child's health or may cause permanent harm, call for an ambulance. If your child is seriously ill or injured, it is often safer for your child to be transported to the emergency department by ambulance.

Plan for an emergency before it happens. Know how to activate the emergency response system in your local area. Know where the nearest hospital/emergency room is and know the way to get there. Make sure anyone caring for your children knows your address, phone number and how to get help in an emergency. When traveling, take basic first aid supplies. Take a course in first aid and learn CPR. Being prepared and knowing how to react ahead of time could prevent a situation from becoming an emergency.

Information obtained from:

The Centers for Disease Control and Prevention website

The American Academy of Pediatrics website

Robert H. Pantell, James F. Fries and Donald M. Vickery, Taking Care of Your Child 5th Edition New York: Perseus Books Group, 1999