Herbal First Aid
Wound Care
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Introduction
This handout covers basic wound care and herbal medicines for treating wounds. As with all first aid events, it is important to evaluate the seriousness of the particular situation, to assess your abilities, and to seek help when needed.

Wounds are one of the most common first aid conditions. These are injuries where the skin is broken. They run the gamut from simply being an annoyance to being potentially life threatening. There are many types of wounds, including abrasions (“road rash”), lacerations (deep cuts), punctures (an object piercing the skin), and animal bites. The basic goal of wound care is to prevent infection and have the area heal efficiently.

Wounds can show up at any time, so it is helpful to know how to treat them. Besides classes, one of the best ways to learn herbal wound care is to consistently carry a first aid kit. This will allow you to help out when the situation arises. Also maintain a well-stocked herbal medicine cabinet at home, a smaller one for your car (that can withstand temperature changes), and one with the bare necessities for hiking. When an incident happens, you will be prepared and continually develop your skills.

All kits should have the basics besides herbal medicines. Also, any first aid kit should carry personal medicines and be geared for the situations you are most likely to encounter.

Non-herbal First Aid Supplies
Basic First Aid Kit
1. Antiseptic wipes
2. Bandage strips
   (various sizes and types)
3. Cold packs
4. Disposable gloves
5. Dressings
6. Duct tape
7. Elastic wrap bandages
8. Epinephrine injector
9. Flashlight and extra batteries
10. Gauze pads (various sizes)
11. Headlamp
12. Personal medicines
13. Scissors
14. Tape
15. Tweezers
Additional First Aid Supplies

1. Bandana
2. Basin for soaks
3. Butterfly bandages
4. Cloth for compress
5. Elastic bandage
6. Eye cup
7. Face mask
8. Hot water bottle
9. Hydrogen peroxide
10. Irrigation syringe
11. Matches, lighter
12. Multi-tool
13. NSAIDs
14. Povidone iodine
15. Rubbing alcohol
16. Scalpel
17. Self-adhesive bandage
18. Soap
19. Steri-strips
20. To-go bottles
21. Wildcrafting tools

General Wound Considerations

1. Use disposable gloves whenever you are in contact with other people’s body fluids, including blood, pus, and saliva.
2. Wash your hands and change gloves between patients.
3. Assess every situation for its potential seriousness and complications.
4. Consider other patient factors. Do they have any conditions (i.e., diabetes) or are they taking any drugs (ex. chemotherapy) that may impair wound healing?
5. Assess wounds for potential scarring or aesthetic problems.
6. Decide your priorities and send for help if merited.
7. Learn to maintain your composure in unruly situations.
8. Learn how to volunteer people in case you need assistance.
10. A tetanus shot may be warranted; discuss this with your patients.
11. Determine the seriousness of a wound and any possible damage to underlying tissue such as tendons, muscles, or nerves.
12. Assess the potential for infection and scarring.
13. Will the wound need stitches?
14. If the wound does not heal, consider what may be impairing its recovery such as infection or an immune disorder.
15. Symptoms that indicate infection include malodorous discharge, continual bleeding, increasing pain, wound worsening, increased levels of pus, and a red line traveling from the wound toward the torso.
16. Symptoms of systemic infection include fatigue, lethargy, fever, chills, and swollen lymph nodes.

When to seek additional help

1. If patient feels the need for further diagnosis or treatment
2. If injury is beyond your experience or capabilities
3. If the pain is extensive and/or persistent
4. If there is extensive bruising
5. If the wound requires stitches
When to consider stitches
The goal of stitches (also called sutures) is to close wounds so they heal quickly and reduce the possibility of scarring and infection. Consider stitches:
1. If the wound cannot be held closed by bandages
2. If the wound is deep and penetrates into fat, muscle, tendon, or bone
3. If the wound has jagged edges or is very wide
4. If the wound is over an area where the skin separates easily, such as joints
5. If the wound is on the face or any area where there is a potential for scarring that will affect appearances
6. If the wound continues to bleed even after pressure has been applied

