## **Comprehensive Dungeon Monitors Guide** © 2016 SirBamm!

Purpose: The purpose of this Dungeon Monitor's Guide is to provide members of the BDSM-leather-fetish community with a general guideline to equip them with the basic knowledge and skills required to be a play monitor (hereafter referred to as a dungeon monitor or DM) at an SM event. It is hoped that through education efforts such as this, we, as a community, can continue to grow and become more proficient and professional in our endeavors. This guide was developed to assist in the education of DM's for local events, and therefore includes general rules and standards.

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Acknowledgements: I would like to recognize the following organizations and individuals for their work that enabled this initiative to become a reality:

Reference Information: Black Rose, Black Rose Board of Directors 1998, Boy Max, BR98 Dungeon Staff, Chris M., David S., Fraizer, Gil Kessler, Jack McGeorge, Joseph Bean, Leather Leadership Conference II, Trish A., Johnan and Bamm! Special thanks to The BR98 Play Monitors Guide, which served as the basis for the "Danger Signs" reference charts, and Johnan, for the Crisis Intervention essay. To the ARC and FEMA for the list of First Aid support and First Aid kit contents. And to SAADE, SSCN and TALON. Editor: Bamm!

Preface: Volunteering to be a Dungeon Monitor, or DM, has a great many rewards. Not only do you have a chance to give something back to the community that you play in, but you can also get a lot of personal satisfaction from doing it. There is also a great deal of knowledge to be gained from the experience. Personal satisfaction comes from being able to feel that you are unconditionally helping people, regardless of their background or kink. The giving of your time and energy and knowledge helps others out, just like you were helped out (or wish you were) when you were new to the leather-SM-fetish community. The knowledge you get is not only from the DM course, but also from being able to observe all the various techniques and skill levels of the players at a party. This DM course is designed to give you the basic knowledge of how to be a good Dungeon Monitor, a certification in CPR and First Aid, and a basic knowledge of crisis control and aggression management. These basic skills, along with the things that you already know, and may not even know that you know them, combined with the experience from DM's that are already in place, will give you valuable tools that will be sought out for many years to come. These things also have other benefits, like reduced party admissions to most clubs that you will be available to DM for. We hope you enjoy this course, and learn from it, as much as we have from taking it in the past and teaching it today.

Forward: Safe, Sane, and Consensual . . . the leather culture creed. In April of 1998, the Leather Leadership Conference II defined SSC as: "Safe" is being knowledgeable about the techniques and safety concerns involved in what you are doing. Each participant must be informed about the possible risks, both mental and physical. "Sane" is knowing the difference between fantasy and reality. Knowledgeable and informed consent cannot be given if you are under the influence of alcohol or other drugs. "Consensual" is respecting the limits imposed by each participant. One of the most easily recognized ways to maintain limits is through a "safeword" - which ensure the bottom/submissive can end the activity at any time with a single word or gesture. As the Leather Community grows, so does its need to provide education and support for its participants. This support includes an atmosphere where people can explore themselves and D/s-SM. A Play Party or Play Social is by nature, one of those places of exploration, self-education, and support. As such, it is a common function provided by BDSM support groups as well as individuals. Parties attract newcomers and experienced players alike. The level of understanding of scene etiquette, use of equipment, and safety techniques will vary among players. Because of this, the importance of having one or more trained DM's for the event cannot be underestimated. The safety of the attendees is at stake, as is the reputation of the organizers. The DM fulfills an important role in making the event successful and comfortable. To this end, the DM is a lifeguard (monitoring play space, providing assistance, intervention and instruction if needed); a guide (providing directions, safety equipment, and information); and a cop (enforcing the rules established by the organizers). Participating in an event as a DM is a tough but rewarding job. You have to enforce the rules while maintaining your impartiality toward all participants. It's not always a fun job, but it will always be one of the most important within the scene.

Essentials of play monitoring: The DM Mission: The mission of the DM is, simply, to ensure a safe, enjoyable play environment.

Your Duties as a DM: To attend necessary orientations and training sessions. To be friendly and courteous to all participants. To provide orientation and assistance where appropriate. To supervise all SM activities in the play areas and to take appropriate steps to ensure the safety of all participants. To be familiar with general scene etiquette, specific play rules, and all the individual policies that apply to play; and to

enforce these rules and policies. To conduct safety inspections of play areas and equipment and take appropriate corrective action if unsafe equipment is discovered. To ensure that play rules are available to all participants. To maintain a clean and orderly play environment. To report shortages of expendable supplies to the organizers. To monitor play activities for danger signs and substantial breaches of scene etiquette. To assist players with minor injuries as necessary. To ensure that players clean up when a scene is complete.

Safety and Security: Part of any DM's job may involve safety issues or security issues. One of our duties is that of a police officer. We constantly say it, but there really isn't a lot said about how to go about it. Some of the basics are set out as follows.

Traffic Control: For whatever reason, there may come a time when directing traffic becomes necessary. Sometimes it is because of the size of the crowd. Sometimes there may have been an accident. Rarely it may be due to a scene caused by a player that needs to be removed from the premises. Regardless of the nature of the reason, if you are not directly involved with the incident, you can be indirectly a part of it, which makes you directly responsible to the safety of the participants. While things are being handled in one area, you may have to stand in another and keep people moving. You may have to keep people away and you may have to keep people back. In all of these instances, remain polite, but firm. Stand your ground and don't spend a lot of time answering questions. Tell people, politely, "I'm not sure, I'll find out for you later". This gives them a sense of importance and will leave you alone to do your job.

Checking ID's: When working the door for a party, sometimes friends and strangers will "forget" their card or have "lost" it or "left it home". As much as we'd like to accommodate everyone and keep our friends and give our friends a break, for the safety and security and legal aspects that may arise, it is important that we are firm and consistent with everyone. If you are required to have a membership card, than not having one will get you turned away. Period. If waivers are required, then full legal names are required on them. Refusing to sign, incorrectly signing or not using their full legal name will weaken the release of liability. Therefore you must check the waiver to see that it is filled out completely and signed legally and legibly.

