

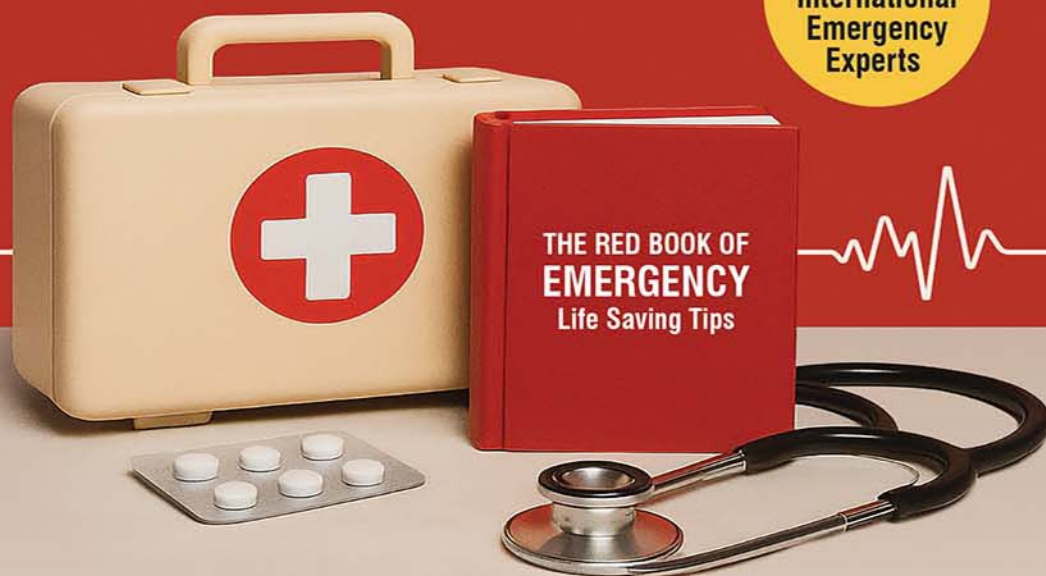
Complimentary 37 Reels • Scan • Watch • Learn • Save Lives

THE RED BOOK OF EMERGENCY

Life Saving Tips

Real-Life Stories
Dispelling Myths

Written by
National &
International
Emergency
Experts



**Your Life Saving Companion for
Medical & Surgical Crises**

Editor-in-Chief
Lokendra Gupta

Co-Editor
Utsav Anand Mani

Foreword
Himanshu Rai



Contents

Section 1: Cardiovascular System

- 1. Heart Attack (Myocardial Infarction) 1**
Husain Abbas, Shyam Sundar
- 2. High Blood Pressure Emergency (Hypertension)..... 7**
Nayan Sriramula, Abhishek Tandon
- 3. Low Blood Pressure (Shock) 12**
Subhankar Paul, Mustahsin Malik
- 4. Breathing Difficulty: Heart Failure 17**
Pooja Gautam, Ashish Kumar Gupta
- 5. Palpitations (Arrhythmia) 21**
Shivendra Sinha, Virendra Verma

Section 2: Respiratory System

- 6. Severe Asthma Attack and COPD 25**
Debomita Dey, Rajeev Kumar Gupta
- 7. Cough..... 30**
Kartika Gautam, Ajay Kumar Verma
- 8. Choking 33**
Rajesh Ursekar, Pankaj Parmar

Section 3: Neurological and Mental Health

- 9. Stroke (Brain Attack) 36**
Prakash Chandra Pandey, Deepak Singh
- 10. Seizures (Fits) 41**
Navin Jain, Anshul Jain
- 11. Sudden Collapse and Unresponsiveness 46**
SS Tripathi, Somnath Longani

