Dear Ma's and Pa's.

You are a critical part of our trek medical team. You will be the first-line medical personnel.....the first to see a problem in one of your family members and intervene. We want you to feel comfortable in that role, and will provide training and supplies to help you be successful!

The medical information given to you in your trek registration packet is the basics. You need to know this stuff forward and backward. Blisters, dehydration/heat exhaustion, heat stroke, hypothermia, allergies & asthma, sunburn, chafing, and eye problems are all common, and there is an excellent chance that you will see many/most of these problems in your family.

PLEASE make sure that YOU, personally, are prepared for trek. If you are so focused on your own blisters and problems that you can't see/help problems in your family, we are all in trouble. Get good walking shoes NOW, and break them in. Get athletic socks that wick moisture. Tape anywhere you think you may get blisters, or if you feel ANY problems beginning. Please take care of yourself so that you are able to take care of your family!

The medical committee will put together first aid kits for each family. Each medical person will also carry a more extensive kit, and the medical vehicle will have all kinds of supplies as well. We are more than happy to help you with medical problems that arise in your family. There will be 6 medical people walking with you on the trek....2 per company. This is why the Ma's and Pa's need to see, recognize, and be able to treat minor problems, and to get help for more serious problems. With only 2 medical people per company, there's a lot of people to try to treat without your help. We need you!

Blisters and dehydration will be the most common problems, and are both easier to prevent than deal with once they occur. Please make sure that one pair of each family member's shoes stay dry (unless weather makes everything wet). Dry feet do a lot better with long hours of walking, and tape will stick better. Each person should have a "wet pair" of shoes, or crocs/water shoes, kept in a bag to use only when crossing water. Please make sure your kids change to wet, then back to dry. You will pay a heavy price with feet if you don't make sure this happens. There are WAY too many kids for the medical people to watch for this. This job falls to ma's and pa's by necessity. Even "dry" feet will be sweaty and dirty. It's gross, but true. Bandaids and mole skin will NOT stick. Everything has to be duct-taped. Duct tape is magic. It can prevent blisters if applied before blisters form, or as soon as a "hot spot" is felt. Duct tape can also work well for twisted/sprained ankles. Don't remove tape from day to day unless it is coming off. Especially if there's a nasty blister underneath. Clean skin as much as possible (think baby wipes), dry, and tape. If there's something you're concerned about, get one of us to help. Anything that bleeds more than a little, looks infected/might become infected, or is interfering with someone's ability to walk/push/pull, find us! We are here for you!

Your other biggest medical responsibility is to ensure that your family members stay hydrated. This is much harder than you'd think. You'll get all kinds of excuses: "I hate water", "I'm not even thirsty", "If I drink a lot, I'll have to pee", etc. Because we're going pretty early in the year, and at a high elevation, it may not be terribly hot. This makes it easy to forget to drink, and people often don't feel thirsty. But being out in the sun all day, walking, and pushing/pulling handcarts uses a LOT of fluid, and kids get dehydrated easily. Please set water goals with your family, such as 2 water bottles by lunch, 2 by dinner, etc, based on the amount their bottle holds. You will have to remind them. Often. Constantly.

It may come down to a, "OK, everyone take 10 swallows of water," kind of thing. That's ok. Do your best. If kids are complaining about nausea, headaches, weakness, or dizziness, chances are it's dehydration. If it doesn't seem too bad, have them drink a bunch, see how they do. If there's vomiting, pale skin, fast heartbeat, or seems more serious, send them or someone to find a medical person. Sometimes it takes some nausea medication or IV fluids to get them caught up. Usually once they are rehydrated, they're good to go again. Please make sure all members of your family are wearing their hats/bonnets, even if it messes up their hair, or they don't think they are "cute". It will help prevent some nasty sunburns on their faces (think blisters and swelling and pain), and help with dehydration problems. Sunscreen is critical…every day…..on faces, necks, backs of hands and arms. Don't forget the ears. Even if it's cloudy. Sunburns are miserable, and really take a lot of the fun out of trek.

All of the kids will have their sleeping bags and coats/jackets checked to be sure they are warm enough. We had a real problem with this last time. When temperatures drop to low 20's, and there's rain, snow, or ice, kids <u>get cold</u> fast and <u>stay cold</u>. When kids get cold outside, and then go into cold tents to sleep in cold sleeping bags, there's no way to warm them up. Please make sure your kids bundle up when temperatures drop. Hats prevent a lot of heat loss, so make them wear their hats/bonnets. Even leather work gloves they have for pulling the handcarts can help keep hands and fingers warm. Try to head off any problems with hypothermia. If someone is really cold and you're worried about them, bring them to the medical vehicle to warm up.

Chafing is very painful, and once it's there, it's miserable. We will try to educate all the youth about prevention of chafing. If someone in your family is having problems, A&D ointment and gold bond powder will be available. If you are worried about this for yourself, try walking in the clothes you will be wearing. If seams are irritating, or anything is bothering you, take care of it BEFORE trek. Get some biking shorts or spandex type shorts to lessen the friction on your inner legs.

We will let you know as soon as possible if there are more serious medical problems in your family. This will give you time to talk to the parents of those YM/YW so that you will be familiar with their problems, and comfortable either treating them or knowing when to get help from us. If you have any concerns about one of the youth assigned to your family, please talk to us.