Escort Service: Whenever a person, male or female, feels uncomfortable walking out to their car, it is our job to escort them, if asked. We may be nothing more than company. But sometimes, just being company, puts a person's mind at ease.

Prior to Duty: Study the event play rules. Study this guide. Be on time for your shift. Familiarize yourself with the event space and equipment. Familiarize yourself with the supplies and the location of supplies. Get a feel for scenes in progress and the mood in general. Check in with the event organizer(s) or DM Supervisor. Get a

debriefing from the DM going off-duty. Get your gear ready and on: DM vest (if available) Vest Pack (with flashlight, trauma shears, gloves, CPR masks, pen and whistle).

On Duty: Patrol the play space with the aim of facilitating a safe and enjoyable time for all - keep an active pattern of movement and deep social interactions to a minimum. You will have another time to interact with others socially. Patrol the entire play space - as the DM, you will have complete access to all play areas. Look - keep your eyes moving. Focus actively but not exclusively on the play. Watch for overobtrusive voyeurs, alcohol, drunkenness, and over-aggressive come-ons. Watch with impartiality, keeping safety and effectiveness in mind. You can watch for pleasure after your shift is over. Listen - listen for trouble. You may hear something go wrong before you see it. Yelling, screaming, sounds of equipment breaking or collapsing should be investigated immediately. Remember that even happy screaming might disturb others. Loud conversations in play areas should be discouraged. Communicate with other DM's - share impressions of scenes in progress, communicate equipment maintenance information, and confirm whether intervention is necessary or whether the event organizer or DM supervisor should be called. Communicate with Players provide direction (to restrooms, cleaning supplies, house rules, smoking area, etc.), provide aid (answer questions, stalker complaints, and enforce rules). Good Opening Lines - "Is everything okay?" or "Excuse me, could I be of assistance?" Vocal Tone calm, professional, friendly, do not be smug or bossy, and do not wag your finger. Enforce House Rules - violations of written play/social rules can and should be enforced without qualm. Monitor for Unsafe Play - watch for violations of house etiquette and if you observe clear violations of house rules or etiquette, you have a clear right to ask for compliance to the rules. Unless the play seems truly hazardous with imminent harm a possibility, you may want to obtain a second opinion from another DM, if available, or the supervisor or organizer. Intervention - make sure that your point of concern has a legitimate basis within the rules. Discreet Intervention one tactic; get the attention of the top and signal him/her aside. When Intervening - be diplomatic and discreet. Be Fair - explain your concern to the involved party, point out the area of your concern in the rules. Be Assertive - if the guest is breaking a hard rule, insist that they refrain from doing so. Say you'll call the DM Supervisor or organizer if you can't get your point understood. If the organizer or DM Supervisor overrules your decision, take it in stride and continue your patrol. That rarely happens. Most organizers and DM supervisors trust the judgment of the DM. Either way, do not argue with the organizer or DM Supervisor. Be Firm - be firm with your resolve that the house rules be obeyed. If Problem Persists - intervene again and notify the DM Supervisor. If Violations Continue - suspend the scene.

Operational Procedures: Number One Rule: Stay Calm!

Common Medical Problems: Blood Drawn - Disinfect the wound with an antiseptic wipe and cover with a bandage. Fainting or Near Fainting - lay subject down; cushion head with folded vest or jacket; elevate legs. When subject is feeling better, allow him / her to sit up. Only then offer water or fruit juice for energy.

Other Possible Problems: Fights and Physical Confrontations - in the extremely unlikely case that a fight breaks out, do not leap into the fray. Use your voice, tell them to stop, call for help. Event organizers will be on their way. Police and Other Official Visitors - be calm and cooperative. If the event is properly run, there won't be a problem. We are out of the norm, but not criminals.

Supplies Available to DM

First Aid Kit

- A good First Aid kit should include, at a minimum, the following items:
- 1. A brightly colored, lockable toolbox. Lockable in order to keep children out of it.
- 2. Various types of antibiotic creams and ointments such as Neosporin, Triple
- Antibiotic Ointment, Bacitracin, Polysporin Powder, Mycostatin Powder
- 3. alcohol swabs
- 4. betadine swabs
- 5. benzalkonium chloride swabs
- 6. ammonia inhalants
- 7. About 4 different types of first aid tapes
- 8. EMS scissors
- 9. Band-Aids
- 10. steri-strips, different sizes
- 11. clear dressings, different sizes
- 12. applicator swabs
- 13. emergency thermal blanket
- 14. wash-up towelettes, or you can use alcohol wash
- 15. instant activating ice bag
- 16. tongue depressors
- 17. latex gloves
- 18. flashlight, working
- 19. hydrogen peroxide
- 20. sterile normal saline
- 21. various sizes of sterile gauze, both for wrapping and applying over wounds
- 22. package of 4x4 non sterile gauze, for cleaning and absorbing Sharps Container(s)

(if blood play is allowed) Disinfectants Fire Extinguishers Clean Towels Clean Blankets Telephone(s) Radio (if available) Paper Towels Bio-Hazard Rubber Gloves Knife Shears Bolt Cutter Hacksaw

The following information on assembling your own first aid kit is derived from recommendations from the Federal Emergency Management Agency. Assemble a first aid kit for your home and one for each car. A first aid kit\* should include: Sterile adhesive bandages in assorted sizes 2-inch sterile gauze pads (4-6) 4-inch sterile gauze pads (4-6) Hypoallergenic adhesive tape Triangular bandages (3) 2-inch sterile roller bandages (3 rolls) 3-inch sterile roller bandages (3 rolls) Scissors Tweezers Needle Moistened towelettes Antiseptic Thermometer Tongue blades (2) Tube of petroleum jelly or other lubricant Assorted sizes of safety pins Cleansing agent/soap Latex gloves (2 pair) Sunscreen Non-prescription drugs Aspirin or non-aspirin pain reliever of choice Anti-diarrhea medication Antacid (for stomach upset) Syrup of Ipecac (use to induce vomiting if advised by the Poison Control Center) Laxative Activated charcoal (use if advised by the Poison Control Center)

The following items should also be included in a kit designed for play party use. Honey packets, sugar gel, or other similar items for use in individuals with low blood sugar. Alcohol wipes. Extra latex gloves. Hand disinfectant. Portable sharps container. Resuscitation shields. Specialized items as determined by local need.