- 12. Head Injury: Danger Signs50**
Pranabh Kushwaha, Suyash Singh
- 13. Fainting and Dizziness.....55**
Saifa Latheef, Saurabh Jha
- 14. Mental Health Crisis and Suicide Risk59**
Kushal Pandya, Santosh Pandey
- 15. Anxiety and Panic Attacks.....64**
Abhinav Verma, Pranjal Tripathi

Section 4: Blood and Metabolic Disorders

- 16. Diabetic Emergency (Low and High Sugar)68**
Shivam Verma, Sajid Ansari
- 17. Bleeding Emergencies: Seconds to Survival.....72**
Abhay Raj Yadav, Sachin Shakya

Section 5: Trauma and Accidents

- 18. Road Traffic Accidents: What to do First?76**
Samir Misra, Yadendra Dheer
- 19. Fractures and Broken Bones81**
Prem Raj Singh, Akanksha Kumari
- 20. Burns and Scalds.....85**
Likhitha Dubagunta, Pushpraj Singh
- 21. Electric Shock and Lightning Injury89**
S Prakash Babu, Rohith Gupta Kanisetty

Section 6: Environmental Emergencies

- 22. Heat Stroke and Dehydration94**
Alka Verma, Divya Srivastava
- 23. Cold Exposure and Hypothermia98**
Devanshi Virani, Ranjitsinh Rathod

- 24. Drowning and Near-Drowning102**
Tushar Parmar, Chetan Choudhary

Section 7: Poisoning and Allergic Reactions

- 25. Poisoning: Household Pesticides107**
Sweta Khurajam, Alok Ashok Gangurde
- 26. Allergic Reactions and Anaphylaxis111**
Pallav Singh, Ravi Ranjan Rakesh
- 27. Snake Bites115**
Om Prakash Sanjeev, Vishwadeep Mishra
- 28. Scorpion Bite121**
Elizabeth Sada, Digvijay Dhananjay Adake
- 29. Animal Bites (Dog, Monkey, etc.)125**
Tanmoy Ghatak, D Peeyuusha Abhay
- 30. Insect Stings132**
Vikram Sarangan, Amit Anand

Section 8: Pediatric and Obstetric

- 31. Child Emergency: Fever with Convulsions136**
Melissa Lourdes Carlos, Rachita Chatterjee
- 32. Pregnancy Emergencies: Bleeding and Labor Pains140**
Devyani Misra, Vandana Gautam
- 33. Childbirth in Emergency Situations144**
Devyani Misra, Shailja Bhamri

Section 9: Eye, ENT, Dental, and Urological

- 34. Sudden Vision Loss or Blurred Vision147**
Alka Verma, Rachna Agarwal
- 35. Foreign Body in Nose and Eye151**
Pooja Kanodia, Abhinav Sinha

36. Bleeding from Nose156
Mukesh Kumar, Varnika Agrawal

37. Urological Emergencies in the Elderly160
Nishant Kanodia, Narsingh Verma

38. Dental Emergencies (Tooth Injury, Severe Pain, Bleeding)164
Amit M Mani, Shubhangi Ameet

Section 10: Special Situations

39. Hanging and Near Hanging167
Utsav Anand Mani, Syed Numan Hussaini

40. The Golden Hour in Medical Emergencies: A Quick Overview172
Karthik AR, Lokendra Gupta

Index177

SECTION 1: CARDIOVASCULAR SYSTEM

Chapter 1

HEART ATTACK (MYOCARDIAL INFARCTION)

HEART ATTACK—A STICH IN TIME SAVES NINE

Story: Crushing Pain, Critical Moments: A Story of Survival

Sudhir, a 40-year-old software engineer, was wrapping up a long day at work when a sudden, crushing pain gripped his chest. It felt like a heavy weight pressing down, making it hard to breathe. Alarmed, his friend Tushar quickly called emergency services—a decision that would ultimately save his life. Tushar knew that Sudhir was a smoker and quickly thought of it as a heart attack. As Tushar was carrying aspirin with him in his wallet, he immediately gave it to Sudhir.