We will be going to each ward and educating youth/leaders about medical issues. Please come to us with any questions you may have about any of the medical conditions/concerns discussed, or if you have other concerns. We want to make this a good experience for everyone involved! We are so grateful to you for your willingness to go on trek, and to help keep our youth healthy and happy.

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Dehydration/Heat exhaustion (most common problem)

Symptoms: headache, dizziness, nausea/vomiting, depression, weakness, fatigue, confusion, flu-like symptoms, pale face, cool/clammy skin, shallow breathing, weak pulse.

Treatment: Lie down with feet raised in shade. Loosen or remove clothing. Drink fluid if not vomiting, IV fluids if necessary. Apply cool, wet cloths to face, neck.

If you are thirsty, you are already dehydrated. Drink to prevent dehydration, not to treat it. You should drink some water at least every 20-30 minutes.

Keep cool on the outside. Use wet bandanas around the neck, or spray with spray bottle.

Monitor the color of urine. Dark-colored urine is an indication of not drinking enough water.

Heat Stroke (life threatening emergency)

Symptoms: red, very hot face. May be dry or sweating. Slow noisy breathing. Rapid, strong pulse. Decreased level of consciousness (confused, lethargic).

Treatment: Get into medical vehicle. Lie down with head/shoulder raised. Undress to underwear. Cover with wet towels or sheet.

Insects

Use insect repellant with DEET

Use fragrance-free lotion and deodorant to avoid attracting bugs

Wear light-colored, long-sleeved clothing to prevent sunburn, to keep cooler, and to make ticks easier to see

Spray insect repellant on clothing

Check for ticks twice a day, especially groin, armpits, belt lines and hair

If you have a tick, find a medical person to help you remove it. Do NOT put anything on it. The tick should be gently pulled out with tweezers. Then wash the skin well, and apply antibiotic ointment.

After the trek: Even weeks after the trek, unusual symptoms may be associated with tick bites. They may appear as a painless, red rash, usually in a bull's eye shape or ring, with a clear center. An infected person may also have flu-like symptoms, such as fever, chills, headache, joint pain, and swollen glands. Tick diseases are very treatable with antibiotics if detected early. If you have any of these symptoms, see your doctor immediately.

If you have insect bites, apply some Benadryl or hydrocortisone cream to the bite to help with itching, redness and swelling. If the area is swelling rapidly, see a medical person.

Blisters

Better to prevent than try to treat after they are painful. Wear two pairs of socks – a thin pair of nylon socks underneath and a pair of wool or synthetic fiber sock on the outside. Wool or "wicking" synthetic fibers will wick moisture away from skin and will not rub foot like cotton. Change both pairs of socks each day of the trek.

Wear good-fitting athletic shoes with a good tread. Be sure shoes are "broken in" (worn for several months before trek). New shoes will CAUSE blisters, not prevent them.

If you feel a "hot spot" forming on your foot (a burning, hot sensation), STOP WALKING and look at your feet. If there are red areas, apply duct tape over the red spots to prevent blisters.

If a blister has already formed, clean your foot the best you can, and let it dry. Apply a bandaid or moleskin, and then duct tape over the top to keep it in place. The bandaid/moleskin will NOT stay in place alone. If you think a blister will break, sterilize a pin in the flame of a match. Prick the blister near its edge and press out the liquid. Apply moleskin donut bandage and duct tape.

If you have duct taped a blister, try to not remove the tape until you are home. If the tape is coming loose, remove it and apply new tape.

KEEP YOUR FEET DRY. Blisters are a much bigger problem when feet, shoes, and socks are wet.

Hypothermia (Body loses more heat than it can generate)

Hypothermia is the lowering of body core temperature to the point that death can occur. Water on the skin absorbs heat from the body. Wind also adds to the chill factor. This can happen to anyone who is not dressed warmly enough in cold weather. Exhaustion increases the risk. The temperature does NOT have to be freezing.

Symptoms: person feels chilly, tired and irritable. Begins to shiver, shivering becomes violent. Person cannot think clearly. May stumble or fall.

Treatment: Take off wet clothes, get into sleeping bag. If hypothermia is severe, another person should also get undressed to underwear and get into sleeping bag to warm victim slowly.

Stay dry as much as possible. Once someone is wet and cold, it is difficult to get them dry and warm. Do not sleep in a wet sleeping bag.

Rain and serious storms

Keep dry as much as possible. Keep rain ponchos easily available in handcarts, since storms can move in quickly.

Lightning

Flash-to-bang system: time between a lightning bolt and thunderclap will tell how far away the lightning is. Each 5-second count equals 1 mile. Before the count reaches 15 seconds or less (3 miles), take precautions.

Lightning typically strikes the tallest object in the area, and is attracted to metal.

Move trekkers, with their rain ponchos on, away from handcarts toward lowest spot in area. Everyone should spread out at least 15 feet apart to minimize the chance of everyone getting hit.

If caught in the open, distance yourself from other people and make yourself as low a profile as possible (crouch down on balls of feet and bend forward to that head is low but no other part of the body touches the ground. Keep feet together to minimize body contact with the ground, which minimizes the risk of being hit).

Sprains and strains

Apply ice/cold to reduce swelling and pain, elevate injured part, use compression (ace bandage).

Take Tylenol or ibuprofen for pain.

Bleeding

Elevate injured limb above body level.

Apply direct pressure. If bleeding soaks through bandage, DO NOT REMOVE. Apply more bandaging over existing bandage, reapply pressure. Get medical help.