General Treatment Protocols
1. Consider the therapeutic categories for each first aid situation and the herbal medicines you have on hand. The main therapeutic categories for wound care are antiinflammatories, antimicrobials, antiseptics, anxiolytics, astringents, pain aids, trauma aids, and vulneraries.
2. Wash the wound with warm water; try to remove all dirt and debris. Use mild pressure or gentle scrubbing if needed. When using tweezers, disinfect them first with rubbing alcohol or heat.
3. Clean the wound thoroughly, removing any extraneous matter that may cause infection or prevent the wound from healing.
4. Gently pat dry the wound.
5. Apply firm pressure with a clean cloth or gauze to stop bleeding. Maintain the pressure until the bleeding stops.
6. If the cut is on the hands, arms, feet, or legs, elevating it above the heart will slow down bleeding.
7. Stop excessive bleeding with hemostatic medicines.
8. Give internal pain relieving and trauma herbs if needed.
9. Apply antiseptics to disinfect wounds.
10. Apply strained liquid preparations such as teas, tinctures, and liniments directly onto wounds or on the dressing.
11. Internal antimicrobial and immunostimulating herbs may help against infection and speed recovery.
12. Use antiinflammatories to decrease inflammation and accelerate recovery.
13. External astringent washes can draw tissues closer and reduce inflammation and bleeding.
14. Apply herbs topically before dressing the wound.
15. Use a disposable razor to shave hairs that may get into the wound or prevent the bandage from sticking.
16. Dress the wound; herbal preparations can be put on the gauze.
17. Avoid making the dressing too wet, as that will impede the healing process.
18. Propolis and conifer resins can help tape or bandages adhere to the skin. They also have antiseptic qualities.
19. Check the dressing and wound regularly for infection, and change the dressing as needed.
20. If the wound becomes infected, clean and probe for foreign material and then re-dress it.
21. If infection spreads, especially with signs of a systemic infection such as swollen lymph nodes, seek assistance.
22. Learn to apply Steri-Strips, butterfly, and other types of bandages.
23. Consider using self-adherent wrapping (such as Vetrap) to hold bandages in place instead of tape. Tape can be painful to remove, especially if the wound needs to be checked frequently.
24. When wrapping wounds, there is an important balance between the bandage being too tight and too loose. It should be tight enough to hold the bandage in place against the skin and loose enough for expansion, which may happen with inflammation. Bandaging should configure with the contours of the body.

Phases of Wound Healing
The wound healing process is often divided into three major phases. There is overlap among these stages.
1. **Inflammation**—The initial phase of wound healing. This includes blood clotting and local blood vessels dilating, allowing various cells and processes into the area that promote wound healing and prevent infection. This is the stage with the most physical symptoms including pain, swelling and redness.
2. **Proliferation**—During this phase, the tissue is “rebuilt” as new tissue and blood vessels develop. During this process, the tissue looks uneven and reddish.
3. **Maturation** (or remodeling)—This is the final phase and starts during the proliferative phase. During this process, which may last for months, the scar that was formed is remodeled into more regular tissue.

General Herbal Medicine Considerations
1. When evaluating treatments, consider the therapeutic categories.
2. Pain remedies are an important consideration with most first aid situations, including wounds. It is helpful to know different specific remedies from a variety of pain relieving categories.
3. Test small amounts of pain tinctures initially to see if they are helpful. Moderate the dosage accordingly.
4. Although tinctures are often effective antiseptics, the alcohol in them can slow down tissue repair.
5. Do not apply comfrey initially to a wound, especially if it is deep or liable to become infected. Infection can proliferate underneath the superficial
skin growth initiated by comfrey.

6. Ask patients what other medicines they are taking and factor this into your treatment.

7. Have to-go bottles to put liquid medicines in for patients to take later.

8. Put labels on each patient’s to-go bottles. This can include:
   - Specific dosage directions, including how much and how often to take their medicines. Ask each patient to repeat the directions back to you to make sure they understand. This is especially important with stronger herbal medicines.
   - Write the ingredients on the label. This makes it possible to replicate the formula if they need more later.

