4-H Rodeo Safety

Cassidy T. Cordova
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The Rodeo Video is listed on YouTube at:
http://www.youtube.com/watch?v=UYj0PGk8Bes&feature=youtube_gdata
- Rodeo Waiver
Rodeo Requirements

1. Enroll in 4-H
2. Enroll in the 4-H Rodeo Project
3. Complete 4-H Rodeo Waiver Form
4. Complete 1st Aid Training annually
5. Enroll in the 4-H Rodeo Insurance program
6. Obtain Permanent Hauling Papers if you haul a horse
7. Coggings Papers

All County deadlines are different, make sure you don’t miss yours!

To obtain all the up-to-date 4-H rodeo information visit:

http://aces.nmsu.edu/4h/4-h-rodeo.html

Sanctioned Rodeo Dates
Rule Book
Scholarship Form
Standings
Resources
Basic First Aid Training

- Paul Vigil, RN, BSN

Mechanism of Injury (MOI)

- The circumstance in which an injury occurs
  - What happened?
  - How did it happen?
  - Do you remember?

- What do you do if you witness an accident?
  - Make sure the scene is safe before you proceed
  - DO NOT MOVE THE PERSON until help arrives.
  - Call 911 – give as much information as possible.
First Aid Kits

Always keep a First Aid Kit in your vehicle and trailer that includes (minimum):

- Disposable gloves
- Band Aids
- Medical tape
- Scissors
- Roll of gauze

ABC’s of First Aid

A – is the air way open, can the person breath?

B – Breathing Restored – CPR.

C – Circulation – is the person bleeding if yes apply direct pressure

Bleeding

Cover wound with a clean cloth and press firmly until bleeding stops or medical help arrives

Shock

Warning signs: pale, clammy skin, weakness, fast breathing, rapid weak pulse, confusion. Vomiting may occur.

Cuts & Bruises

Stop the bleeding by direct pressure. Clean with soap/water. Cover with clean bandage. Apply cold packs to bruises
Fainting
Lay victim on back, elevate feet or bend over with head at knee level. If unresponsive, call 911.

Fractures
Do not move if unconscious or back/neck injuries are suspected. Treat breathing/bleeding/shock first. DO NOT MOVE UNTIL HELP ARRIVES
Do not try and “set” the bone, you may sever an artery, cut tissue or snap the spinal cord.
Compound fractures may need bleeding controlled.
Do not move the person until medical help arrives

Nosebleed
Keep head forward. Squeeze nose closed. If bleeding does not stop, apply cold compress and reapply pressure.

Burns - 1st response stop the burning
First Degree Burns
Redness and discoloration
Apply cool, wet cloths or immerse in cool water, do not apply ice.
Second Degree Burns
Blisters, clear fluid, pain
Apply cool, wet cloths. Watch for shock and get medical attention.
Third Degree Burns

Deep tissue destruction with a white or charred appearance, no pain

Do not touch or cover burned areas, keep the person sitting up if possible and keep the airway open, do not try and remove clothing, get medical attention immediately.

CPR Basics

- American Heart Association/Mayo Clinic

Cardiopulmonary resuscitation (CPR) is a lifesaving technique useful in many emergencies, including heart attack or near drowning, in which someone's breathing or heartbeat has stopped. The American Heart Association recommends that everyone — untrained bystanders and medical personnel alike — begin CPR with chest compressions.

It's far better to do something than to do nothing at all if you're fearful that your knowledge or abilities aren't 100 percent complete. Remember, the difference between your doing something and doing nothing could be someone's life.

Here's advice from the American Heart Association:

• **Untrained.** If you're not trained in CPR, then provide hands-only CPR. That means uninterrupted chest compressions of about 100 a minute until paramedics arrive (described in more detail below). You don't need to try rescue breathing.

• **Trained, and ready to go.** If you're well trained and confident in your ability, begin with chest compressions instead of first checking the airway and doing rescue breathing. Start CPR with 30 chest compressions before checking the airway and giving rescue breaths.

• **Trained, but rusty.** If you've previously received CPR training but you're not confident in your abilities, then just do chest compressions at a rate of about 100 a minute. (Details described below.)

The above advice applies to adults, children and infants needing CPR, but not newborns.
CPR can keep oxygenated blood flowing to the brain and other vital organs until more definitive medical treatment can restore a normal heart rhythm.

When the heart stops, the lack of oxygenated blood can cause brain damage in only a few minutes. A person may die within eight to 10 minutes.

To learn CPR properly, take an accredited first-aid training course, including CPR and how to use an automatic external defibrillator (AED).

