



# STREET MEDIC GUIDE

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**THIS GUIDE IS NOT A REPLACEMENT FOR FIRST AID OR STREET MEDIC TRAINING.**

The information we provide within our street medic guide is intended to be used as reference material for educational purposes only.

This resource in no way substitutes or qualifies an individual to act as a street medic without first obtaining proper training led by a qualified instructor.

We recommend finding a *trusted* local health collective for both initial and continued training.

# THE PAPER REVOLUTION COLLECTIVE STREET MEDIC GUIDE

VERSION 6 – YEAR OF 2018 UPDATE

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## WHAT IS A STREET MEDIC?

**Street medics**, or action **medics**, are volunteers with varying degrees of **medical** training who attend protests and demonstrations to provide **medical** care such as first aid. Unlike regular emergency **medical** technicians, who serve with more established institutions, **street medics** usually operate in a less formal manner.

Street medics, or action medics, are volunteers with varying degrees of medical training who help provide medical care, such as first aid, in situations frequently neglected by traditional institutions – protests, disaster areas, under-served communities, and others. Unlike emergency medical technicians (EMTs), who work for state-sponsored institutions, street medics operate as civilians and are not protected from arrest.

Street medic organizations also run low-income herbal health clinics, wellness clinics for migrant workers, and temporary family practice clinics to support people who are organizing for self-defense or advocating for their rights. A group of street medics founded the first health clinic to open in New Orleans after Hurricane Katrina.

Street medics work under the philosophy of “first do no harm” (i.e., the Hippocratic Oath), meaning that medics employ treatments that must never harm the patient more than they help. Because medics have different levels of training, they will be able to provide different types of care. Street medic collectives representing cities or regions plan training programs focusing on treating demonstration-related injuries, and plan health, safety, and medical coverage of upcoming demonstrations.

Sometimes an affinity group will include one or more trained street medics to attend specifically to members of that group.

Many street medics have pursued further medical training, most commonly in nursing, emergency medicine, and herbalism. There are street medics employed in almost every field of medicine and rescue, including surgery, family practice medicine, psychiatry, research, both classical and traditional Chinese medicine, medical herbalism, first aid instruction, fire-fighting, and wilderness medicine.

## A CONDENSED HISTORY OF STREET MEDICINE IN PRACTICE

**The concept behind street medicine is not new.** Originally seen during the African-American Civil Rights Movement and the protests against the Vietnam War, street medics are volunteer activists who attend political actions equipped with the knowledge and inventory necessary to give medical aid to protesters and civilians in need.

Street medics originated in the United States of America in 1964 during the African-American Civil Rights Movement. They were originally organized as the Medical Presence Project (MPP) of the Medical Committee for Human Rights (MCHR), the voluntary health corps of the Civil Rights Movement. In the 1966 MCHR Orientation Manual, MPP is described.

*“Just presence of ... health ... personnel has been found extraordinarily useful in allaying apprehensions about disease and injury in the Civil Rights workers... There also seems to be a preventative aspect to medical presence – actual violence seems to occur less often if it is known that medical professionals are present, particularly when Civil Rights workers are visited in jail at the time of imprisonment or thereafter regularly. In addition, medical personnel should anticipate violence in terms of specific projects and localities and be present at the right place and the right time. Thus, medical personnel should be in intimate contact with the civil rights organizations at all times, and ... be aware of any immediate planned activities.”*

The MPP evolved into the early street medic groups, who conceived of medicine as self-defense, and believed that anyone could be trained to provide basic care. Street medics provided medical support and education within the American Indian Movement (AIM), Vietnam Veterans Against the War (VVAW), Young Lords Party, Black Panther Party, and other revolutionary formations of the 1960s and 1970s. Street medics were also involved in free clinics developed by the groups they supported. The street medic pepper spray removal protocol was later adopted by the U.S. Military.

In the 1980s, “action support,” including medical support of long marches in the No Nukes and Indigenous Sovereignty movements, was provided by non-street medics. One of these action support groups, Seeds Of Peace, (formed in 1986), stopped offering medical support as the street medics re-emerged.