Remember: Plan for the worst, and hope for the best

Play Equipment: Any broken or unsafe equipment should be repaired or marked "DO NOT USE" with a sign placed on the equipment. Be familiar with all equipment to be used / available during play.

Danger Signs: Things to Watch for: The following list catalogues a variety of common play mistakes, grouped by the type of scene, that the DM should watch for. Remember your role as a DM is that of lifeguard, helper and guide; not an overzealous school hall monitor. The danger signs are grouped into three categories:

M - Monitor Danger signs rated (M) may or may not be a problem. These involve harmless oversights, mildly risky behavior, or advanced play by experienced players. Make no intervention, but stay alert. Get another DM's opinion if available or contact the event organizer / DM Supervisor if you are in doubt about the scene. There may be a problem brewing.

I – Intervene: Danger signs rated (I) are situations in which DM intervention is deemed appropriate. This rating does not necessarily mean that a violation of safe or sane play has occurred. Interventions can and should be done for a number of valid reasons: To demonstrate how a technique is performed or how a piece of equipment is used. To inquire about how a scene is being conducted (some players take one-gallon enemas or use wire whips). To inform players about some external circumstance (closing time, the presence of police, etc.). To offer assistance or provide materials to a scene in progress (towels, safe sex supplies, etc.) To share an observation the top may not have noticed (bluing of hands, spilled drink on flogger, etc.). To inform players that they are approaching or have exceeded a safety limit. To be courteous and helpful. The issue may be something the players are too inexperienced to know about. It may be advanced edge play performed by expert players accustomed to doing it. Satisfy yourself that all is well, help them find a way to do what they want to do safely or ask politely that they refrain from the activity in question.

S – Stop: Danger signs so clearly in violation of Safe, Sane and Consensual behavior that they cannot be permitted regardless of circumstance. This does not mean suspend the individual's right to play, but the proscribed behavior must cease and desist. Again, be polite and helpful, but firm. One can't do everything in public.

In Summary: M means potential trouble to be noticed and monitored. I means intervention is appropriate, but not necessarily that an activity must cease. S means a hard limit, and the current activity must stop In general watch for potential risk.

So, the players seem to know what they are doing? If it helps when intervening, point out where the behavior in question appears in this guide.

General Play Space Behavior

I Arguments or loud swearing; loud offensive speech involving race, religion or orientation.

I Bottom weeping, screaming or bothering other people.

I Bottoms having breathing difficulties; gasping, wheezing or unable to catch breath. I Individuals monopolizing play space or equipment.

I Observers crowding a scene too closely; or getting in the way.

I Play area is not cleaned before or after a scene.

I - S Violations of posted house rules,

I or S according to rule in question.

M - I Aggressive and persistent stalker-like behavior (M) then (I).

M - I Drunkenness, belligerence, slurred speech (M) for observers and (I) for players. Keep a close eye out for anyone who appears to be drunk and warn your fellow DM's and organizer(s).

M - I Excessive noise or screaming (M) then (I).

Play Equipment Safety (Always notify event organizer)

S Structure, hooks, eyebolts or legs loose.

I Structure appears unable to support the weight of players.

M - I Ropes used do not appear strong enough to support the weight (M), if obvious (I).

M Top has not tested the amount of weight to be supported.

Negotiation and Consent

S Ignoring safeword "red".

M Pushing bottom (or top) too hard to take or give more.

Bondage

S Player falls or gets hit on the head.

S Ropes around neck or collar attached to a high stationary point.

I Breasts bound tightly causing ballooning.

I Clips or clamps around the eyes.

I Standing mummification without spotter.

M Absence of emergency release tools: knife, shears, bolt cutter or hacksaw

M Bound player is left alone with no spotter.

M Collar is too tight to allow free breathing (allow room to insert two fingers).

M Hands or feet becoming discolored or cool to the touch.

M Noticeable swelling or redness from bondage or weights.

M Standing unsupported with ankles bound together - unstable especially with high heels.

Suspension All Bondage Danger Signs Apply Here Also.

I Wrist suspension; bondage too tight or too loose, potentially causing nerve damage (room to insert one finger is ideal).

M Absence of panic snaps at heavy load points.

M Limbs taut (especially from overhead suspension).

Impact Play

S Flogger or whip infringing on other scenes.

S Hard paddling on the ribs, back, knees or tops of feet or shins.

S Hard striking on bones or organs, especially kidney, spine, neck or head.

S Striking bleeding wounds, causing airborne droplets.

S Striking with the buckle end of a belt.

S Whip inappropriately long for play space.

I Whip dragging on dirty floor between strikes.

I Hard impact on the breasts, especially large breasts.

I Striking on pre-existing bruises.

M - I Flogger tips inadvertently wrapping around the body being hit. May leave marks over shoulders, around ribs, outside of hips and side of body away from the one flogging. (M) then (I).

M Bottom snapping head back sharply when struck.

M Facial expressions or cries of apparent anguish.

M Flogger tips dragging on the ground.

M Paddles or canes are cracked, split or broken.

Breast Play

I Breasts bound tightly causing ballooning.

I Hard impact play on the breasts, especially large breasts.

Wax, Fire and Temperature

I Absence of nonflammable drop cloth.

I Candle flames in the vicinity of curtains or other flammable materials.

I Absence of wet towel - provide one.

I Excessive spillage of wax.

M Mentholated ointments spread over the bound player without soap and water handy.

M Mentholated ointments placed inside the vagina or rectum.

Electricity

I Any direct current electricity (Folsom or OMRON units) used above the waist, or on opposite arms, anything potentially running current through the chest or head.