9. Know when to use or avoid salves and other “greasy” applications on wounds, as they can form a film allowing bacteria to grow underneath. Salves are sometimes better used around an open wound (in the reddened area), and tinctures used directly in the puncture wound initially.

10. When using salves, use a clean applicator each time to remove the contents from the jar to avoid contamination.

11. Avoid putting powders directly into wounds, especially deep ones.
   - The powders will need to be removed or absorbed for the wound to heal effectively.
   - This may delay wound closing and create an opportunity for infection and/or scarring to take place.
   - If there is an obvious infection and only powders are available, they could be used and irrigated out later.

**Tincture Considerations**

1. Before giving anyone a tincture, let them know it contains alcohol (ethanol). For some people, no amount of alcohol is acceptable. Since many people do not know what tinctures are, it is helpful to say directly that it contains alcohol. Some people will be puzzled by this, but those who avoid drinking alcohol will appreciate you letting them know.

2. It is helpful to have remedies for common ailments in a non-alcohol form such as glycerin, capsules, powders, and tea.

3. Tinctures are often strong tasting, and it is helpful to dilute the medicines before administering.

4. The tincture can be put in a small disposable cup with some water added to it. The cup can then be refilled with water as a chaser.

5. Reasons for using tinctures in first aid:
   - They are convenient and have no special storage requirements.
   - They are ready to administer and do not need further preparation.
   - They are concentrated, and smaller amounts can be effective.
   - It is easy to have an assortment available to prepare a personalized formula.
6. There is a lot of individuality when it comes to how much and how often to use a specific medicine for an individual. For this reason it can be helpful to initially try a small dose of a medicine to see if it helps with acute symptoms such as pain and does not cause any unwanted effects such as excess sedation.


**Tincture Calibrations**

Below are basic calibrations describing how many milliliters (ml) and drops are in a half-full dropper of the three most common size droppers for dispensing tinctures. A half dropperful is used as a practical measurement, as it is difficult to fill a dropper to the top.

- 1 oz dropper when ½ full is about 1 ml (about 20 drops)
- 2 oz dropper when ½ full is about 1 ml (about 20 drops, the same as a 1 oz dropper)
- 4 oz dropper when ½ full is about 1.5 ml (about 30 drops)

**Tincture Dosage Guidelines**

These dosage guidelines are meant as a starting point when dispensing specific herbal tinctures. The dosage will vary depending on the individual being treated as well as their health condition.

The term *plateau* used below indicates that the maximal medicinal effect of a specific medicine has been reached and giving more will not further improve symptoms. *Loading dose* describes the initial dosage given of a specific medicine. It is often larger than later doses to effect a bigger initial change.

1. **Drop dose**—These are strong medicines and should only be used by experienced practitioners. They are used in small amounts and can be poisonous. A possible dosage is 3-5 *drops* a few times a day.

2. **Low dose**—These medicines work well at lower dosages and do not usually cause harmful effects in a medium dose range. The starting dose is often about 5 drops with more given as needed until a desired effect or a plateau is reached. The difference between *low dose* and *drop dose* is toxicity. More of the low dose medicines can be given to reach a desired effect, whereas the drop dose medicines have to be stopped after a small amount is taken to avoid harm.

3. **Medium dose**—These medicines are relatively safe, and the starting doses can begin at ½–1 ml, with a similar amount given incrementally until a desired effect or plateau is reached.

4. **Large dose**—These tinctures are very safe and often work best in larger doses. The loading dose begins between 1 and 3 ml and more is taken as needed. Many of the immune remedies fit into this category. There is no obvious plateau response, as their function is not immediately seen.
Soaks and Compresses
These are useful external treatments for wounds as they allow the plant’s medicinal constituents to penetrate deeper and help float out foreign material. Soaks and compresses are basically strong tea preparations. They are easy to prepare and need only basic equipment. With soaks, the wound is immersed directly into the tea. Compresses are prepared by soaking a cloth in the tea and then applying the cloth directly to the wound. In practical terms, soaks are often used on lower extremities such as hands, forearms, and feet because they are easier to put into a tub of tea.

