

Keep Your Food Safe This Camping Season

Warmer weather is here and with it comes the camping season! The fun and excitement of cooking in the outdoors is an integral part of the Scouting experience. Follow safe food handling guidelines to make sure it is a positive experience!

Food safety starts with thoughtful menu planning. Whether you're going on a day hike, an overnight campout, or a multiday adventure, plan meals that work safely within the challenges of your adventure. Remember the three "C's" to keep your food safe: Keep it *cold*, keep it *clean*, and cook it thoroughly.

Keep it cold. Most bacteria are slow to grow in temperatures below 40 degrees F or above 140 degrees. The temperature range in between is known as the "danger zone" where bacteria can multiply rapidly. Since a heat source is usually unavailable when transporting foods, it's best to start by keeping the foods cold. Freeze or chill foods overnight, then pack them in a cooler with plenty of ice, frozen gel packs, or even frozen juice boxes. Perishable food cannot be kept out in hot weather (90 degrees F or higher) for more than one hour and in mild weather for more than two hours. Leftover foods can be placed safely back in the cooler if these time limits have not expired and if the cooler still has ice.

Keep it clean. Start with clean hands. Soap and water or disposable wipes should be used before handling food. Wash fruits and vegetables before cutting on a clean surface. Avoid cross-contamination by making sure raw meat, poultry, or their juices do not come into contact with fresh or prepared foods. Do not use the same platter and utensils for raw and cooked meat or poultry, and always wash hands after handling. Make sure raw meats in transport are double wrapped in resealable bags to prevent the juices from contaminating fresh foods or foods that need no further preparation.

Cook thoroughly. Many Scouts are cooking on their own for the first time. An often overlooked piece of equipment that should be in every chuck box is a digital food thermometer.

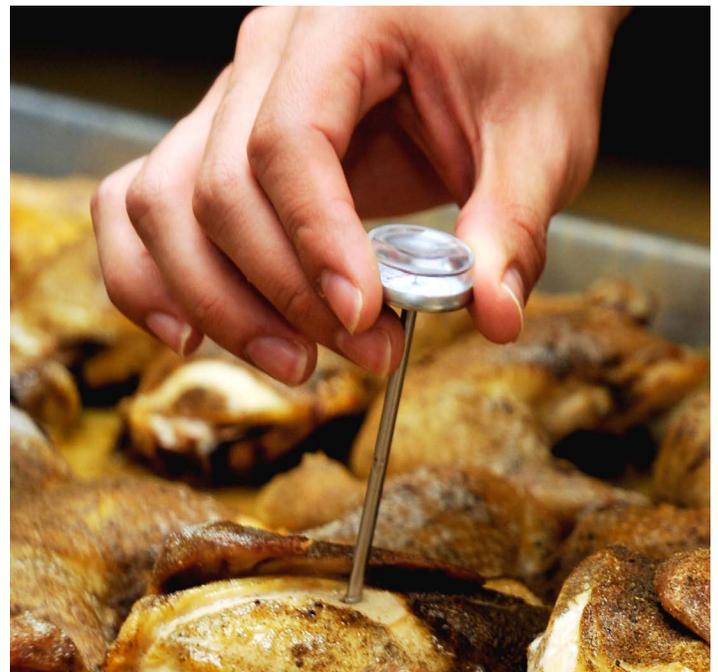
It's difficult to determine when meat and poultry are cooked thoroughly, especially when light might be a factor. Meat color is not a reliable indicator of doneness. It is critical to use a meat thermometer when cooking hamburgers as ground meat may harbor E. coli, an especially dangerous bacteria. The thermometer should be inserted into the thickest part of the meat.

Cook all meat, poultry, and fish to these safe minimum temperatures:

- Roasts, steaks, and chops (beef, pork, lamb, and veal)—145 degrees F
- Ground beef, pork, lamb, and veal—160 degrees F
- Poultry—165 degrees F
- Fish—145 degrees F

Be sure to clean your thermometer between uses.