Minutes later, the ambulance arrived. Sudhir, sweating and pale but still conscious, described his symptoms to the paramedics. They immediately recognized the signs of a heart attack. With swift precision, they administered oxygen. Time was critical, and they rushed him to a hospital with a specialized cardiac care unit, alerting the emergency team en route.

As Sudhir arrived, the emergency department sprang into action. An electrocardiogram (ECG) confirmed the worst—an acute myocardial infarction, a heart attack threatening a large portion of his heart. The team acted quickly, deciding on thrombolysis, a procedure to dissolve the blood clot causing the attack. Within minutes of treatment, Sudhir began to feel relief. However, it was clear more was needed to prevent future complications.

He was taken for an emergency coronary angioplasty, a delicate procedure to open the blocked artery. A stent was placed to ensure the artery stayed open, restoring critical blood flow to his heart. The procedure was a success, and Sudhir was stable.

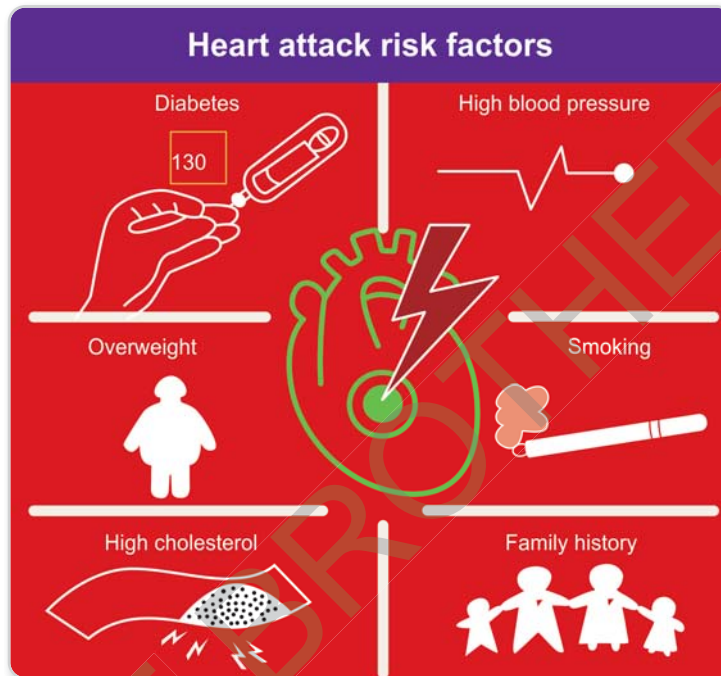
Over the next few days, Sudhir's recovery was closely monitored. The medical team provided him with medication to prevent further clotting and offered detailed counseling on lifestyle changes to reduce future risks. He enrolled in a cardiac rehabilitation program to gradually rebuild his strength and confidence.



After 5 days, Sudhir left the hospital, deeply grateful to his friend Tushar for his second chance at life. With a follow-up plan that included regular cardiology visits, a heart-healthy diet, exercise, and stress management, he was determined to make the changes needed to protect his heart.

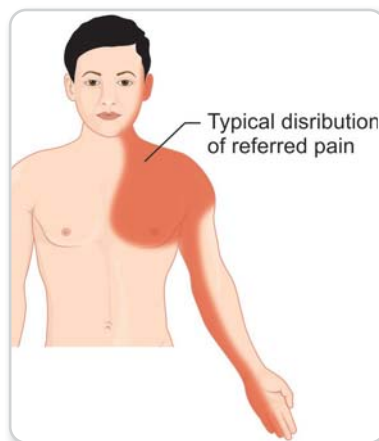
Sudhir's story is a testament to the power of quick action, skilled medical care, and the importance of recognizing heart attack symptoms. It is a reminder that timely intervention can make all the difference between life and death.

WHAT HAPPENS IN A HEART ATTACK? WHAT ARE ITS RISK FACTORS?