The equipment includes a heat source, water, a container for boiling water, herbs, and a tub to soak the body part in. Two and a half gallon plastic tubs are useful for hand and foot soaks (the most commonly needed). You may need a bucket to soak a wound further up on a leg. To clean the container, use soap and water and then bleach or iodine to sterilize it. Be sure to clean thoroughly between each patient and wear gloves while cleaning. An alternative to tub containers is to pour the tea into a thick plastic garbage bag and soak the body part in the bag. An advantage of this is that the bag can be thrown out afterward.

Both soaks and compresses should be very warm, but not too hot, which may damage the tissue. Once used, the tea should not be reused. After preparing the tea but before using it, pour some of the tea into a cup for the patient to drink, as most of these teas are useful internally as well as externally.

Tinctures can be put directly into the water as a substitute for the herb tea, but this can be expensive, as a lot of tincture may be needed to make it medicinally active. But this is a useful alternative when all you have are tinctures.

Some of the categories of plants for soaks are antiseptics, antimicrobials, antiinflammatories, astringents, and vulneraries.

Soak Preparation
Boil water and pour it onto the medicinal plants. Use enough plant material to make a strong tea. Pour the tea into an appropriate sized container. Soak the wounded area for at least 15 minutes, sometimes a few times daily with changes of tea water in between. It is helpful if the soak water is kept warm to hot, so refresh the water to keep it warm as needed.

Compress Preparation
This is similar to soak preparation, but the tea is usually made in a pot so that it can be kept warm on a stove. Soak a clean cloth in the tea and remove it. When it is still very warm, but not too hot, apply it directly to the wound. A hot water bottle can be put on top to keep it warm. Refresh the cloth in the tea every 5–10 minutes so that the compress tea remains medicinally viable.
Activated Charcoal Poultice Preparation

Activated charcoal is used to adsorb a wide variety of toxins and other substances. Adsorption is the property of holding substances tightly to a surface. It is different from absorption. For example, a sponge absorbs water throughout its body.

The activated charcoal poultice is applied after the wound has been cleaned. It is spread on the dressing before it is affixed.

There are two types of activated charcoal poultices, a direct preparation and a “sandwich” preparation. The advantage to the direct preparation is that it may adsorb more infectious matter, but the powder also gets into the wound and will need to be cleaned out. With the sandwich poultice, less powder gets in the wound, but it may not be quite as effective. Take these into consideration when deciding which type to use in wound treatment.

Preparation for both of these starts with about a 2-3 mm thick layer of the moistened powder (“slurry”) spread on a gauze pad. With the direct preparation, the slurry side is placed directly on top of the wound. With the sandwich poultice, another gauze is placed on top of the moistened powder so the powder is in between the two gauze pads. This is then placed on top of the wound. It needs to be moist enough to wick up through the gauze. Generally the slurry provides enough moisture. Try to avoid either of them being too wet, as this impairs the ability of the wound to heal.

Pain Remedies

There are many categories and therapeutic approaches in addressing the relief of pain with herbal medicine. The initial focus is on the type of pain being treated and how the specific medicine may affect the individual.

It is helpful to learn the subtleties of each of the plants used for pain relief. The more the clinician understands the distinct properties of the remedies, the more adept they will be in choosing the proper remedy and the appropriate dosage.

Understanding the therapeutic categories of pain relievers is very helpful. These categories include antispasmodics, skeletal muscle relaxants, and general pain relievers. It is also important to know which herbal medicines are more strongly sedative to avoid unknowingly altering an individual’s cognitive function.