Street medics were active on a small scale during the protest activity against Operation Desert Storm (1990–1991). They were rejuvenated on a large scale during the 1999 Meeting

of the World Trade Organization, when street medics attended to protesters who were injured by police and use of chemical weapons such as pepper spray and tear gas.

In the aftermath of the WTO Meeting, protest sympathizers and/or attendees organized street medic trainings nationwide in preparation for the next round of anti-globalization marches. The parents of the post-WTO street medic boom (1999-2001), who trained thousands of medics in a few years, were the Colorado Street Medics (the direct descendant of the first MCHR Street Medics), Black Cross Collective, and On the Ground.

As social movements gain momentum and attract attention, they become increasingly likely to come up against those who would do serious violence to maintain the status quo, rather than allow meaningful change. Metropolitan police represent the most immediate physical threat to those who attempt to change the system, even via peaceful means. A demand as simple as “please stop shooting unarmed citizens on public transit platforms” can and will be met with violent resistance from the state and its police force.

Into this volatile situation, where there exists a real threat of violence perpetrated against protest movements, come street medics. This guide hopes to serve as both a simple primer for those interested in educating themselves to take a medical role in situations of civil unrest or for those seeking to aid fellow comrades in the street.

## **STREET MEDIC TRAINING**

The amount of training one seeks out before becoming a street medic varies, depending on the duties one intends to perform during political action. Don't mislead other activists about your level of medical training or competency – be upfront with them about your supplies and abilities.

It is better that they call for outside medical assistance immediately, rather than wait to find you, only to hear that you cannot treat them. That said, one need not do more than carry water for other protesters, or bandages, or sunscreen, to make a difference. Even this minor effort can mean the difference between activists staying in the street, or having to go home for water, food, or medical treatment.

When a potential medic decides to start offering protest support, they should consider starting their training by taking a professional First Aid/CPR course. Learning proper treatment techniques for cuts, bruises, and other injuries is important, as inexperienced attempts at administering aid can potentially worsen an injury and leave the wounded worse off than they

would have been without your intervention. This is another reason it's extremely important to be honest with yourself and your fellow protesters about your level of medical ability.

Further studies and training within the realm of street medicine can include free street medicine training provided by qualified instructors through a local health collective. One can continue studies by obtaining professional training such as that of an Emergency Medical Technician, Wilderness First Responder, or Paramedic. These resources require increasing levels of time and financial investment, so it's best to use one's own judgment about how much time and money can be invested into training and resources.

Potential medics may be employed by institutions that may take issue with their involvement in political action (such as ambulance crews, government organizations, and so on) – it would do such individuals well to disguise themselves as fully as possible before being seen and photographed taking part in any activism.

## **ABOUT THE PRACTICE OF ALTERNATIVE MEDICINE:**

Recently, the street medic community has seen a large influx of medics practicing herbalism, eastern medicine, and other alternative therapies. Ultimately it is a singular individual's decision whether to use these techniques or not.

Paper Revolution stands in favor of autonomous decision making – however - the practice of scientifically proven medicine in active protest circumstances is encouraged in lieu of any unresearched or untaught alternative remedies. **We encourage all individuals to consult rigorously peer-reviewed scientific research before assembling their medical kits and practices** – regardless of whether the remedies chosen are based within alternative or traditional medicine. Always seek training and consultation about the use of such practices from qualified instructors prior to practicing any unfamiliar method of medicine on another individual.

## **STREET MEDIC CLOTHING & GEAR**

Street medicine is an inherently defensive action, as it is a direct response to offensive violence by the police. Medics should equip themselves accordingly. Inventory should be dictated by potential opposition, which can vary widely when confronting a heavily-armed, paramilitary police force. Equipping oneself on the side of caution is advisable, as one well-protected medic can do far more good than three medics who fell to tear gas. Below is a

guideline inventory list for a well-equipped medic. Add or remove from this list as personal weight limit, resources, expected challenges, and range of motion dictates.