I Static electricity used near flammable liquids (alcohol, perfume) and vapors.

I Violet wand or static electricity used near the eyes.

M Strong current (cattle prod, stun gun) applied to strong muscle groups.

M Violet wand or static electricity used on metal jewelry (generates heat).

Genital Play: Note: Some players may be "Fluid Bonded" but should still observe safer sex practices in public play space.

S Blood flow from the vagina or rectum (may need to call 911).

S Forcing air into the vagina.

I Bodily fluids on floor or equipment not cleaned up promptly.

I Fisting without a fresh latex glove and ample lubricant.

I Moving objects directly from the anus to vagina.

I Sharing bodily fluids between the players.

I Sharing toys or objects without changing condoms.

I Sudden yanking or twisting of testicles.

Cutting or Piercing

I - S No first aid kit (I) provide if available, otherwise (S).

I Antiseptic wipes and dressing are not close at hand.

I Blood or other fluids on floor or equipment not cleaned up promptly.

I No sharps container or container not being used, provide one if available.

M Area of skin to be played with has not been cleaned with alcohol.

Anal Play

S Any amount of blood from the rectum.

S Forcing air into the rectum.

I Absence of blood cloth, towels, or other enema cleanup supplies.

I Fisting without a fresh latex glove and ample lubricant.

I No obvious place for bottom to void after enema.

I Object for anal insertion does not have a flared base or long handle.

Gagging

M - I Gag is not easily removable.

M Gag with hood.

M - I Mouth stuffing is not attached to a strap to prevent blocking the throat.

M Use of a "pump gag" (can over-inflate and block the throat).

Breath Deprivation

M Bagging or causing bottom to inhale carbon dioxide.

M More than momentary depravation of air.

Stress and Emotional Danger

S Shallow breathing, cold, clammy glassy eyes (possibly endorphin shock). M Overly frightened expression.

Crisis Intervention: Dealing with Non-physical Offenders: Crisis intervention is a way to calm a situation that could result in loud or obnoxious behavior, or even extend to the individual becoming assaultive (NOTE: Definition of assault is unwanted

touching). The possible causes for this type of behavior include, but are not limited to, drinking, anger, relationship issues, lack of proper communication, lack of experience or mental health issues.

If a person starts to display a noticeable change in his or her behavior, such as staring, twiddling fingers, thumbs or hands, walking back and forth absent-mindedly, etc., the DM's should approach the situation in a supportive and non-judgmental attempt to relieve the tension and try to put the person at ease. If the individual gets to the point where he or she starts to talk back or gets belligerent, it is the DM's job to attempt to take control of the situation by setting rules using a direct and firm approach. If the person has gone into an instinctive behavior of "fight or flight" and has chosen to "fight", the DM Team should first try to take control of the situation, without yet getting physical, to reduce the risk of the offending individual harming himself, the DM's or other group members. If the person has become physical with the DM's, the DM Team or other group members, see "Dealing with Potentially Violent Offenders", below.

Once the person has passed through these phases, whether they have become physical or not, they would normally reach an exhaustion point where the body and the mind become tired and the individual usually begins to regain their composure. At this point he or she would normally begin to feel foolish, silly, embarrassed or apologetic, and it is the DM Team's responsibility to reassure the individual and ease the person back into the "community".

Dealing with Potentially Violent Offenders: As a DM, sometimes it is important to have to intervene. When approaching someone who needs to be approached, never assume a combative position. Do not wag your finger or raise your voice. Always try to talk in a gentle, calming voice. A good opening line would be "Hi. Can I talk to you?" Or, "Can we talk for a minute?" If someone gets combative, do not stand with your body directly facing them. Always try and stand sideways, giving them less of a target should they decide to throw a fist or foot. It also appears less aggressive if you do not have the appearance of going 'toe to toe' with them. And it is a more powerful position should you need to become physical. Whenever possible, always call for another DM, someone on shift if available, to help with the situation. The second DM should not be in front of the offender, either, as that will make it appear as if the DM's are looking for a fight. The second DM should stand behind, and off to the side, of the person being talked to. That DM should also be standing at an angle to the person being talked to. If a third DM is available, that person would be on the opposite side, behind, in the same position as DM #2. Any more than that would be overkill, and look as if the DM's were looking for a fight. If more DM's are available, the best thing that they could do at that point is traffic control. Statistics have shown that most times,

when a potential offender sees three DM's around him in strategic positions, he will back off. However, the occasional folly will happen. Because of these occasional follies, and the importance of ongoing DM training, the following procedures come from a class I attended in April 2002, and deal with different situations and different numbers of DM's available. In a one on one situation, the easiest way to defuse a situation is to ask the offender if he would like to talk in a more private setting, rather than make a scene and interrupt other players. By doing this, it has the appearance of giving the offender the upper hand, leaving the next move up to him. When in reality, the "more private place" you were talking about would be outside the party area and the play space, where you can more easily tell him to go home, and not let him back in. If the person resists or becomes confrontational, the safest thing to do, if you are a lone DM, would be to back up at 45-degree angles away from the offender and continue doing this each time the offender wants to become physical. This step back and away does three things. First it makes it harder for you, as a DM, to be hit. Second, it forces the person to have to move his entire body and shift his weight before he can strike out at you again, giving you time to consider alternatives, it gives the offender time to consider alternatives and it gives other DM's time to arrive. When a second DM is available, a good rule would be for the DM to come from the offender's line of sight and move to a position behind, and off to the side, of the person being talked to, remaining in the offender's peripheral vision. If a physical confrontation ensues at that point, DM2 can move in and "off balance" the offender. I do not recommend "take-downs". That is when DM2 knocks the offender off his or her feet or tackles them to the ground. The chances of injury and liability are greatly increased. The "off balance" maneuver is quick and easy and can be done by the smallest of DM's on the largest of offenders. DM2 moves quickly behind (for purposes of visualization, we will use the right side) behind and to the right of the offender. DM2 then places his left hand on the offender's left shoulder (from behind). With his left leg, DM2 presses his knee into the back of the offender's right knee, pressing down on the offender's left shoulder, to get the offender off balance. This does not take the offender to the ground, simply takes the initial fight out of the offender and puts him off balance. If a third DM is still unavailable, DM2 can hold the offender in that position while DM1 goes into the removal position, outlined below. Or DM2 can turn the offender by moving forward so that DM1 can then come from behind the offender to take the below outlined removal position. When someone needs to be removed physically, it requires only two DM's to accomplish this. By moving toward the offender's left arm from behind, DM1 can wrap his right arm under the offender's left arm and grab his wrist. Then the DM1 would place his left hand on the offender's left forearm or elbow. If DM2 can do the same thing in reverse on the opposite side, the offender can be moved out of the building regardless of his size or weight, just by pushing forward on his elbows. If a third DM is available, both DM2 and DM3 would be on opposite sides of the offender and at an angle behind