The amount used (the dosage) plays an important role when administrating pain remedies. The effects of different pain remedies are felt at widely varying dosages. Some individuals will feel a change with a small quantity, whereas others will need much more to achieve the same effect. One way to initially test a specific remedy is to give the patient a few drops and then observe and ask if there is any subjective response. While the effect of such a minimal dosage may be subtle, sometimes small changes in the pain may be felt, and the dosage can be adjusted accordingly or a different herbal remedy tried.
Animal Bites and Scratches
The bites and scratches of animals require special precautions and treatments. Aside from pain and wound management, they often become infected due to the mouth flora deposited in the wound. If the skin is broken, all animal bites should be treated promptly and aggressively, assuming bacteria may infect the wound. Animal scratches may not be as deep as wounds, but they often leave jagged, hard-to-mend cuts that need to be monitored for infection and possible scarring. Signs of a local infection usually occur within one to three days after the bite or scratch and include swelling, tenderness, redness, warmth, pus, and pain. If the infection becomes systemic, the symptoms may include fever, swollen lymph nodes, headache, and fatigue. At this point professional help may be necessary.

Questions after an Animal Incident
1. Obtain information about the animal situation.
   • What bit them?
   • Was it a wild or domestic animal?
   • Was the animal someone’s pet? Is it loose? Do they know the owner?
   • What is the current situation of the biting animal and are others in danger?
   • Could the animal be rabid or otherwise unsafe?
2. If needed, send people out to make sure the situation is safe and obtain necessary information on the animal.

General Animal Wound Treatment
1. Wash hands and put on gloves.
2. Help with the patient’s immediate needs.
3. What is the severity of the wound and should they be sent for treatment elsewhere?
4. How deep is the bite and where is its location on their body?
5. Clean and irrigate the wound.
6. Is there any damage to nerve, muscle, joint, tendon, or other tissue?
7. Did the person receive any other injury during or after the encounter?
8. If an animal scratch has broken the skin the risk is similar to a bite. Follow the bite protocols.
9. Stop bleeding with clean gauze and pressure. If this doesn’t work, use hemostatic agents.
10. Remove (debride) any damaged and devitalized tissue to reduce the possibility of infection and promote wound healing.
11. Probe and remove any foreign material.
12. Clean the wound thoroughly again and redress the wound.
13. Unwrap bandages at least once a day for the first few days to inspect the wound and see if there are signs of infection. With bite and scratch wounds, infections may not take hold until two to three days later.
14. Look for signs of local and systemic infection.
15. Re-clean the wound and apply fresh herbal medicines before re-wrapping.
16. Give internal medicines to take throughout the day to help prevent infection.
17. Keep the wound clean and re-dress it when needed.

**Herbal Treatment for Animal Bites and Scratches**

The order of the below treatment strategies may shift depending on the situation.

1. Decide on the most important therapeutic categories.
2. Treat pain and trauma with sedatives, anxiolytics, general pain relievers, and trauma aids.
3. Administer antimicrobial internal medicines. If there is a history of festering wounds, use immunostimulating medicines as well.
4. Soak the wound for up to 20 minutes in a very warm antiseptic herbal soak once or twice daily. Do this for at least 2–4 days depending on how the wound is healing.
5. Categories of herbs for soaks and compresses include antimicrobial, antiseptic, antiinflammatory, astringent, and vulnerary herbs.
6. Prepare and apply an activated charcoal poultice. Wrap snuggly into place.
7. When applying bandages, take inflammation into account, which may add pressure. Do not wrap too tightly, nor too loosely, which will allow dirt into the wound.
8. The patient may need pain, sleep, and trauma aids for a few days.
9. Internal antimicrobial herbal medicines should be taken every two to four hours for a few days, with lessening dosage over time.
10. Unwrap and check wound for signs of infection at least once a day until the wound is healing well. Apply fresh poultices when re-wrapping.
11. When treating scratches, follow bite protocols. Topical cell proliferants such as comfrey can be applied if the wound is not too deep and there is little chance of infection.

