



**2018**  
**SAFETY ORIENTATION**  
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Ito



## Sports Dehydration Safety Tips

Everything you need to know to keep your kids safe from dehydration when playing sports.

To keep kids in top shape for sports, it's important for them to stay hydrated by drinking plenty of fluids. Dehydration occurs when a body loses more water than it takes in (such as through sweating). When kids don't drink enough water while playing sports, they could be at risk for dehydration, heat exhaustion or even heatstroke.

### Bring a Water Bottle and Take Regular Breaks

- Make sure athletes have a water bottle for every practice and game.
- Make sure athletes drink fluids (water is the best option) 30 minutes before the activity begins and every 15-20 minutes during activity. Drinking water after play is equally important.
- Establish mandatory water breaks throughout practices and games — don't wait for a child to tell you he or she is thirsty. Encourage children to stay well hydrated by drinking plenty of water before, during and after play.



*While at play, children generate more heat than adults, but also sweat less, which makes them more susceptible to dehydration. It is estimated that more than 9,000 high school athletes are treated for heat illness each year in the United States.*



### Drink Enough Water

- Encourage athletes to drink the right amount of water. The American Academy of Pediatrics (AAP) recommends:
  - 5 oz. for an 88-pound child every 20 minutes
  - 9 oz. for a 132-pound adolescent every 20 minutes
- Kids will know if they're drinking enough water if their urine is clear or the color of lemonade.



### Know the Signs and Symptoms of Dehydration

- The severity of dehydration can vary from mild to more life threatening if left unchecked. There are three levels of dehydration: heat cramps, heat exhaustion and heatstroke.
- Symptoms range from muscle cramping in the calves, back, arms or abdomen (heat cramps) to faintness or dizziness, nausea and rapid heartbeat (heat exhaustion) to collapse, emotional instability and very high body temperature (heatstroke).

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## Respond Appropriately to Signs of Heat Illness

- If an athlete is dehydrated or suffering from heat exhaustion, call 911 if his or her condition doesn't improve or worsens.



- Move the athlete to shade and cool the body with cold water. Have the athlete drink cool water, remove any equipment and excess clothing and lie down, raising his or her legs about 8-12 inches.
- Make sure the athlete gets checked out by a doctor or medical personnel and is cleared before returning to play.

- If you suspect heatstroke, call 911 immediately and make every effort to cool the athlete.
- Treat heatstroke victims right away by immersing them in cold water before the ambulance arrives. If immersion is not an option, soak the child with cold water from a shower, hose or soaking towel.



For more resources on how to keep your athletes healthy and injury free, go to [www.safekids.org/sports](http://www.safekids.org/sports).



## Fever

Fever in children is usually caused by infection. It also can be caused by chemicals, poisons, medicines, an environment that is too hot, or an extreme level of overactivity. Take the child's temperature to see if he has a fever. Most pediatricians consider any thermometer reading above 100.4°F (38°C) as a fever. However, the way the child looks and acts is more important than how high the child's temperature is.

- Call the pediatrician right away if the child has a fever and:
  - Appears very ill, is unusually drowsy, or is very fussy
  - Has other symptoms such as a stiff neck, a severe headache, severe sore throat, severe ear pain, an unexplained rash, repeated vomiting or diarrhea, or difficulty breathing
  - Has a condition causing immune suppression (such as sickle cell disease, cancer, or chronic steroid use)
  - Has had a first seizure but is no longer seizing
  - Is younger than 2 months and has a temperature of 100.4°F (38°C) or higher
  - Has been in a very hot place, such as an overheated car

To make the child more comfortable, dress him in light clothing, give him cool liquids to drink, and keep him calm. The pediatrician may recommend fever medicines. Do NOT use aspirin to treat a child's fever. Aspirin has been linked with Reye syndrome, a serious disease that affects the liver and brain.

## Skin Wounds

Make sure the child is up to date for tetanus vaccination. Any open wound may need a tetanus booster even when the child is currently immunized. If the child has an open wound, ask the pediatrician if the child needs a tetanus booster.

## Bruises

Apply cool compresses. Call the pediatrician if the child has a crush injury, large bruises, continued pain, or swelling. The pediatrician may recommend acetaminophen for pain.

## Cuts

Rinse small cuts with water until clean. Use direct pressure with a clean cloth to stop bleeding and hold in place for 1 to 2 minutes. If the cut is not deep, apply an antibiotic ointment, then cover the cut with a clean bandage. Call the pediatrician or seek emergency care for large or deep cuts, or if the wound is wide open. For major bleeding, call for help (911 or an emergency number). Continue direct pressure with a clean cloth until help arrives.

## Scrapes

Rinse with clean, running tap water for at least 5 minutes to remove dirt and germs. Do not use detergents, alcohol, or peroxide. Apply an antibiotic ointment and a bandage that will not stick to the wound.

## Splinters

Remove small splinters with tweezers, then wash until clean. If you cannot remove the splinter completely, call the pediatrician.

## Puncture Wounds

Do not remove large objects (such as a knife or stick) from a wound. Call for help (911 or an emergency number). Such objects must be removed by a doctor. Call the pediatrician for all puncture wounds. The child may need a tetanus booster.