1. Wear as much clothing that covers as much skin as possible, without being overly hot or restrictive. Remember: you may have to run. Most street medics will clearly mark themselves with red crosses, to aid in quick identification in crowds. Nylon will dissipate heat and sweat easily, as well as protect the skin (to some degree) against chemical agents. Cargo pants or BDUs with accessible pockets can come in handy, as can hip bags, utility belts or tackle vests

2. If you wear corrective lenses ensure that the lenses are unable to be shattered, if possible.

**DO NOT WEAR CONTACT LENSES TO A PROTEST!** Tear gas or pepper spray can become trapped between the contact lenses, and your eyes which can disable a medic.

3. Gas masks or industrial particulate respirators and sealed goggles. Respirators should have a NIOSH rating of N95 or higher, to ensure proper filtering of police chemicals.

4. Unbroken CBRN (Chemical, Biological, Radiological, Nuclear) gas mask filter, should you carry a gas mask.

5. Protective shoes that will still allow quick movement. No open-toed, strapped, or high-heeled shoes. You may need to run, and your toes will be stepped on in crowds.

6. Ace (or equivalent) bandages for strains and splinting.

7. Gauze wraps.

8. Gauze pads.

9. Nonstick pads or xeroform/adaptic pads.

10. Triangle bandage.

11. Wound closure strips.

12. Tape (paper or plastic, not electrical).

13. Examination gloves (vinyl or nitrile, to avoid latex allergies).

14. Stick-on bandages (various size and type).

15. Saline solution (contact lens solution is fine, there is no need to buy a more expensive special formula).

16. Antibiotic ointment.

17. Anti-hemorrhagic agent (Most of these are only available to military or law enforcement, but QuikClot has a "sport" version that will do the trick).

18.Sunblock with UVA and UVB protection (water or alcohol-based, as oil-based sunblock can trap teargas or pepper spray against your skin and compound their effects).

19.Bandage shears (blunt tip can be important, as a sharp tip can more easily be deliberately misinterpreted as a weapon by the police, and used to charge you with crimes).

20.Tweezers.

21.Protein bars.

22.Clean bandannas, and/or bandannas soaked in water, for handing out to other protesters as tear gas masking. These should be carried in zip-lock bags until needed, to avoid evaporation.

23.Instant ice packs.

24.Messenger bag or MOLLE pouches that can be easily accessed without the medic having to stop and take them off. Backpacks can be difficult to access while you're walking, running, or otherwise trying to keep up with your fellow activists, who may be marching, or running from danger.

25.Glucose tablets, honey packets, cake icing, or other emergency sugar supply, to treat diabetes-related hypoglycemia.

26.LAW mixture (see below).

27.Re-hydration mixture (see below).

28.Ear plugs for yourself and others in case of sound-based police weapons.

29.CPR mask or bag valve mask.

## **WHAT IS THE RECIPE FOR LAW.?**

**Liquid Antacid and Water** is a 50/50 mixture of water and an antacid containing either Magnesium Hydroxide or Aluminum Hydroxide. This remedy is used on both eyes and skin in the event of a tear gas or pepper spray attack.

A small amount applied directly to the affected area should be sufficient to reduce pain once the afflicted person has been moved to a safe location. Application of LAW mixture (especially under the eyelids) can be difficult, and it is advisable for a medic to attend training sessions by established street medic groups.

If LAW mixture is not available, milk can be used as a stop-gap in the event of a tear gas or pepper spray attack. Other alkaline solutions, such as water and sodium bicarbonate, can also be used to combat lachrymatory agents. LAW is preferred by street medic groups as a result of both scientific testing and ease of manufacture.

## **WHAT IS THE RECIPE FOR A RE-HYDRATION MIXTURE?**

Hydration in a high-energy environment is extremely important, and often overlooked. A medic's most important job will often be to make sure participants in civil action do not wear themselves out early.

Side effects of heat exhaustion can include euphoria, rage, "wooziness", irritability, panting, red flushing of the skin, and "spaciness". These symptoms can also lead to poor decision making, violence, and an inability to judge danger or to retreat from dangerous areas.

Untreated heat exhaustion can turn into the more serious condition of heat stroke.

A 50/50 mixture of water and a sport drink (or fruit juice) will be sufficient. A small pinch of salt should be added to the mixture, to replace sodium lost through sweat. Fill and label several small bottles with this mixture to pass out to those in need. If using sport drink for your mixture, avoid sport drinks with Red 5 food dye, as there is research to suggest that it can trigger manic episodes in people with certain conditions such as ADHD or Bipolar Disorder.