Before you begin
Before starting CPR, check:

- Is the person conscious or unconscious?
- If the person appears unconscious, tap or shake his or her shoulder and ask loudly, “Are you OK?”
- If the person doesn't respond and two people are available, one should call 911 or the local emergency number and one should begin CPR. If you are alone and have immediate access to a telephone, call 911 before beginning CPR — unless you think the person has become unresponsive because of suffocation (such as from drowning). In this special case, begin CPR for one minute and then call 911 or the local emergency number.
- If an AED is immediately available, deliver one shock if instructed by the device, then begin CPR.

Remember to spell C-A-B
The American Heart Association uses the acronym of C-A-B—circulation, airway, breathing—to help people remember the order to perform the steps of CPR.

Circulation: Restore blood circulation with chest compressions

1. Put the person on his or her back on a firm surface.
2. Kneel next to the person's neck and shoulders.
3. Place the heel of one hand over the center of the person's chest, between the nipples. Place your other hand on top of the first hand. Keep your elbows straight and position your shoulders directly above your hands.

4. Use your upper body weight (not just your arms) as you push straight down on (compress) the chest at least 2 inches (approximately 5 centimeters). Push hard at a rate of about 100 compressions a minute.

5. If you haven't been trained in CPR, continue chest compressions until there are signs of movement or until emergency medical personnel take over. If you have been trained in CPR, go on to checking the airway and rescue breathing.

Airway: Clear the airway

1. If you're trained in CPR and you've performed 30 chest compressions, open the person's airway using the head-tilt, chin-lift maneuver. Put your palm on the person's forehead and gently tilt the head back. Then with the other hand, gently lift the chin forward to open the airway.

2. Check for normal breathing, taking no more than five or 10 seconds. Look for chest motion, listen for normal breath sounds, and feel for the person's breath on your cheek and ear. Gasping is not considered to be normal breathing. If the person isn't breathing normally and you are trained in CPR, begin mouth-to-mouth breathing. If you believe the person is unconscious from a heart attack and you haven't been trained in emergency procedures, skip mouth-to-mouth rescue breathing and continue chest compressions.

Breathing: Breathe for the person

Rescue breathing can be mouth-to-mouth breathing or mouth-to-nose breathing if the mouth is seriously injured or can't be opened.

1. With the airway open (using the head-tilt, chin-lift maneuver), pinch the nostrils shut for mouth-to-mouth breathing and cover the person's mouth with yours, making a seal.
2. Prepare to give two rescue breaths. Give the first rescue breath — lasting one second — and watch to see if the chest rises. If it does rise, give the second breath. If the chest doesn’t rise, repeat the head-tilt, chin-lift maneuver and then give the second breath. Thirty chest compressions followed by two rescue breaths is considered one cycle.

3. Resume chest compressions to restore circulation.

4. If the person has not begun moving after five cycles (about two minutes) and an automatic external defibrillator (AED) is available, apply it and follow the prompts. Administer one shock, then resume CPR — starting with chest compressions — for two more minutes before administering a second shock. If you’re not trained to use an AED, a 911 or other emergency medical operator may be able to guide you in its use. Use pediatric pads, if available, for children ages 1 through 8. Do not use an AED for babies younger than age 1. If an AED isn’t available, go to step 5 below.

5. Continue CPR until there are signs of movement or emergency medical personnel take over.

To perform CPR on a child

The procedure for giving CPR to a child age 1 through 8 is essentially the same as that for an adult. The differences are as follows:

- If you’re alone, perform five cycles of compressions and breaths on the child — this should take about two minutes — before calling 911 or your local emergency number or using an AED.
- Use only one hand to perform heart compressions.
- Breathe more gently.
- Use the same compression-breath rate as is used for adults: 30 compressions followed by two breaths. This is one cycle. Following the two breaths, immediately begin the next cycle of compressions and breaths.
- After five cycles (about two minutes) of CPR, if there is no response and an AED is available, apply it and follow the prompts. Use pediatric pads if available. If pediatric pads aren’t available, use adult pads.

Continue until the child moves or help arrives.
To perform CPR on a baby

Most cardiac arrests in babies occur from lack of oxygen, such as from drowning or choking. If you know the baby has an airway obstruction, perform first aid for choking. If you don't know why the baby isn't breathing, perform CPR.

To begin, examine the situation. Stroke the baby and watch for a response, such as movement, but don't shake the baby.

If there's no response, follow the CAB procedures below and time the call for help as follows:

- If you're the only rescuer and CPR is needed, do CPR for two minutes — about five cycles — before calling 911 or your local emergency number.
- If another person is available, have that person call for help immediately while you attend to the baby.

Circulation: Restore blood circulation

1. Place the baby on his or her back on a firm, flat surface, such as a table. The floor or ground also will do.
2. Imagine a horizontal line drawn between the baby's nipples. Place two fingers of one hand just below this line, in the center of the chest.
3. Gently compress the chest about 1.5 inches (about 4 cm).
4. Count aloud as you pump in a fairly rapid rhythm. You should pump at a rate of 100 compressions a minute.