**Medicinal Preparations**

**Internal**

- Capsule
- Glycerite

**Powder**

- Tea

**Tincture**

**External**

- Compress
- Essential oil
- Infused oil

**Liniment**

- Poultice

**Soak**

- Salve
Preparation Descriptions
1. Capsule—Powdered plants put into a capsule
2. Compress—A cloth soaked in a strong tea and applied topically
3. Essential oil—Concentrated aromatic oils distilled from plants
4. Glycerite—Plants prepared in vegetable glycerin
5. Infused oil—Plant prepared in a fixed oil (i.e., olive oil); for external use
6. Liniment—Plants prepared in isopropyl (rubbing) alcohol; for external use
7. Poultice—Plants cut up and/or cooked and applied topically
8. Powder—Plants ground into powder form
9. Salve—An infused oil with beeswax added
10. Soak—A strong tea where the body part is placed directly in the fluid
11. Tea—Plants prepared in water
12. Tincture—Plants prepared in ethanol (drinking alcohol)

Therapeutic Categories
These categories group herbal medicines based on similar therapeutic actions. This is helpful when evaluating treatment, as it expands the options rather than focusing on a specific herbal remedy, which may not be accessible. Note that some plants fit into a few categories. This can be clinically relevant when deciding which plants to use for a situation as it means fewer plants may be necessary.

Sometimes the type of remedy is determined based on the dosage. For instance, a plant that may be sedative at a low dosage may also be a sleep aid at a larger dose.
1. Adsorbent—Attracts and holds foreign material
2. Anesthetic—Reduces local sensation
3. Antiinflammatory—Reduces inflammation
4. Antimicrobial—Inhibits or kills microorganisms
5. Antiseptic—Topical antimicrobial agent
6. Anxiolytic—Reduces anxiety
7. Astringent—Constricts and tightens body tissues, reduces discharges
8. Circulatory stimulant—Stimulates circulation
9. Demulcent—Soothes mucous membranes often with a mucilaginous texture
10. Emollient—Skin softening, a moisturizer
11. Hemostatic—Stops bleeding
12. Immunostimulants—Increase various immune system components
13. Pain relievers—General pain reliever
14. Rubefacient—Stimulates local blood vessels causing skin reddening
15. Sedative—Calm and reduces excitability, tranquilizing
16. Sleep aid—Helps with sleeping
17. Trauma aid—Helps with recovery from shock and trauma
18. Vulnerary—Wound healing agent
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Rubefacient/Circulatory Stimulant
Cayenne
Mustard
Ginger
Nettles

Sedative/Sleep aid
California poppy
Kava kava
Skullcap
Hops
Marijuana
Valerian
Jamaican dogwood
Passionflower

Vulnerary
Aloe
Comfrey
Marshmallow
Arnica
Echinacea
Plantain
Calendula
Gotu kola
St. John’s wort
Chickweed
Mallow
Yarrow