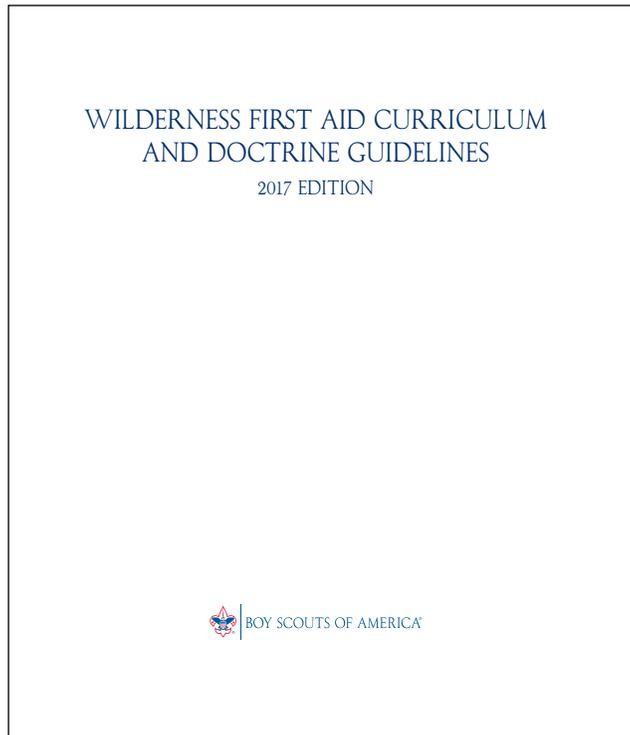
Enjoy the delights of outdoor cooking, and do it safely with thoughtful meal planning and by following these food safety guidelines!



References:

www.fsis.usda.gov
www.eatright.org

Revised BSA Wilderness First Aid



military Tactical Combat Casualty Care curriculum concepts and applicable portions of the current guidelines of the Wilderness Medical Society.

The core curriculum has been changed to 12 hours that are considered mandatory to meet the BSA WFA requirement, and four additional hours to be chosen from the list of seven elective topics. Each elective topic has been specified a course content and time allocation. The total time allocation for the course remains at 16 hours. The minimum age requirement remains at 14 years. Recertification is required by repeating the course every two years. CPR and AED certification are prerequisites.

The BSA requires that courses taught to BSA members conform to the curriculum now established as the *Boy Scouts of America Wilderness First Aid Curriculum and Doctrine Guidelines, 2017 edition*.

William Hurst, BSA Health and Safety Support Committee Chair

William W. Forgey, M.D., BSA Wilderness First Aid Task Force Chair

In preparing the revised 2017 edition of the *Boy Scouts of America Wilderness First Aid Curriculum and Doctrine Guidelines*, the comments of instructors, participants, and organizations utilizing the curriculum were considered as well as input from the BSA national and regional high-adventure programs.

This edition of the *BSA Wilderness First Aid Curriculum and Doctrine Guidelines* had oversight by members of the Boy Scouts of America Wilderness First Aid Task Force with significant input from its many members. The task force is particularly grateful to the lead writer, Buck Tilton, MS, EMT-W, whose wide experience and technical writing skills were unselfishly provided for the first edition and this edition of the project. Further specific gratitude is extended to Toney Islas, M.D., past president of the Wilderness Medical Society, for his assistance in the original epidemiological studies that led to this project's focus, and to Brad Bennett, Ph.D., NREMT-P, FAWM, Capt., USN (Ret.), immediate past president of the Wilderness Medical Society, for assuring a cohesive approach to

Protection Against Disease-Carrying Bugs and Insects



Besides discomfort, insect bites carry an increasing risk of disease into North America.

Ticks cause Lyme disease, Rocky Mountain spotted fever, babesiosis, Colorado tick fever, ehrlichiosis, relapsing fever, tick paralysis, tularemia, and anaplasmosis in the United States. Ticks crawl around on the skin to find a nice, warm spot to attach—generally for up to two hours.

In recent years mosquitoes have spread in the continental U.S. an increasing variety of serious diseases that were already common in South and Central America and the Caribbean. These diseases include various forms of encephalitis, West Nile virus, chikungunya fever, dengue, malaria, yellow fever, and now Zika virus. In the early days of Scouting, mosquito bites were simply a nuisance, but now they can be deadly; just one bite can lead to serious consequences. We need to be prepared by eliminating even one chance of having a mosquito or tick bite.