The number of bottles carried should vary, depending on the medic's weight limit.

See more on the treatment of heat exhaustion below.

## **TREATING COMMON PROTEST INJURIES**

Please note that this section, for the most part, does *not* cover injuries and treatment methods typically covered in most first aid courses. This section is specifically for injuries and ailments more specifically sustained during protest action.

## TREATING TEAR GAS

The most important thing to note about tear gas is that it is a tool to create fear, more than a weapon to cause damage. The loud sound of exploding canisters and the sight of a rolling cloud of gas serves to cause panic before the chemical effects even have a chance to take hold, and it is on this panic that the police rely. The most important thing to do in the event of a tear gas attack is to keep a level head. As a medic, it will be your duty to get others away from the gas, then treat them to the best of your abilities. Though banned from military use by the Chemical Weapons Convention, tear gas is legal for domestic use despite a long list of documented harmful or deadly effects.

Tear gas is often propelled by special fitted charges which, when detonated, can sound extremely similar to gunfire. Don't panic. Look up to try to spot the arc of white smoke, and attempt to warn any protesters within the anticipated blast radius. Tear gas canisters, once detonated, become extremely hot and are not safe to handle without protective gloves. This is one reason that it is important to bring or wear protective gloves to protests. Police officers using tear gas will be outfitted to protect against its effects, so throwing or kicking an active canister back into police lines should not be considered a violent or harmful action, merely a defensive one. Spotting police in these outfits can also serve as advance warning of an impending tear gas attack, allowing you to warn your fellow protesters before the canisters have actually been fired.

The initial effects of tear gas, which if left untreated will persist for up to half an hour after exposure, usually include pain in the eyes, nose, mouth and skin, profuse watering of the eyes and nose, blindness, difficulty breathing, disorientation, and panic. Again, tear gas is not intended as a weapon so much as an agent to disperse protesters and create fear among them, making it possible for an affected party to remain within the cloud so long as they maintain a clear head. Once removed from the area of the gas, the symptoms will subside on their own within approximately thirty minutes, but it is still important to act quickly to ensure the well-being of the afflicted party, if you wish them to be able to continue normally.

**NOTE:** Tear gas and pepper spray can have potentially fatal effects on people with respiratory issues such as asthma. In cases of high exposure it can cause seizures, neurological issues, or miscarriage. It is by no means a "safe" weapon, and should be treated with the appropriate gravity.

For further information see:

<http://blogs.scientificamerican.com/guest-blog/2011/11/21/about-pepper-spray/>

Though it is called a gas, tear gas is actually an aerosolized acidic powder. Designed to cause fear and pain, its acidic nature makes it relatively easy to counter with the use of a mild alkaline solution, and the powder form is easy to wash off. The easiest method in this circumstance is to use the LAW mixture, noted above. After removing the affected party to a safe location outside the field of effect, a squirt of liquid on the skin and in the eyes should serve to both neutralize the acid and wash the dust itself away completely. A mouthful of solution, swirled and spat, will serve to quickly clear the mouth. Care should be taken not to swallow, as tear gas introduced into the digestive system could have potentially harmful effects. To clear the nose, strong exhalation should be enough. The LAW mixture is not a cure-all, and will not instantaneously remove harmful effects. Remember: Tear gas is a compound specifically designed for this purpose, and countering it will always be a challenge.

To further compound matters, once a person has been coated with tear gas their clothing is contaminated until it can be washed. It will continue to be harmful to wear or handle, and should be removed and quarantined as quickly as possible to avoid causing more damage. A mild castille soap (like Dr. Bronner's), which contains fewer chemicals to potentially interact with the acid, will be enough to clean the contaminated clothing and make it suitable for future use. Instruct all affected parties to avoid touching their face or eyes until they have had a meticulous shower.

The effects of tear gas can be avoided to some extent by covering the mouth with a wet bandanna. Many anecdotal reports indicate that soaking a bandanna with vinegar has a degree of effectiveness, though there is little concrete research to support these claims. The wet bandanna method is useful only for purposes of escape, and a medic should not attempt to enter a tear gas cloud without wearing proper safety gear unless absolutely necessary.