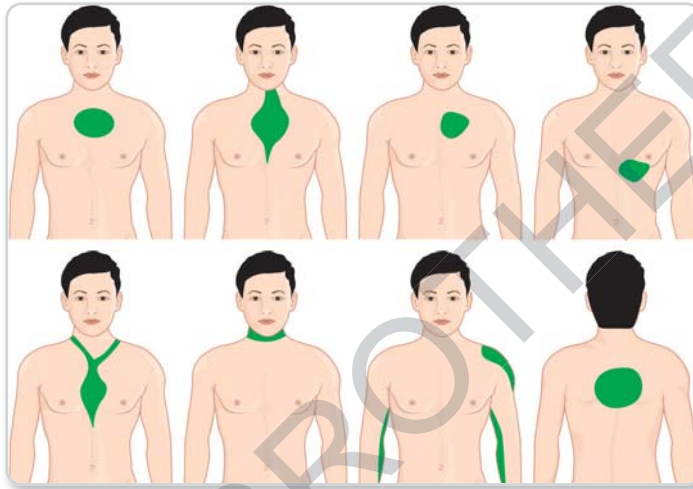
PATIENT PRESENTATION—USUAL

- Pressure-type chest pain originating in retrosternal area (may radiate to arms, neck, or jaw)
- Chest pain occurring at rest or with minimal exertion
- Pain ≥ 10 minutes
- Chest pain may be triggered by exertion, emotional stress, or temperature extremes
- Chest pain characteristics include: Heaviness/pressure/tightness/squeezing/burning



PATIENT PRESENTATION—UNUSUAL



Atypical symptoms are more frequently observed in elderly individuals, females, and those with diabetes, potentially including:





- Discomfort in the jaw, neck, or arm
- Shortness of breath
- Nausea
- Vomiting
- Excessive sweating
- Unusual tiredness
- Pain in atypical regions as shown in the earlier given diagram.

MYTHS AND FACTS

Here are *10 myths and facts* regarding the management of myocardial infarction (MI), commonly known as a heart attack:

 Myths	 Facts
A heart attack always causes severe chest pain.	Not all heart attacks cause severe chest pain. Symptoms can vary and may include mild pain or discomfort.
Only older adults have heart attacks.	Heart attacks can occur at any age, though risk increases with age. Young adults can also have heart attacks. This is more common in the Indian population.
If you are feeling better, you do not need to call emergency services.	Even if symptoms improve, they may signify a serious condition. Immediate medical evaluation is crucial.

 Myths	 Facts
Heart attacks can be treated at home with Ecosprin.	While aspirin or disprin can be an initial measure, heart attacks require immediate medical attention and treatment. Ecosprin should not be used in acute management of heart attacks.
Nitroglycerine tablets are beneficial during a heart attack.	Nitroglycerine tablets are detrimental if the patient has a Right sided Myocardial infarction hence should not be used for all patients.
You cannot exercise after having a heart attack.	Physical activity is often part of rehabilitation and recovery, tailored to the patient's condition.
Myocardial infarction symptoms are the same for everyone.	Symptoms can vary greatly among individuals, including differences between men and women.
A heart attack will permanently end your normal life.	Many people return to their normal lives after recovery and rehabilitation, with adjustments for heart health.
Once you have a heart attack, there is nothing you can do to prevent another.	Lifestyle changes and medical treatment can significantly reduce the risk of another heart attack.
All chest pain is a sign of a heart attack.	Chest pain can be caused by many conditions, not just heart attacks. Medical evaluation is necessary. Some common differential diagnosis is Acute Gastritis or Costochondritis.

STEPWISE FIRST AID BEFORE REACHING A HOSPITAL



For pan-India awareness, mention that 108 works in most states, but 112 is the national emergency number



Take the patient to a nearest Hospital having a Cardiologist and an Emergency Physician by 108 Ambulance.



Immediate ECG to be done on arrival in Emergency.