him. If the offender becomes physical, both DM2 and DM3 could immediately go to the removal position and escort the offender out the door. Or if a third DM arrives while DM2 has the offender off balance, DM3 can immediately go to the removal position and DM2 can then take that same posture and remove the offender. If DM2 and DM3 have the offender in the removal position, DM1 simply needs to move out of the way and clear a path and open any doors so that DM2 and DM3 have a clear avenue to escort the offender out of the building. This should always be considered a last choice. Most situations do not need physical interference. The less intervention you do, the more that people playing will enjoy themselves and the less hard feeling will be created. When in doubt, always err on the side of caution. And whenever possible, ask for a second opinion.

Basic First Aid: The following safety module is intended to be used as refresher safety awareness reference and is in not intended to be used as a substitute for formal first aid training. This information was provided by the National Institute for Occupational Safety and Health, and has been modified to reflect the play party environment.

Get medical attention for all injuries. It is very important for you to get immediate treatment for every injury, regardless how small you may think it is. Many cases have been reported where a small unimportant injury, such as a splinter wound or a puncture wound, quickly led to an infection. Even the smallest scratch is large enough for dangerous germs to enter, and in large bruises or deep cuts, germs come in by the millions. Immediate examination and treatment is necessary for every injury. The DM supervisor should have medical kits available for minor injuries.

What is first aid? It is simply those things you can do for the victim before medical help arrives. The most important procedures are described below.

Control bleeding with pressure. Bleeding is the most visible result of an injury. Each of us has between five and six quarts of blood in our body. Most people can lose a small amount of blood with no problem, but if a quart or more is quickly lost, it could lead to shock and/or death. One of the best ways to treat bleeding is to place a clean cloth on the wound and apply pressure with the palm of your hand until the bleeding stops. You should also elevate the wound above the victim's heart, if possible, to slow down the bleeding at the wound site. Once the bleeding stops, do not try to remove the cloth that is against the open wound as it could disturb the blood clotting and restart the bleeding. If the bleeding is very serious, apply pressure to the nearest major pressure point, located either on the inside of the upper arm between the shoulder and elbow, or in the groin area where the leg joins the body. Direct pressure is better than a pressure point or a tourniquet because direct pressure stops blood circulation only at the wound. Only use the pressure points if elevation and direct pressure haven't controlled the bleeding. Never use a tourniquet (a device, such as a bandage twisted

tight with a stick, to control the flow of blood) except in response to an extreme emergency, such as a severed arm or leg. Tourniquets can damage nerves and blood vessels and can cause the victim to lose an arm or leg.

Treat physical shock quickly. Shock can threaten the life of the victim of an injury if it is not treated quickly. Even if the injury doesn't directly cause death, the victim can go into shock and die. Shock occurs when the body's important functions are threatened by not getting enough blood or when the major organs and tissues don't receive enough oxygen. Some of the symptoms of shock are a pale or bluish skin color that is cold to the touch, vomiting, dull and sunken eyes, and unusual thirst. Shock requires medical treatment to be reversed, so all you can do is prevent it from getting worse. You can maintain an open airway for breathing, control any obvious bleeding and elevate the legs about 12 inches unless an injury makes it impossible. You can also prevent the loss of body heat by covering the victim (over and under) with blankets. Don't give the victim anything to eat or drink because this may cause vomiting. Generally, keep the victim lying flat on the back. A victim who is unconscious or bleeding from the mouth should lie on one side so breathing is easier. Stay with the victim until medical help arrives.

Move the injured person only when absolutely necessary. Never move an injured person unless there is a fire or when explosives are involved. The major concern with moving an injured person is making the injury worse, which is especially true with spinal cord injuries. If you must move an injured person, try to drag him or her by the clothing around the neck or shoulder area. If possible, drag the person onto a blanket or large cloth and then drag the blanket.

Perform the Heimlich maneuver on choking victims. Ask the victim to cough, speak, or breathe. If the victim can do none of these things, stand behind the victim and locate the bottom rib with your hand. Move your hand across the abdomen to the area above the navel then make a fist and place your thumb side on the stomach. Place your other hand over your fist and press into the victim's stomach with a quick upward thrust until the food is dislodged.

Flush burns immediately with water. There are a many different types of burns. They can be thermal burns, chemical burns, electrical burns or contact burns. Each of the burns can occur in a different way, but treatment for them is very similar. For thermal, chemical or contact burns, the first step is to run cold water over the burn for a minimum of 30 minutes. If the burn is small enough, keep it completely under water. Flushing the burn takes priority over calling for help. Flush the burn FIRST. If the victim's clothing is stuck to the burn, don't try to remove it. Remove clothing that is not stuck to the burn by cutting or tearing it. Cover the burn with a clean, cotton material. If you do not have clean, cotton material, do not cover the burn with

anything. Do not scrub the burn and do not apply any soap, ointment, or home remedies. Also, don't offer the burn victim anything to drink or eat, but keep the victim covered with a blanket to maintain a normal body temperature until medical help arrives. If the victim has received an electrical burn, the treatment is a little different. Don't touch a victim who has been in contact with electricity unless you are clear of the power source. If the victim's body and electrify you when you reach to touch. Once the victim is clear of the power source, your priority is to check for any airway obstruction, and to check breathing and circulation. Administer CPR if necessary. Once the victim is stable, begin to run cold water over the burns for a minimum of 30 minutes. Don't move the victim and don't scrub the burns or apply any soap, ointment, or home remedies. After flushing the burn, apply a clean, cotton cloth to the burn. If cotton is not available, don't use anything. Keep the victim warm and still and try to maintain a normal body temperature until medical help arrives.