## **PEPPER SPRAY**

Pepper spray, like tear gas, is a lachrymatory agent—a compound designed, usually for riot control or self defense, to cause extreme pain, blindness, and disorientation. Pepper spray is often deployed at protests in areas where the police cannot risk the use of tear gas, such as heavily populated areas. It is usually contained in hand-held canisters, though a mode of deployment known as the “pepper-ball” has become increasingly common in recent years. The pepper-ball consists of a load of capsaicin (the active ingredient in pepper spray) combined with a powder dye, packed into a small hard ball which is fired from a weapon not unlike a paint-ball gun. The ball breaks and explodes on contact, causing both the immediate pain of being shot with a projectile with the debilitating effects of pepper spray. This allows the

police to use pepper spray from much longer distances, as well as mark individuals (via the powder dye) for later arrest.

Though not as common, another documented method for deploying pepper spray is a thick pepper foam, deployed from a device like a fire extinguisher. It is currently unknown how widespread these devices are. Further deployment methods include backpack dispensers, explosive aerosol canisters, and helicopter drops.

Treatment methods for pepper spray exposure are largely the same as those for tear gas, and the LAW mixture will serve you approximately as well as anything else. However, because of its concentration and the way it directly attacks nerve endings, pepper spray can continue to have an effect for up to two hours after initial exposure, even with treatment. Some research indicates that simply washing with saline solution will act as a more effective treatment for eye exposure, though at time of writing this is unconfirmed.

## **ENVIRONMENTAL ILLNESS**

Environmental factors are always a serious consideration when one intends to undergo hours of strenuous outdoor activity. Hypothermia, frostbite, exhaustion, and heat stroke are all possibilities depending on the weather, and a medic should take care to amend their equipment accordingly. Keeping an eye on one's fellow protesters for signs of illness should usually be enough, and gentle suggestions to take some water, or to temporarily remove themselves to more agreeable climates, will usually be appreciated.

## **SIGNS OF HEAT ILLNESS**

Heat illness (a general term encompassing a variety of heat-related ailments) is an extremely common problem in civil action, due to the long periods of exertion protesters put themselves through with little to no hydration. Body fluids are lost through sweat and respiration, and if they are not replaced, the core body temperature can rise dangerously.

Frequent rest and re-hydration are usually enough to prevent symptoms, but be on the lookout in the event that they are not:

- Heavy sweating
- Rapid breathing or "panting"
- Faintness

- Dizziness
- Numbness, tingling
- Muscle cramping or spasms
- Dry skin
- Skin irritation, “flushing”, or rash
- Irritability
- Disassociation
- Poor judgment

## **HEAT ILLNESS PREVENTION**

Heat illness is not difficult to prevent, provided one pays sufficient attention to the body's needs. It will often be a medic's job to pay attention on behalf of other protesters, as they will likely be preoccupied. The United States Occupational Safety and Health administration provides the following guidelines for preventing heat stress:

- Know the signs and symptoms of heat illness
- Block out direct sun and other heat sources
- Rest regularly, use cooling systems
- Drink sufficient water
- Wear lightweight, loose-fitting clothes in light colors
- Avoid alcohol, caffeinated drinks, or heavy meals.

## **HYPOTHERMIA**

In colder environments, it will be your job to keep watch over your fellow protesters to ensure their safety against the elements. Hypothermia, much like heat exhaustion, is relatively easy to combat: Minor preventative actions can be taken to avoid it, but after it has taken hold the

afflicted party can simply be moved to a more agreeable climate and given easy remedies. In this circumstance, the remedy can be as simple as a warm blanket.

Medics should take care to look for the following symptoms when attempting to identify hypothermia, ordered according to increasing severity:

- Shivering
- Hypertension
- Heightened heart rate
- Confusion
- Lack of coordination
- Paleness
- Blue tinge to the extremities
- Difficulty breathing
- Amnesia
- Hallucinations
- Further lack of coordination
- “Terminal burrowing” (though it is extremely unlikely any protester will ever get to this level of hypothermia, final-stage sufferers exhibit a tendency to “burrow” behind or under objects or into soft ground)

Anyone displaying symptoms past “shivering” should be removed to warmer environments immediately, with increasing urgency as more symptoms appear. Given time and warmth (blankets and warm liquids help) they should make a full recovery.