Ticks are easy to fight. Treating clothing before your trip with a permethrin-based repellent is 100 percent effective in preventing tick bites. Also before the trip, spray your sleeping bag, tent, and tarps, which will decrease campsite bites of all types (except, of course, by snakes, but that is another story).

Mosquitoes “see” by three different mechanisms: chemical sensors, visual spectrum, and infrared sensors. Because we know this, we can use three protective strategies to prevent their bites: behavior, barrier, and chemical.

Behavior. This is the least known strategy but very important. Our bodies naturally produce a carbon dioxide plume that travels up to 150 feet depending upon the wind speed. If you can camp where the wind blows your plume into a lake instead of a forest, you will decrease the risk of mosquito bites. Otherwise, once they pick up your plume they will turn on and use visual spectrum to locate colors that stand out for them such as black, navy blue, and red. Wear white or light colors. The green of a Scout uniform is OK.

Barrier. To cover and protect your skin, wear long-sleeve shirts, long pants, and socks, all treated with permethrin. However, be aware that when mosquitoes are close they activate sensors to detect smells from perspiration or oil gland secretions being degraded by common skin bacteria. The highest bacteria content on your skin is located in your armpits and on your feet. Keeping clean decreases the smell significantly.

When very near to you, mosquitoes turn on their infrared sensors and home in on the best place to get human blood. Sounds like a scary campfire story, but it’s true. We are surrounded by tiny insect “vampires” that can turn us into—if not the living dead—*really dead* people with some diseases. The good news, though, is that simply using the techniques described here can reduce mosquito bites by 85 percent.

Chemical. Most people regard this as the primary means of suppressing insect bites. A single clothing treatment with permethrin lasts for six weeks. Mosquitoes require additional skin protection, and this can usually be achieved with a 20-percent picaridin repellent or DEET in concentrations of 30 percent, repeated as required. Lemon eucalyptus in 30-percent concentrations works almost as well. Other herbals, wrist bands, and electronic devices do not match the effectiveness of those products.

In closing, “Be Prepared”!

Doc Forgey

BSA National Health and Safety Committee

Psychological First Aid Following a Disaster



The purpose of psychological first aid is to provide basic care, comfort, and support to anyone experiencing disaster-related stress. It includes noticing the signs of stress in others as well as yourself, providing immediate support to those experiencing stress, and finding additional mental health support when needed.

Disasters are always stressful for people, and individuals react in various ways. Signs of stress may be indicated in feelings and emotional states, thinking and expression of thoughts, physical effects, behaviors, or spiritual impact. Over time these reactions may disappear, remain the same, get somewhat better, or grow considerably worse. This is especially true if people have not found ways to cope effectively with their situations.

What to Do

Strategies that can help when you or someone you know is experiencing disaster-related stress include:

- Making a connection: Talking to another person for support or spending time with others who are kind, calm, and compassionate; reminiscing with a supportive friend about a loved one who has died
- Meeting basic needs: People helping others to feel safe, listening, and offering realistic assurance and accurate, timely information
- Focusing on something practical that you can do right now to manage the situation better
- Self-care: Trying to maintain a normal schedule with breaks and adequate rest, exercising in moderation, eating healthy meals, and engaging in pleasant, distracting activities like sports or reading
- Using relaxation methods such as breathing exercises, meditation, soothing music, etc.

- Telling yourself that it is natural to be upset for some period of time
- Keeping a journal
- Participating in a support group
- Seeking counseling
- Making or getting a referral to more qualified caregivers when necessary

What Not to Do

Reactions that are ineffective or harmful include:

- Extreme avoidance of thinking about or discussing a stressful event
- Blaming others
- Extreme withdrawal from family, friends, or pleasant activities
- Working too much
- Not taking care of oneself
- Too much time spent watching TV or playing computer games
- Overeating or failing to eat
- Using alcohol or drugs to cope
- Doing risky things or using questionable judgment
- Violence or conflict

The impact of a disaster may place an individual at risk of experiencing more serious effects that will require mental health assistance. Referral for more specialized assistance is necessary when the individual expresses a desire or intent to harm themselves or others, or shows extreme reactions that do not improve or seem to worsen.

Other situations in which more specialized help is needed include when a person cannot be calmed down despite your best efforts, is unable to sleep, feels as if they are experiencing the event again or that it will recur in the future, or seems to be under the influence of alcohol or drugs.