Airway: Clear the airway

1. After 30 compressions, gently tip the head back by lifting the chin with one hand and pushing down on the forehead with the other hand.
2. In no more than 10 seconds, put your ear near the baby's mouth and check for breathing: Look for chest motion, listen for breath sounds, and feel for breath on your cheek and ear.
**Breathing: Breathe for the infant**

1. Cover the baby's mouth and nose with your mouth.

2. Prepare to give two rescue breaths. Use the strength of your cheeks to deliver gentle puffs of air (instead of deep breaths from your lungs) to slowly breathe into the baby's mouth one time, taking one second for the breath. Watch to see if the baby's chest rises. If it does, give a second rescue breath. If the chest does not rise, repeat the head-tilt, chin-lift maneuver and then give the second breath.

3. If the baby's chest still doesn't rise, examine the mouth to make sure no foreign material is inside. If the object is seen, sweep it out with your finger. If the airway seems blocked, perform first aid for a choking baby.

4. Give two breaths after every 30 chest compressions.

5. Perform CPR for about two minutes before calling for help unless someone else can make the call while you attend to the baby.

6. Continue CPR until you see signs of life or until medical personnel arrive.

**References**


Rodeo Safety Workbook

Please select the correct answer for the following questions, some may require explanation. You must have watched the 4-H Rodeo video on YouTube and read the above information to complete the below workbook. When you complete the workbook please submit to your Extension office with your rodeo waiver to receive your Rodeo ID number.

1. Name two requirements for 4-H rodeo:
   a. 
   b. 

2. What does MOI stand for?

3. Five things you should always keep in your First Aid kit are:
   a. 
   b. 
   c. 
   d. 
   e. 

4. What are the ABC’s of First Aid?

5. If you suspect someone has a fracture what should you do?

6. What are the three types of burns?
   a. 
   b. 
   c. 

7. If you are UN-trained in CPR what is the only kind of CPR you should provide?

8. What is the C-A-B of CPR?
9. Rescue breathing can be mouth-to-mouth breathing or mouth-to-nose breathing if the mouth is seriously injured or can’t be opened

TRUE or FALSE

10. CPR keeps oxygenated blood flowing to the brain and other vital organs until more definitive medical treatment can restore a normal heart rhythm

TRUE or FALSE

11. The SMALLER the diameter of the metal on a bit makes it less aggressive?

TRUE or FALSE

12. What is one way you can make sure your Chicago screws don’t come lose?

13. When you adjust the front cinch where do you want your center ring?

14. What is the Blevins buckle?

15. Why is it important to stretch?

16. Should you stretch every day?

17. Is there stretches for every event?
18. Name three bucking chute safety procedures:

   a. 
   b. 
   c. 

19. What are the different types of Rough stock events?

20. Is proper safety equipment recommended? Do you feel this is important, why or why not?
4-H Rodeo Eligibility Certificate and Waiver of Liabilities

We, the undersigned parents and/or legal guardians of ____________________________, a minor, do hereby release the New Mexico State and County 4-H Organization, and sponsoring group, organizations and individuals, and the owners or operators of any property where the activity may take place, from any and all responsibilities and liabilities for any and all injuries or disablements of any kind or nature, whatsoever, suffered or inflicted, by or through, our son’s or daughter’s participation in the 4-H Rodeo project.

This release is complete and full and is not conditioned upon any act, word, or deed by either the undersigned, or sponsoring bodies and individuals of said 4-H rodeo project.

Parent or Guardian (Print) ___________________________ Parent or Guardian (Print) ___________________________

Signature __________________________________________ Signature __________________________________________

Name of Insurance Company ______________________________ Policy Number ______________________________

4-H’ers Name (Please Print) ___________________________ Male ______ Female ______

4-H’ers Complete Mailing Address

_________________________ / ___________________________ / ___________________________ / ___________________________ /

Street or PO Box City/Town State Zip

Birthday ___________________________ / ___________________________ / ___________________________ / ___________________________ /

Age Division (Please check one): [ ] Novice (Age 9-11) [ ] Junior (Age 12-14) [ ] Senior (Age 15-19)

4-H’ers Telephone Number (____________________) ______________________-

E-mail Address for correspondence and contact purposes from 4-H Rodeo Secretary.

________________________________________

We hereby certify that the above named youth is a 4-H member in good standing in a 4-H club in the State of New Mexico. We also certify that this 4-H member is currently enrolled in the 4-H rodeo project.

________________________________________

4-H Leader

________________________________________

4-H Extension Agent

New Mexico State University is an equal opportunity/affirmative action employer and educator. NMSU and the U.S. Department of Agriculture cooperating.

Original to: State 4-H Office Copy to: County Extension Office Copy to: Member or Leader