Selected Herbal Medicines
1. Activated charcoal—Adsorbent; powder, compress; medium to large
dose; attracts and holds a number of poisons; used internally and
externally
2. Aloe gel or fresh plant (Aloe spp.)—Demulcent, emollient; gel, poultice;
medium to large dose; used internally (gel) as a digestive demulcent; used
externally (gel, poultice) for sunburn and other burns
3. Anemone (Anemone spp.)—Anxiolytic, trauma aid; tincture; low dose;
useful for acute anxiety, panic attacks, and trauma
4. Arnica (Arnica spp.)—Caution with internal use; antiinflammatory;
tincture, liniment, oil; drop dose (for internal use); for inflammation soon
after soft tissue injury (sprains, etc.) and for swollen wounds; externally,
larger amounts can be applied; avoid using Arnica directly in open
wounds
5. California poppy (Eschscholzia spp.)—Anxiolytic, sedative, sleep aid;
glycerite, tincture; medium to large dose; useful for reducing anxiety and
for help with sleep; large amounts, up to 5 ml per dose, may be needed
6. Chaparral (Larrea tridentata)—Antimicrobial, antiseptic; capsule,
compress, glycerite, infused oil, liniment, tea, tincture, soak; low to large
dose; internal use may be limited by its strong flavor; for internal and
external infections
7. Comfrey (Symphytum spp.)—Caution with internal use (liver damage)
and external use (may exacerbate infection); antiinflammatory,
demulcent, vulnerary; capsule, compress, infused oil, powder, tea, soak;
medium to larger amounts; limit internal use to 2 weeks; useful for soft
tissue injuries, breaks, and bruising; should not be applied directly over
wounds where infection may occur
8. **Echinacea** (*Echinacea* spp.)—Antimicrobial, immunostimulant, antiinflammatory, vulnerary; glycerite, compress, tea, tincture; medium to large dose; immune system stimulant helpful for infections and wound healing; large frequent doses may be helpful; local applications useful for wounds
9. **Goldenseal** (*Hydrastis canadensis*)—Antimicrobial, antiseptic; capsule, glycerite, salve, tincture; low to large dose; for infections; internal and external use
10. **Gotu kola** (*Centella asiatica*)—Vulnerary; capsule, infused oil, powder, tea, tincture, salve; medium dose; for wound healing; internal and external use
11. **Hops** (*Humulus lupulus*)—Sedative, pain relief, sleep aid; glycerite, tea, tincture; low to large dose; sedation helpful for pain relief and to help with sleep
12. **Immune formula**—Immunostimulant; glycerite, tea, tincture; medium dose; combination of immune-boosting herbs for prevention, infection, and wound healing; may include Astragalus, Echinacea, Gotu kola, Reishi, Oregon graperoot
13. **Jamaican dogwood** (*Piscidia piscipula*)—Anxiolytic, pain relief, sleep aid; tincture; medium to large dose; good general pain remedy; combines well with other pain relievers; also helpful for relaxing and sleep
14. **Kava kava** (*Piper methysticum*)—Anxiolytic, pain relief, sleep aid; capsule, glycerite, powder, tea, tincture; low to large dose; useful relaxing medicine for pain and sleep
15. **Licorice** (*Glycyrrhiza* spp.)—Antiinflammatory; capsule, powder, tea, tincture; medium to large dose; use caution for long-term use with hypertension; a good general antiinflammatory
16. **Lobelia** (*Lobelia inflata*)—Anxiolytic; tincture; low dose; useful calming remedy in small amounts by itself or combined with other anxiolytics
17. **Meadowsweet** (*Filipendula ulmaria*)—Antiinflammatory, pain relief; glycerite, tea, tincture; medium to large dose; larger doses may be useful; well tolerated general antiinflammatory
18. **Oregon graperoot** (*Berberis* spp.)—Antimicrobial, antiseptic; compress, glycerite, tea, tincture; medium to large dose; useful for a wide range of infections; larger doses may be helpful; internal and external use
19. **Pain formula**—Pain relief; glycerite, tincture; low to large dose; a combination of sedative and pain relief herbs for various pains and trauma; may include California poppy, Hops, Kava kava, Lobelia, Jamaican dogwood, Skullcap, and Valerian
20. **Propolis** (Bee resin)—Tincture; antimicrobial, antiseptic; low to large dose; external use; a useful antiseptic wound covering, stickiness helps bandages adhere to skin
21. **Silk tassel** (*Garrya* spp.)—Pain relief; tincture; low to medium dose; a good general pain reliever
22. **Skullcap** (*Scutellaria* spp.)—Anxiolytic, sedative, pain relief, sleep aid, trauma aid; glycerite, tincture, tea; low to large dose; large doses may be useful; a good general pain reliever also helpful with anxiety; well tolerated and works well in combination with other similar acting plants

23. **Valerian** (*Valeriana officinalis*)—Anxiolytic, sedative, pain relief, sleep aid; capsule, glycerite, tincture; low to large dose; one of the most useful sleep aids, also helpful for pain and anxiety; use caution, may cause agitation, start with a low dose and look for adverse reactions

24. **Wild lettuce** (*Lactuca* spp.)—Pain relief, sedative; tincture; medium to large dose; useful for physical pain

25. **Willow** (*Salix* spp.)—Anti-inflammatory, pain relief; capsule, compress, tea, tincture, soak; large dose; a useful all-purpose anti-inflammatory for swelling and pain

26. **Yarrow** (*Achillea millefolium*)—Anti-inflammatory, antimicrobial, antiseptic; compress, glycerite, infused oil, liniment, poultice, salve, tea, tincture; a useful and commonly found plant for infections; good for soaks and compresses; internal and external use

27. **Yunnan Baiyao**—Chinese patent formula; hemostatic; pill, powder; used internally and externally to stop bleeding

**Combination Formulary**

These are examples of possible combinations for different first aid wound situations. Depending on the herbal medicines you have available, different plants and combinations can be utilized to create effective formulas.

