PROVIDING FIRST AID IN INJURIES AND FRACTURES

N.R. Ochilova

Associate Professor at the Department of Clinical and Pre-clinical Disciplines, Bukhara Innovation University of Education and Medicine

Annotasiya: Ushbu maqolada shikastlanishlarda va sinishlarda birinchi tibbiy yordam ko'rsatishning bir qancha turlari bo'yicha ma'lumotlar berilgan va ushbu holatlar to`liq ravishda boyitilgan. Bosh, ko'krak, oyoq va boshning sochli qismi jarohatlanganda maxsus bogʻlam qo`yish va shikastlanganda yan bir nechta birinchi tibbiy yordam qilish va bu yordam natijasida bemor holatini yaxshilash haqida fikr mulohazalar yuritiladi.

Kalit so`zlar: Sinish, sinish holatni aniqlash, bog`lam, birinchi tibbiy yordam koʻrsatish, ko`krak sohalariga bog`lam qo`yish, yengil va issiq bosh kiyimi.

Аннотация: В данной статье представлена информация о нескольких видах первой помощи при травмах и переломах, причем эти случаи полностью обогащены. При ранениях головы, груди, шеи, волосистой части головы накладывают специальные повязки, при ранении оказывают ряд мер первой помощи, в результате этой помощи состояние больного улучшается.

Ключевые слова: Перелом, определение переломного состояния, повязка, первая помощь, нагрудная повязка, легкий и теплый головной убор.

Annotation: This article provides information about different types of first aid for injuries and fractures, with these situations being thoroughly explained. It covers the application of special bandages when the head, chest, limbs, or scalp are injured, as well as performing several first aid procedures to improve the patient's condition. Additionally, the article discusses how these first aid measures can enhance the patient's condition.

Keywords: Fracture, fracture diagnosis, bandage, first aid, applying bandages to the chest area, light and warm headgear.

Wound refers to the mechanical damage or disruption of the skin or mucous membranes caused by external forces. In such cases, internal tissues may also be damaged or ruptured. If the object causing the injury enters the body, a wound channel is formed between the tissues. Depending on the nature of the wound, the following types can be distinguished:

- a) **Superficial wounds** characterized by damage to the skin and mucous membranes;
- b) **Deep wounds** which may involve damage to arteries, nerves, bones, joints, and internal organs.

In addition to surgical wounds caused by sterile instruments, all other wounds are considered infected.

The types of wounds are as follows:

- **Puncture wounds** occur when a sharp object (such as a knife, needle, nail, or awl) pierces the skin. These wounds typically have a small external opening but may be deep. The wound channel is often irregular due to tissue disruption. Such puncture wounds can be dangerous because the depth of the wound and whether internal organs are affected can be difficult to determine.
- **Incised wounds** occur when a sharp object (such as a knife, scalpel, or razor blade) cuts through the skin. These wounds usually have uneven edges and are open, bleeding, but generally heal well.
- •Shredded wounds a type of incised wound, where the skin and underlying tissues are displaced. These wounds occur along a movement line, often caused by cutting or tearing forces. Such wounds tend to be deep and difficult to heal.
- Contused wounds caused by a heavy, blunt object (such as a stone, hammer, or other objects) impacting the skin and underlying tissues. These wounds may resemble incised wounds externally, but they affect a larger area and often damage deeper structures like muscles, joints, or bones. The edges of the wound are often bruised.

- **Crushed wounds** occur when tissues are crushed by blunt objects (such as a rock or hammer). These wounds often result in extensive damage to tissues and are prone to infection due to the disruption of tissue integrity.
- **Gunshot wounds** caused by projectiles fired from firearms. The nature of the wound depends on the type of projectile (bullet, shrapnel, etc.) and its velocity. These wounds may cause severe internal organ damage, with both entry and exit holes formed. The entry hole is typically smaller than the exit hole.

Bite wounds occur as a result of an animal or human bite. The skin and underlying soft tissues are significantly damaged. These wounds are always infected and heal with delayed complications. Bite wounds should never be stitched. First aid for bite wounds includes washing the wound with 20% soapy water and, after drying, applying an aseptic bandage.

Clinical Features of Bite Wounds

The clinical features of a bite wound include pain, open edges, bleeding, and functional disturbances in the affected area. The severity of the wound can be categorized as:

- a) Mild
- b) Moderate
- c) Severe

External wounds are characterized by their depth, the type of internal organ damage, and the complications that arise (such as bleeding, dysfunction of the affected organ, peritonitis, pneumothorax, etc.).