## Bleeding

Apply pressure with gauze over the bleeding area for 1 to 2 minutes. If still bleeding, add more gauze and apply pressure for another 5 minutes. You can also wrap an elastic bandage firmly over gauze and apply pressure. If bleeding continues, call for help (911 or an emergency number).

## Eye Injuries

If anything is splashed in the eye, flush gently with water for at least 15 minutes. Call Poison Help (1-800-222-1222) or the pediatrician for further advice. Any injured or painful eye should be seen by a doctor. Do NOT touch or rub an injured eye. Do

NOT apply medicine. Do NOT remove objects stuck in the eye. Cover the painful or injured eye with a paper cup or eye shield until you can get medical help.

## Fractures and Sprains

If an injured area is painful, swollen, or deformed, or if motion causes pain, wrap it in a towel or soft cloth and make a splint with cardboard or other firm material to hold the arm or leg in place. Do not try to straighten. Apply ice or a cool compress wrapped in thin cloth for not more than 20 minutes. Call the pediatrician or seek emergency care.

If there is a break in the skin near the fracture or if you can see the bone, cover the area with a clean bandage, make a splint as described above, and seek emergency care. If the foot or hand below the injured part is cold or discolored (blue or pale), seek emergency care right away.

## Burns and Scalds

### General Treatment

First, stop the burning process by removing the child from contact with hot water or a hot object (for example, hot iron). If clothing is burning, smother flames. Remove clothing unless it is firmly stuck to the skin. Run cool water over burned skin until the pain stops. Do not apply ice, butter, grease, medicine, or ointment.

### Burns With Blisters

Do not break the blisters. Ask the pediatrician how to cover the burn. For burns on the face, hands, feet, or genitals, seek emergency care.

### Large or Deep Burns

Call 911 or an emergency number. After stopping and cooling the burn, keep the child warm with a clean sheet covered with a blanket until help arrives.

### Electrical Burns

Disconnect electrical power. If the child is still in contact with an electrical source, do NOT touch the child with bare hands. Pull the child away from the power source with an object that does not conduct electricity (such as a wooden broom handle), only after the power is turned off. ALL electrical burns need to be seen by a doctor.

## Nosebleeds

Keep the child in a sitting position with the head tilted slightly forward. Apply firm, steady pressure to both nostrils by squeezing them between your thumb and index finger for 5 minutes. If bleeding continues or is very heavy, call the pediatrician or seek emergency care.

## Teeth

### Baby Teeth

If knocked out or broken, apply clean gauze to control bleeding and call the pediatric or family dentist.

### Permanent Teeth

If knocked out, handle the tooth by the top and not the root (the part that would be in the gum). If dirty, rinse gently without scrubbing or touching the root. Do not use any cleansers. Use cold running water or milk. Place the tooth in clean water or milk and transport the tooth with the child when seeking emergency care. Call and go directly to the pediatric or family dentist or an emergency department. If the tooth is broken, save the pieces in milk and call the pediatric or family dentist right away. Stop bleeding using gauze or a cotton ball in the tooth socket and have the child bite down.

## Convulsions, Seizures

If the child is breathing, lay her on her side to prevent choking. Call 911 or an emergency number for a prolonged seizure (more than 5 minutes).

Make sure the child is safe from objects that could injure her. Be sure to protect her head. Do not put anything in the child's mouth. Loosen any tight clothing. Start rescue breathing if the child is blue or not breathing.

## Head Injuries

DO NOT MOVE A CHILD WHO MAY HAVE A SERIOUS HEAD, NECK, OR BACK INJURY. This may cause further harm. Call 911 or an emergency number right away if the child:

- Loses consciousness
- Has a seizure (convulsion)
- Experiences clumsiness or inability to move any body part
- Has oozing of blood or watery fluid from ears or nose
- Has abnormal speech or behavior

Call the pediatrician for a child with a head injury and any of the following:

- Drowsiness
- Difficulty being awakened
- Persistent headache or vomiting

For any questions about less serious injuries, call the pediatrician.

## Poisons

If the child has been exposed to or ingested a poison, call Poison Help at 1-800-222-1222. A poison expert is available 24 hours a day, 7 days a week.

### Swallowed Poisons

Any nonfood substance is a potential poison. Do not give anything by mouth or induce vomiting. Call Poison Help right away. Do not delay calling, but try to have the substance label or name available when you call.

### Fumes, Gases, or Smoke

Get the child into fresh air and call 911, the fire department, or an emergency number. If the child is not breathing, start CPR and continue until help arrives. (Please see other side.)

### Skin Exposure

If acids, lye, pesticides, chemicals, poisonous plants, or any potentially poisonous substance comes in contact with a child's skin, eyes, or hair, brush off any residual material while wearing rubber gloves, if possible. Remove contaminated clothing. Wash skin, eyes, or hair with large amount of water or mild soap and water. Do not scrub. Call Poison Help for further advice.

If a child is unconscious, becoming drowsy, having convulsions, or having trouble breathing, call 911 or an emergency number. Bring the poisonous substance (safely contained) with you to the hospital.

## Fainting

Check the child's airway and breathing. If necessary, call 911 and begin rescue breathing and CPR. If vomiting has occurred, turn the child onto one side to prevent choking. Elevate the feet above the level of the heart (about 12 inches).

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**Source** First Aid (Copyright © 2011 American Academy of Pediatrics)

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