Use cool treatment for heat exhaustion or stroke. Heat exhaustion and heat stroke are two different things, although they are commonly confused as the same condition. Heat exhaustion can occur anywhere there is poor air circulation, or even if the person is poorly adjusted to very warm temperatures. The body reacts by increasing the heart rate and strengthening blood circulation. Simple heat exhaustion can occur due to loss of body fluids and salts. The symptoms are usually excessive fatigue, dizziness and disorientation, normal skin temperature but a damp and clammy feeling. To treat heat exhaustion, move to the victim to a cool spot and encourage drinking of cool water and rest. Heat stroke is much more serious and occurs when the body's sweat glands have shut down. Some symptoms of heat stroke are mental confusion, collapse, unconsciousness, fever with dry, mottled skin. A heat stroke victim will die quickly, so don't wait for medical help to arrive--assist immediately. The first thing you can do is move the victim to a cool place out of the sun and begin pouring cool water over the victim. Fan the victim to provide good air circulation until medical help arrives.

Respond appropriately to the form of poisoning. The first thing to do is get the victim away from the poison. Then provide treatment appropriate to the form of the poisoning. If the poison is in solid form, such as pills, remove it from the victim's mouth using a clean cloth wrapped around your finger. If the poison is a gas, remove the victim from the area and take to fresh air. If the poison is corrosive to the skin, remove the clothing from the affected area and flush with water for 30 minutes. Take the poison container or label with you when you call for medical help because you will need to be able to answer questions about the poison. Try to stay calm and follow the instructions you are given. If the poison is in contact with the eyes, flush the victim's eyes for a minimum of 15 minutes with clean water.

Keep a first aid checklist. In order to administer effective first aid, it is important to maintain adequate supplies in each first aid kit. First aid kits can be purchased commercially already stocked with the necessary supplies, or one can be made by including the following items: Adhesive bandages: available in a large range of sizes for minor cuts, abrasions and puncture wounds Butterfly closures: these hold wound edges firmly together. Rolled gauze: these allow freedom of movement and are recommended for securing the dressing and/or pads. These are especially good for hard-to-bandage wounds. Nonstick Sterile Pads: these are soft, super absorbent pads that provide a good environment for wound healing. These are recommended for bleeding and draining wounds, burns, and infections. First Aid Tapes: Various types of tapes should be included in each kit. These include adhesive, which is waterproof and extra strong for times when rigid strapping is needed; clear, which stretches with the body's movement, good for visible wounds; cloth, recommended for most first aid taping needs, including taping heavy dressings (less irritating than adhesive); and paper, which is recommended for sensitive skin and is used for light and frequently changed dressings. Items that also can be included in each kit are tweezers, first aid cream, thermometer, an analgesic or equivalent, and an ice pack. For more information about first aid kits, see the above section entitled "First Aid Kits", provided by the Federal Emergency Management Agency.

Report all injuries to the DM Supervisor. As with getting medical attention for all injuries, it is equally important that you report all injuries to the DM supervisor. It is critical that the DM supervisor check into the causes of every party-related injury, regardless how minor, to find out exactly how it happened. There may be unsafe procedures or unsafe equipment that should be corrected.

Fill out an incident report. Whenever an accident or incident occurs, it is safe to assume that some victims will want to blame someone else. At the very least, having an incident report sheet handy, to be filled out whenever an incident occurs, will go a long way to protect yourself and the organizers from any liability and can be used as a training tool, as well as to show areas that need to be monitored or corrected.

Recent Changes to the CPR Course. For All CPR Courses follow the latest updates by the American Heart Association and/or the Red Corss.

Use of Breathing Barriers. When Giving Rescue Breaths It is recommended that a breathing barrier be used whenever possible. However, a responder should not delay care if a breathing barrier is not immediately available or if he or she is unsure of how to use it. A resuscitation mask has advantages over a face shield. The primary advantage is that a resuscitation mask is equipped with a one-way valve that prevents the victim's exhaled breath from entering the responder's mouth. Professional rescuer level programs and the First Aid/CPR/AED Program incorporate the practice of using

breathing barriers, such as face shields and resuscitation masks, when giving rescue breaths. Other Red Cross programs and courses for the certified lay responder, such as First Aid: Responding to Emergencies and Community First Aid and Safety show their use but do not require them for training.

Rationale - Mouth-to-mouth rescue breathing has proven to be a safe and effective means of providing oxygen to a non-breathing victim and has saved many lives. While using breathing barriers may reduce the risk of disease transmission when giving breaths, the incidence of disease transmission during direct mouth-to-mouth rescue breathing is very low.

Rescue Breaths. Whenever a breath is given to an unconscious victim, it is considered a "rescue breath." Rescue breaths should be given to an unconscious adult, child or infant victim in such a way to ensure the delivery of effective breaths and to reduce the risk of gastric inflation (air in the stomach). An effective breath will cause the victim's chest to clearly rise.

For an unconscious adult victim: Each breath should be slow, gentle and last about 2 seconds. The responder should pause and take a breath between breaths given to the victim. Each rescue breath should cause the victim's chest to clearly rise.

For an unconscious child or infant victim: Each breath should be slow, gentle and last about 1½ seconds. The responder should pause and take a breath between breaths given to the victim. Each rescue breath should cause the victim's chest to clearly rise. Rationale-Slower breaths reduce the amount of gastric inflation that can cause serious complications such as vomiting, aspiration or pneumonia and restrict lung movement. When the responder pauses and takes a breath between rescue breaths, it ensures maximum oxygen and minimum carbon dioxide in each rescue breath.