## **BASIC BANDAGING**

Bandaging and wound treatment are taught in first aid courses. The following is extremely basic, common-sense advice but does not replace first aid training in any way. If you wish to offer serious flesh wound treatment to your fellow activists, please attend a first aid course before considering yourself capable of dressing wounds beyond a band-aid level.

Sterile bandages are ideal for this task, but in an emergency, any type of clean cloth will work. A variety of types of dressings and bandages are necessary to address injuries of different size and location, making a properly stocked first aid kit a priority for any medic.

- Clean the wound, if it is not still bleeding, with saline solution. If bleeding, apply pressure with a gauze pad or other fabric until it stops while being attentive to not inhibit blood circulation.
- Cover the entire wound using a sterile and suitably-sized dressing, such as a gauze pad or nonstick pad.
- Depending on the size of the dressing required, secure it using either tape or a bandage. Tie or tape off the bandage if required while being certain to allow for adequate blood circulation. Do not over-tighten the dressing or bandage, as this can cause additional swelling.
- If bleeding continues without inhibition seek adequate medical attention for the individual - (if qualified) continue to provide necessary care.

*\*These methods should be sufficient for most simple scrapes and scratches.*

More serious flesh wounds should be cleaned out and wrapped to protect and stabilize them to the best of your ability, while you are getting the injured person to help and safety in the meantime.

Wounds that look like they could require stitches (deep, gaping, or large wounds; wounds that don't stop bleeding on their own within a couple minutes, and so on) should be disinfected and covered to the best of your ability, after you have ensured emergency services have been called.

Even if a protester has been seriously injured, it is entirely possible (and precedented) for the police to refuse emergency teams access past their lines into "unsecured areas". Though street medics have been known to act as liaisons between protesters and police and negotiate passage for ambulances or injured persons, the possibility that advanced medical help could be denied to an injured party is always there.

## DIRECTED ENERGY WEAPONS

With the advent of massively inflated Homeland Security budgets, many police departments around the country have seen fit to invest in questionably legal crowd-dispersal equipment. This equipment is most often presented in one of two forms: the Long Range Acoustic Device (LRAD), and the Active Denial System (ADS). Both are truck- or tripod-mounted directed energy weapons, using acoustic and microwave energy, respectively. Both are specifically designed to cause pain, panic, and incapacitation when used against biological targets. While a street medic cannot be reasonably expected to deal with superior firepower along these lines, they *can* remember to be on the lookout for them, and be prepared to direct protesters away from their field of influence. For more information and pictures of what to look out for, consult your local Internet.

## STREET MEDIC PHILOSOPHY

Street medics are not trauma surgeons, nor are they a viable replacement for fully-equipped emergency services personnel, regardless of their level of experience. The job of a street medic is not to perform battlefield surgery, but to provide what care they can within the context of a chaotic situation, or (in the case of major injuries) to attempt to comfort, protect, and/or stabilize an injured party until they can be moved into professional care. To waste valuable time trying to “fix” an injury that needs an ambulance does no more good than no care at all, which makes it extremely important to recognize when an injury is beyond your abilities.

Street Medics vary in expertise and experience from rank amateurs with basic first aid kits, to Wilderness Rescuers, EMTs, and military medical professionals. At the beginning of each event, we announce and publicize the supplies and abilities we will bring to that particular protest.

We also remind activists of things they can do to take care of themselves:

- bring water
- bring a snack
- if anticipating arrest, bring three days' supply of any prescription medication you may be on, in the original prescription bottle, **with a doctor's note**. If there is potential for an allergic reaction, activists should carry their own supply of epinephrine.

Street Medics are important not only because of the physical services they provide, but because of the moral and psychological boost that the presence of support personnel imbues in a group. It is important that the other protesters feel they can rely on you, even if it's just for backup and encouragement.