In any bite wound, there are several potential risks, including the risk of infections that can be transmitted through the wound. The infections may lead to a systemic response, including shock and terminal conditions. These events are not only caused by pain but also by the bleeding from the wound.

Bleeding is the greatest risk associated with wounds. In addition, the risk of infection entering the body through the wound is not negligible. Both of these risks require prompt first aid to stop the bleeding and prevent infection.

Complications and Risks of Bite Wounds

Bite wounds may lead to infections that cause various diseases in the body, such as tetanus, gas gangrene, or rabies from animal bites. Vaccination is recommended to prevent diseases like tetanus. The prophylactic dose for gas gangrene is 30,000 IU of antiserum.

Hemorrhage into the Pleural Cavity

When the chest is struck, ribs are broken, or in certain lung diseases, blood may accumulate in one or both pleural cavities. Accumulated blood exerts pressure on the lungs, which makes breathing difficult. Due to the inability to breathe properly and the occurrence of bleeding, the patient's condition rapidly deteriorates, their skin becomes pale, and they may turn a bluish color.

First Aid:

The patient should be immediately transported to a medical facility for treatment. After stabilizing the patient, the first aid includes placing a cold compress or ice pack on the chest.

Hemorrhage into the Abdominal Cavity

Bleeding into the abdominal cavity usually occurs when internal organs like the liver or spleen are injured. In some cases, liver and spleen diseases can cause bleeding into the abdomen. In pregnant women, bleeding outside the uterus may occur as a result of complications, which can lead to miscarriage.

Clinical Features:

Bleeding into the abdominal cavity causes severe pain in the abdomen. The skin becomes pale, and the pulse rate increases. In cases of heavy bleeding, the patient may lose consciousness.

First Aid:

The patient should be placed in a horizontal position, and an ice pack should be applied to the abdomen. It is important to avoid giving the patient food or fluids. Immediate transportation to a medical facility is necessary.

USED LITERATURE:

- 1. N.R. Ochilova, G.S. Murotova, D.R. Karshieva. "The Importance of Water Quality and Quantity in Strengthening the Health and Living Conditions of the Population." Central Asian Journal of Medical and Natural Science 2 (5), 399-402.
- 2. A.A. Majidov, D.R. Karshieva, N.R. Ochilova. "Physicochemical Properties of Printed Cotton Fabrics with Starch-Based Thickener, Carboxymethylcellulose, and Sericin." Universum: Technical Sciences, 33-37.
- 3. M.R. Amonov, R.A. Ismatova, D.R. Karshieva, N.R. Ochilova. "Development of a New Composition for the Binding Composition." Materials of the International Scientific Conference. "Innovative Engineering Solutions."
- 4. A.N. Asadullayev, N.R. Ochilova, O.G. Jabbrova. "Healthy Lifestyle." Academicia: An International Multidisciplinary Research Journal 11 (1), 1835.
- 5. F.B. Ibragimova, M.R. Amonov, N.R. Ochilova. "Resource-Saving Technology for the Production of Printing Paint Thickener Using a Polymer Composition Based on Starch, Sericin, and Polyacrylamide." Universum: Technical Sciences, 18-21.
- 6. M. Amonov, S. Shodiyeva, E. Niyozov, R. Ismatova, B. Ganiev, N. Ochilova. "Chemical and Thermal Properties of Compositions Based on PAA, PVA, and Na-CMS for Printing Flowers on Silk Fiber Fabrics." E3S Web of Conferences 389, 01019.
- 7. N. Ochilova. "Wastewater Treatment from Industrial Enterprises." Center for Scientific Publications (buxdu.uz) 1 (1).
- 8. N.R. Ochilova. "Implementation of Problem-Based and Programmed Learning Elements in Teaching Practice." Young Scientist, 188-190.
- 9. N.R. Ochilova. "Study of the Physicochemical Properties of Rice Starch as a Primary Component of Textile Auxiliaries." Scientist of the 21st Century, 27-29.
- 10. A.N. Asadullaev, N.R. Ochilova, O.G. Jabbrova. "Healthy Lifestyle." Academicia: An International Multidisciplinary Research Journal (SSN: 2249).
- 11. S. Mardonova, G. Murotova, R. Sharafutdinova. "Principles of Increasing the Spiritual and Moral Integrity of the Population in Possible Emergency Situations." E3S Web of Conferences 2 (2), 34-40.
- 12. N. Ochilova. "The Issue of Ecological Education in the Family." Center for Scientific Publications (buxdu.uz) 30 (30).