**Teas**

1. **Infection tea blend**—Chaparral, Echinacea, Yarrow, Oregon graperoot
2. **Relaxing tea blend**—Oatstraw, Lemon balm, Lemon verbena, Rose, Chamomile, Passionflower
3. **Pain relief tea blend**—Skullcap, Hops, Marshmallow, Kava kava
4. **Anti-inflammatory tea blend**—Licorice, Marshmallow, Comfrey, Calendula, Yarrow

**Tinctures**

1. **Pain relief tincture**—Valerian, Jamaican dogwood, Hops, Skullcap
2. **Antiseptic tincture (topical use)**—Chaparral, Oregon graperoot, Echinacea, Propolis, Witch hazel
3. **Trauma tincture**—Damiana, St. John’s wort, Lemon balm, Lavender, Skullcap

**Liniments** (for topical use)

1. **Arnica liniment**—Arnica
2. **Wound liniment**—Propolis, Chaparral, Goldenseal, Witch hazel, Echinacea, Cayenne
Oils and Salves (vitamin E is often added to these as a preservative)

1. Arnica & St. John’s wort oil—Arnica, St. John’s wort
2. Bruise salve—Arnica, St. John’s wort, Calendula, Yarrow
3. Trauma oil—St. John’s wort, Arnica, Valerian, and Tea tree and Wintergreen essential oils
4. Vulnerary salve—Calendula, Chickweed, Comfrey, St. John’s wort

Medicinal Plants

Anemone—Anemone spp.  Motherwort—Leonurus cardiaca
Astragalus—Astragalus spp.  Myrrh—Commiphora myrrha
Black cohosh—Actaea racemosa  Nettles—Urtica dioica
Blue vervain—Verbena hastata  Oak—Quercus spp.
Calendula—Calendula officinalis  Oregon graperoof—Berberis spp.
California poppy—Eschscholzia spp.  Osha—Ligusticum porteri
Catnip—Nepeta cataria  Passionflower—Passiflora incarnata
Cayenne—Capsicum annuum  Plantain—Plantago spp.
Chamomile—Matricaria chamomilla  Poplar—Populus spp.
Chaparral—Larrea tridentata  Prickly ask—Zanthoxylum spp.
Chickweed—Stellaria media  Propolis—Bee resin
Comfrey—Symphytum spp.  Reishi—Ganoderma spp.
Conifer resin—various species  Shepherd’s purse—Capsella bursa-pastoris
Damiana—Turnera diffusa  Silk tassel—Garrya spp.
Echinacea—Echinacea spp.  Skullcap—Scutellaria lateriflora
Garlic—Allium sativum  Slippery elm—Ulmus rubra
Ghost pipe—Monotropa uniflora  St. John’s wort—Hypericum perforatum
Ginger—Zingiber officinale  Tea—Camellia sinensis
Goldenseal—Hydrastis canadensis  Tulsi—Ocimum tenuiflorum
Gotu kola—Centella asiatica  Turmeric—Curcuma longa
Hops—Humulus lupulus  Valerian—Valeriana officinalis
Jamaican dogwood—Piscidia piscipula  Wild lettuce—Lactuca spp.
Kava kava—Piper methysticum  Willow—Salix spp.
Licorice—Glycyrrhiza spp.  Witch hazel—Hamamelis virginiana
Lobelia—Lobelia inflata  Yarrow—Achillea millefolium
Marijuana—Cannabis spp.  Yerba mansa—Anemopsis californica
Marshmallow—Althaea officinalis  
Meadowsweet—Filipendula ulmaria

Essential Oils
Black birch
Chamomile
Tea tree
Wintergreen