



When exposed to very cold temperatures, skin and underlying tissues may freeze, resulting in frostbite. The areas most likely to be affected by frostbite are your hands, feet, nose and ears.

If your skin looks white or grayish-yellow, is very cold and has a hard or waxy feel, you may have frostbite. Your skin may also itch, burn or feel numb. Severe frostbite can cause blistering and hardening. As the area thaws, the flesh becomes red and painful.

Gradually warming the affected skin is the key to treating frostbite. To do so:

- Protect your skin from further exposure. If you're outside, warm frostbitten hands by tucking them into your armpits. Protect your face, nose or ears by covering the area with dry, gloved hands. Don't rub the affected area and never rub snow on frostbitten skin.
- Get out of the cold. Once you're indoors, remove wet clothes.
- Gradually warm frostbitten areas. Put frostbitten hands or feet in warm water — 104 to 107.6 F (40 to 42 C). Wrap or cover other areas in a warm blanket. Don't use direct heat, such as a stove, heat lamp, fireplace or heating pad, because these can cause burns.
- Don't walk on frostbitten feet or toes if possible. This further damages the tissue.
- If there's any chance the affected areas will freeze again, don't thaw them out. If they're already thawed out, wrap them up so that they don't become frozen again.
- Get emergency medical help. If the skin turns red and there's a tingling and burning sensation as it warms, circulation is returning. But if numbness or sustained pain remains during warming or if blisters develop, seek medical attention.

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