**CAP health & wellness handout: COLD INJURIES**

**FROSTNIP:**

The skin is not frozen but has a characteristic pale appearance due to spasm of the arteries supplying the skin:

* Occurs on exposed skin of face, ears, or nose
* May notice a "frosting" of superficial ice crystals on the surface of the skin
* May progress to frostbite if not treated

Treatment of Frostnip:

* Assignment of buddy pairs to watch each other
* Cover the skin with appropriate clothing
* Warm the affected skin

**FROSTBITE:**

* In frostbite, the skin and soft tissues are frozen.
* Extent of injury depends on depth of frozen tissue.
* The extent of injury is worsened if thawed tissue is permitted to refreeze
* In deep frostbite there is potential for significant tissue loss.
* Frostbite is a preventable injury with proper preparation

**SUPERFICIAL FROSTBITE**

* The frozen tissue is limited to the skin
* Little permanent tissue destruction
* Some tissue swelling
* Clear fluid-filled blisters may develop with thawing.

**DEEP FROSTBITE**

* Freeze injury is deeper than skin level and may involve muscles and bone.
* Characterized by tissue swelling and bloody fluid in blisters when thawed.
* There will likely be soft tissue loss resulting from amputation

**TREATMENT OF FROSTBITE**

* First objective is to prevent further injury
* Do not allow tissue to thaw if there is any risk of the tissue freezing again
* Remove tight or constricting clothing, tightly laced boots, and jewelry, especially constricting bands like finger rings.
* Do not bandage tightly
* A person is not able to walk on a frostbitten foot or leg
* ABSOULTELY NO SMOKING – significantly reduces blood flow
* No alcoholic beverages

**Recommendations:**

Remember the adage that "prevention is better than treatment"

* Maintain body temperature
* Dress in layers
* Stay dry! Carry spare dry socks.
* Wear a hat and suitable gloves
* Avoid tight fitting clothing or boots
* Cover exposed skin
* Eat enough carbohydrates
* Pay attention the weather
* No Smoking!