Help people as much as possible, but never get in over your head. Keep your mobile phone handy in case you need to call emergency services—sometimes just being there with someone, able to calmly relay information about their location and condition to a dispatcher, is a service no one else can render.

## **A WORD TO THE WISE**

### **A NOTE ON POLICE / MILITARY OPPRESSION**

Street medics are often specifically targeted by police. The police “disperse a crowd” via fear, injury, incapacitation, and arrest. Street medics provide the means for protesters to get back up, and keep marching - even after tear gas or pepper spray attacks. This can make medics priority targets for arrest to police.

During the April 2001 protest of the Free Trade Area of the Americas agreement in Quebec City, police shot chemical-weapons canisters directly at the medics themselves after they realized the medics were re-commissioning activists who'd been taken out with tear gas.

Additionally, police departments make a point of publishing the names and photos of arrested protesters for reasons of shaming them, and discouraging new activists from joining future protests.

### **A NOTE ON THE RISK OF ARREST AND FREEDOM**

Being arrested in furtherance of a cause or for solidarity with one's fellow protesters is, generally, a noble act. That being said, a medic who intentionally subjects themselves to arrest to prove a point only prematurely removes themselves from action, and deprives comrades of future treatment, should they become injured.

In the event of your arrest, it is generally advisable to remain completely silent until you have the opportunity to request and speak with a lawyer. Writing the phone number for your organization of choice on your arm – and in another concealed location upon your body - with a marker is a sound course of action. It is unlikely that the police will facilitate to your forgetfulness once you are in their custody, and strip searches and appropriation of clothing/personal items is common during arrests.

Police are known for capriciously adding as many additional charges as they can for protesters who cause them trouble (that is to say, all of them), making struggling, threats, or false names ill-advised. Barring extenuating circumstances or punitive caprice, one can expect to be cited out of jail within a matter of hours after their arrest.

## **THINGS TO THINK ABOUT AND REMEMBER**

Encrypt and lock your cell phone, don't consent to searches, ask for a lawyer (look up the National Lawyer's Guild number for your area), and do not talk to the police.

The police are legally allowed to lie to you in furtherance of an investigation, and you are better off avoiding the risk entirely. Police are specifically trained to interrogate and intimidate individuals, especially when said individuals choose to exercise their rights.

**You are not legally required to speak to the police without a lawyer present.**

## **GETTING STARTED AS A STREET MEDIC**

1. If you have not been to a protest involving an adversarial police force before, it is advisable that you do so before trying to act as a street medic. Participating in a protest will give you valuable experience in terms of predicting the actions of both protesters and police. It is always advised to have an action buddy when maintaining a medic role.

2. Once you feel ready to show up as a medic, it's a good idea to get some training. Street medics vary widely in terms of skills and experience, ranging from basic first aid practitioners to military- or professionally-trained medics. Basic First Aid certification will give you most of the skills you will need to use as a street medic, however it is advised that one attends a Street Medic Training course. These are available through your local action medic collectives. One should also shadow a trained medic at an action prior to maintaining the role.

3. Street medics often use an additional set of skills not taught in first aid courses, such as teargas decontamination and crowd assessment. Search social networking or activist sites in your area to see when street medic training sessions are being held, then do your best to attend. Bring food if you really want to make a good impression.

4. Assemble your gear, and keep it organized and ready to go. You don't know when you're going to hear about a protest action (especially with Occupy, which tends to have events spring up in moments), and the last thing you want is to have to scramble around looking for your first aid kit when you hear the police are launching gas at a march.

5. Do your research. As a medic it will be your job to keep an eye on the police, and being able to accurately determine the weaponry they're carrying (and thereby the effects you should be prepared to treat) should be one of your most solid skills. This will involve looking at a lot of "less-lethal" manufacturing sites, as well as watching potentially troubling footage of protest injuries. We apologize in advance.

6. There are many other resources available online to help prepare medics for protest action. The best thing you can do is to get in touch with your local street medic group and ask them what it would take to join up. They will be able to give you much deeper level of instruction than we will ever be able to accomplish online.