Chest Compressions: CPR for an adult victim will be taught at a ratio of 30 chest compressions to 2 rescue breaths for one or two responders at a rate of about 100 compressions per minute. CPR for a child victim will be taught at a ratio of 30 chest compressions to 2 rescue breaths at a rate of about 100 compressions per minute. CPR for an infant victim will be taught at a ratio of 5 chest compressions to 1 rescue breath at a rate of at least 100 compressions per minute.

Rationale - The rate of compressions has been increased to achieve the best possible blood flow during CPR. For an adult victim, the research shows that CPR is most effective when more uninterrupted chest compressions are delivered. As such, the ratio of 30 chest compressions to 2 rescue breaths will apply in both a one or two responder situation. For infants and children, breathing problems are the most common cause of arrest. Also, the breathing rate of infants and children is faster than

in adults. Therefore, for this age group (age 8 and younger), the emphasis is to achieve the maximum oxygen, so the ratio will remain 5 chest compressions to 1 breath.

DISCLAIMER: The above information is compiled from various reference sources and is designed to provide current and authoritative information on the subject matter covered. It is provided with the understanding that the publishers are not engaged in rendering medical, legal, accounting or other professional service. Every effort has been made to ensure that the enclosed information is correct, but this publication should not be considered a substitute for formal medical first aid training.

Fire Extinguishers: We often hear people say, "If you're going to do 'fire play' keep a fire extinguisher nearby". But what do we know about fire extinguishers and what do we need to know about them?

Portable fire extinguishers are classified to indicate their ability to handle specific classes and sizes of fires. Labels on extinguishers indicate the class and relative size of fire that they can be expected to handle.

Class A extinguishers are used on fires involving ordinary combustibles, such as wood, cloth, and paper.

Class B extinguishers are used on fires involving liquids, greases, and gases.

Class C extinguishers are used on fires involving energized electrical equipment.

Class D extinguishers are used on fires involving metals such as magnesium, titanium, zirconium, sodium, and potassium.

The numerical value on the label tells you how big a fire or how big an area of fire the fire extinguisher can be expected to handle. A class 4-A extinguisher can be expected to handle twice as much as a class 2-A extinguisher. The way to use a fire extinguisher is broken down into this acronym: PASS. Pull, Aim, Squeeze, Sweep. Pull: Pull the pin out of the handle.

Aim: Aim the nozzle at the fire.

Squeeze: Squeeze the trigger or handle.

Sweep: Use a slow and steady, side to side motion to extinguish the fire.

The End of Your Shift: Meet with your replacement and brief him or her on the current situation and any special circumstances. Answer any questions that they may have. Hand over equipment. Check out with the DM Supervisor.

Various Groups Social Rules:

SAADE Party & Social Rules: SAADE recognizes that Scene Etiquette is dynamic and personal. It differs depending on the individual and the situation. SAADE hereby adopts and promotes the practice of Scene Etiquette, which fosters courtesy and respect among individuals within the leather community. We would ask our members and their guests to follow these rules while attending SAADE meetings, functions and/or any SAADE special interest group.

Social Rules It is inappropriate to touch other people's person or property without first obtaining permission. Never assume. Communication is the key to initiating play or determining the level of intimacy you may have toward another. The basic premise is consent. Be sure you have consent before you move ahead to play or touch. Do NOT join a scene unless specifically asked to do so! Play scenes are personal and the area in which they take place is to be respected. Again consent is the issue. Do not assume you are a welcome addition to any scene that is being undertaken unless you are specifically asked to join in. We ask all SAADE members to practice situational awareness. Be aware! Sometimes we invade or disrupt play scenes unintentionally. Keep conversation, laughter and/or comments to a minimum in the play areas. Don't make any loud noises or disruptions that may break the play space. We ask that you check the proximity of yourself to the play areas and be respectful of the events that are unfolding. We understand that conflict happens in life. Sometimes misunderstandings occur and bad feeling result from them. We ask that members strive to resolve these conflicts outside of the SAADE events. Feel free to discuss problems with the SAADE council but know that we recommend that members try to get together, one on one, to discuss their issues and work them out between themselves. If this is not possible we ask that you avail yourselves to the D/s Mediation team or get a trusted 3rd party to help resolve your differences. Please remember, as a whole, we are not a political group. SAADE's mission is fun, education and community building. There are other venues for political wrangling. This is a neutral zone for exploring the things we have in common. Being mindful that Scene Etiquette is expected of all SAADE members. Willful and ongoing disrespect of other members may be grounds for the suspension of membership privileges and/or terminating membership and the attendance to SAADE functions and special interest groups.

Party Rules: All attendees must present their membership card for admission, or be a guest of a card-carrying member. Guests are the sole responsibility of the sponsoring member. They are expected to know the rules and be accepting of our lifestyle and play. The member will be held responsible for the guest's behavior. Each member may bring up to two guests. Prostitution, solicitation, and negotiation of compensation for sexual services ARE ILLEGAL and are not tolerated. Violations shall result in immediate removal and banning from future events. Scene professionals may not accept payment for any services rendered at a SAADE event. All play shall be Consensual. Normal scene etiquette is required. Do not monopolize the equipment (A good rule of thumb if people are waiting for equipment is not to stay on any one piece of equipment for more than 70 minutes). Attendees must be over eighteen years of age. Bring your own equipment, props and toys for your type of play. Treat the hosts' home with respect. Please clean up after your scene. Leave all equipment free of

sweat, blood, other bodily fluids, wax, toys, etc. Bring bodily fluid concerns to the attention of the DMs. Wax, fire, water sports and scenes involving bodily fluids need to be brought to the DM's attention prior to play. If an area has been set aside for those purposes, only use the area set aside for those purposes. Place the fire extinguisher next to the scene, and have a wet towel next to you, a bowl of water and whatever other safety precautions need to be in place. Also, arrange for a "second". Smoke in designated areas only. And please use the ashtrays provided. (DM's will know where these areas are). No illegal substances of any kind are allowed at SAADE events. Firearms and firearm replicas may not be brought into any SAADE event. Safe sex is recommended, if you choose to do this type of scene. Do not touch other people's person or property without first asking permission. Never assume a sub is "fair game". No one is fair game here. Always ask first. Never handle other people's toys or toy bag without permission. Help clean up after the party.