Upon arriving at the hospital describe the details of the chief complaints to an Emergency Physician.



Current recommendation (ACC/AHA, ESC guidelines): Chew 150–325 mg of aspirin as soon as possible (unless allergic).



The time from arrival at the hospital to administration of clot-busting medication should be within 30 minutes.



Angioplasty (a procedure to open blocked heart arteries using a balloon and stent).

CONCLUSION

- The key to tackling a heart attack lies in early recognition.
- Time is muscle – the faster blood flow is restored to the heart, the less damage occurs. Bystanders play a vital role by calling emergency services immediately, and if trained, performing cardiopulmonary resuscitation (CPR).
- Medications can dissolve blood clots, a procedure known as thrombolysis, while minimally invasive cardiac catheterization can open blocked arteries with stents. Not all patients have to undergo thrombolysis followed by angioplasty, leave that decision to the cardiologist.

Scan to watch Dr Lokendra's 1-minute reel on this emergency.



THE RED BOOK OF EMERGENCY Life Saving Tips

Salient Features

- Real Stories—True medical cases shared as short, engaging narratives
- Red Flag Signs—Key symptoms of serious conditions explained clearly
- Emergency Steps—Simple, step-by-step actions to take before reaching the hospital
- Myth-Busting—Common health myths debunked for better awareness and response.

During my time (Lokendra Gupta) at King George's Medical University (KGMU), Lucknow, Uttar Pradesh, India, one incident left a lasting impact on me—a 6-year-old child was brought dead to the emergency room. His well-educated parents had missed the golden hour, unaware of the red-flag signs of severe allergy and how to respond. Their lack of awareness cost them their only child. That tragedy shook me deeply. It made me realize how critical it is for every parent and caregiver to recognize early warning signs and know how to act in emergencies.

This book is written to bridge the knowledge gap so that no more lives are lost to situations that timely information could have prevented.

Lokendra Gupta MBBS MD DNB (CCM) MRCEM (UK) is a renowned Doctor in Emergency Medicine and Trauma Care, trained at some of the most prestigious institutions in India and the UK, including Gandhi Medical College (GMC), Bhopal; King George's Medical University (KGMU), Lucknow; Medanta—The Medicity, Gurugram; and Kettering General Hospital, University of Leicester, UK. With years of hands-on experience in critical care, he has become a trusted name in emergency medicine.



He is the Founder and President, Society of Acute Care, Trauma, and Emergency Medicine (SACTEM), one of the largest networks promoting emergency awareness and education across India. Currently, he leads the Emergency Department at Medanta Hospital, Lucknow, one of the largest and most advanced emergency units in Uttar Pradesh.

His passion for saving lives goes beyond the hospital walls. With *The Red Book of Emergency*, he brings life-saving knowledge to every household and workplace—arming readers with the tools to recognize danger signs, act quickly, and dispel dangerous health myths. This book is not just a guide—it is a mission to make every reader a potential lifesaver.

Utsav Anand Mani MD FISC M FISH FISMN is an accomplished Emergency Medicine Physician currently, serving as an Assistant Professor at Sanjay Gandhi Postgraduate Institute of Medical Sciences (SGPGIMS), Lucknow, Uttar Pradesh, India. With an MD in Emergency Medicine and multiple fellowships to his credit, he has contributed over 25 peer-reviewed publications and several book chapters across critical care, toxicology, and cardiovascular emergencies. A passionate Educator and Speaker, he is actively involved in clinical training, academic research, and interdisciplinary collaboration to advance the field of emergency care. He also serves as an Academic Co-Head, Society of Acute Care, Trauma, and Emergency Medicine (SACTEM), combining clinical excellence with commitment to healthcare leadership.



Buy from ejaypee



JAYPEE
BROTHERS

Shelving Recommendation
EMERGENCY MEDICINE

ISBN 978-93-7202-264-3



9 789372 022643