-- SPACE BELOW BLANK FOR NOTES AND RESOURCES --

## **ADDITIONAL RESOURCES AND TRAINING:**

**Just as street medics themselves are not a viable replacement for emergency services, this guide in no way approaches a replacement for actual first aid and street medic training.** It exists to serve as a basic introduction to both the idea of street medics, and to the Paper Revolution collective community, specifically.

For further information on street medic training in your area, contact the following groups:

### **•PORTLAND, OR**

Rosehip Medic Collective - <http://www.rosehipmedics.org/>

Black Cross Collective (Currently inactive) - <http://www.blackcrosscollective.org/>

### **•SEATTLE, WA**

Seattle Street Medical Collective - <http://seattlemedics.org/>

### **•OLYMPIA, WA**

Olympia Street Medic Collective - <http://blog.olysmc.org/>

### **•SAN FRANCISCO, CA**

Bay Area Radical Health Collective - <http://groups.yahoo.com/group/barhc/>

### **•DENVER, CO**

Denver Street Medics - <http://streetmedic.wordpress.com/>

### **•EAST COAST, US**

Mutual Aid Street Medics - [masm@riseup.net](mailto:masm@riseup.net)

### **•CHICAGO, IL**

Chicago Action Medics

### **•BLOOMINGTON, IN**

Heartland Action Medical Resistance

### **•MINNEAPOLIS, MN**

North Star Health Collective - <http://northstarhealth.wordpress.com/>

### **•BOSTON, MA**

Boston Area Liberation Medic Squad - <http://www.bostoncoop.net/balm/>

•**WASHINGTON, DC**

District Action Medical Network - <http://damn.mahost.org/>

•**NEW YORK, NY**

Medical Activists of New York - <http://www.takethestreets.org/>

Star of Resistance Medics - <http://www.freewebs.com/stormnyc/>

•**PITTSBURGH, PA**

Three Rivers Action Medics

•**PHOENIX, AZ**

Phoenix Urban Health Collective - <http://puhc.wordpress.com/>

•**MELBOURNE, AUSTRALIA**

Activist Medics Network

•**SYDNEY, AUSTRALIA**

NSW Street Medics

•**LUDWIGSBURG, GERMANY**

Demosaniteter.de - <http://www.demosanitaeter.de/>

•**BERLIN, GERMANY**

Strassenmedizin - <http://www.nadir.org/nadir/initiativ/sanis/index.htm>

•**MANCHESTER, ENGLAND**

UK Action Medics - <http://www.actionmedics.org.uk/>

•**FOR ADDITIONAL FREE STREET MEDIC RESOURCES:**

Paper Revolution Street Medic Guide - [www.PaperRevolution.org/Street-Medic-Guide](http://www.PaperRevolution.org/Street-Medic-Guide)



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[contact@paperrevolution.org](mailto:contact@paperrevolution.org)

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## **MEDIC GUIDE VERSION CHANGE-LOG:**

v1 – Initial Release

v2 – Many small changes to grammar and phrasing. Expanded on equipment section. Expanded LAW mixture section. Reorganized section order. Removed nonworking links.

v3 – Minor revisions to phrasing and alternative equipment. Furthered disclaimers. Replaced isopropyl alcohol in the equipment list and “basic bandaging” with saline solution, which is less abrasive. Added xeroform/adaptic pads to equipment list. Rewrote hypothermia section to be more clear. Added section on Directed Energy Weapons. Included a note on essential oil allergies and scientific medicine.

v4 – Tweaked inventory section regarding gas masks and respirators. Removed mentions of sterility, it's not realistically going to happen. Re-worked section on vinegar bandannas to better reflect established science. Removed irrelevant information. Added a short section on saline eyewashes for pepper spray. Added a short section on the potentially fatal effects of tear gas. Added a rundown section on arrests. Cleaned up document structure, to an extent.

v5 – Continued revisions of grammatical errors and inconsistencies. Removed additional irrelevant information in preparation of v6 distribution. Located source content.

v6 – Expanded on street medic history. Added definition info, history info, get involved info, modified alternative medicine statement, removed irrelevant movement info. Refined grammatical issues, corrected spelling mistakes changed order, and re-formatted layout. Inserted graphics. Formatted document for printing and .pdf distribution.