Dungeon Monitor's Role All SAADE sponsored play parties will have at least one Dungeon Monitor (DM) per fifty (50) attendees. The DM shall not be encumbered with any other duties that may distract him/her from the role of DM. The DM will have access to all areas during an event. Do not interrupt a scene. If you have a concern bring it to the attention of a DM. Only DMs may interrupt scenes. The SAADE council has faith in their DMs, so decisions made by the DM concerning safety, security or removal are final. Additional House Rules may also apply, depending upon location, host, and/or other circumstances.

SSCN Social Rules & Etiquette Statement: SSCN recognizes that Scene Etiquette is dynamic and personal. It differs depending on the individual and the situation. SSCN hereby adopts and promotes the practice of Scene Etiquette, which fosters courtesy and respect among individuals within the leather community. Being mindful of "Scene Etiquette" is strongly encouraged. Willful and ongoing disrespect of other Contributors may be grounds for expulsion. (Section 4.05) Social Rules (These apply to ALL SSCN sponsored events) All play shall be Consensual. All SSCN sponsored play socials must have at least one Dungeon Monitor (DM), appointed by the Board, on duty at all times. The DM shall not be encumbered with any other duties that may distract him/her from the role of DM. The DM will have access to all areas during an event. All concerns should be brought to the attention of the DM. Only DMs may interrupt a scene. The decisions made by the DM are final. No illegal substances of any kind are allowed on the premises. Firearms and firearm replicas may not be brought into any SSCN event. All attendees must present their Contributor card for admission, or be a guest of a card-carrying Contributor. Upon entry, all guests shall read, sign and agree to abide by the SSCN rules for socials and in addition present a valid photo ID to verify their identity. Prostitution, solicitation, and negotiation of compensation for sexual services ARE ILLEGAL and are not tolerated. Violations shall result in immediate removal and

banning from future events. Scene professionals may not accept payment, at a SSCN event, for any services rendered. Normal scene etiquette is required (i.e., Do not interfere with a scene, do not invade scene space, etc). Please keep conversation, laughter and comments to a minimum in the play area. Do not monopolize the equipment. Do NOT join a scene unless specifically asked to do so! Please clean up after your scene. Leave all equipment free of sweat, blood, other bodily fluids, wax, toys, etc. Bring bodily fluid concerns to the attention of the DM. Wax, fire, and scenes involving bodily fluids need prior permission of the DM, unless a designated area has been set aside for those purposes. Cameras and other types of recording devices are NOT allowed at any SSCN sponsored event without the expressed written permission of the Board of Directors, and prior notice to attendees. Additional House Rules may also apply, depending upon location, host, and/or other circumstances.

Society of Janus Party Rules and Play Space Protocol (AKA: SOJ Safe Sex Policy): No food or drink (except water in non-breakable containers) is allowed in the play areas. No illegal activities - Do not engage in any illegal activities on the premises. No alcohol, illegal drugs, inhalants or other intoxicants are allowed unless prescribed by a doctor. Fragrances or heavy scents of any kind e.g. perfume, cologne, incense, etc. are strongly discouraged. Guests - You are only allowed to invite four guests to a party. Your guests are your responsibility at all times. They must arrive with, or after you, and leave with, or before you. No exceptions. Please watch respectfully and quietly -Do not participate in loud talk or idle chatter in the play area. Do not sit on the play equipment or in the playing spaces, unless you are playing. There are chairs, benches and the floor available for that purpose. Hands Off - Never touch someone else or their toys, props or other property, without asking and receiving permission. Unusually loud or otherwise disruptive play - Inform the Dungeon Monitor or the event's director before beginning any loud, messy or disruptive play that may affect the players around you. Wax and/or fire play - Because of the unusually messy or dangerous nature of this type of play, please obtain permission from a Dungeon Monitor before you start your scene. Voyeurism is welcome as long as it is discreet and does not disturb the players; if in doubt, move back. Remember, the primary purpose of this scene is play. Spectators must always give way to players, even if it means leaving a room. Experience - The players in the scene vary widely in experience and styles of play, so don't be quick to judge the play of others based on your own. On the other hand, if you observe play in which safety or health rules are being ignored, please inform a Dungeon Monitor or the Event Director immediately. Safewords - We recommend the use of safewords when playing together. In emergency situations where outside assistance is required, our scene safeword is "SAFEWORD". "SAFEWORD" is our version of 911. Do not abuse or misuse this word! Be Clean - Protect the play surfaces during your play. CLEAN UP the area thoroughly afterwards. Leaving the premises - you may not return without notifying

the Door Monitor in advance. No exchange of body fluids is permitted - All body fluids must be contained within your play area and may not be introduced into the body of another, or upon broken skin. You must not allow any blood or semen to fly from tips of canes, whips, or other implements. Barrier protection is mandatory when fucking, fingering, fisting, or having oral/genital sex with anyone - male or female. Masturbators also must wear a condom. Safe sex supplies have been provided for your use. Blood Play (including temporary piercings) - Instruments that have drawn blood should be disposed of, put away, or cleaned immediately before being used again. Anything bloodied during play must be cleaned and isolated to avoid contact with others. Sharps containers are available for disposal of contaminated needles. Permission must be obtained from DM prior ro starting any blood play. No scat or water sports will be allowed. Naked People must sit on sheets or towels (bring your own) when sitting on public surfaces. Depending upon the location of the even special House Rules may apply.

If your group would like to have me give this course, email me at: sirbamm@sirbamm.com

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