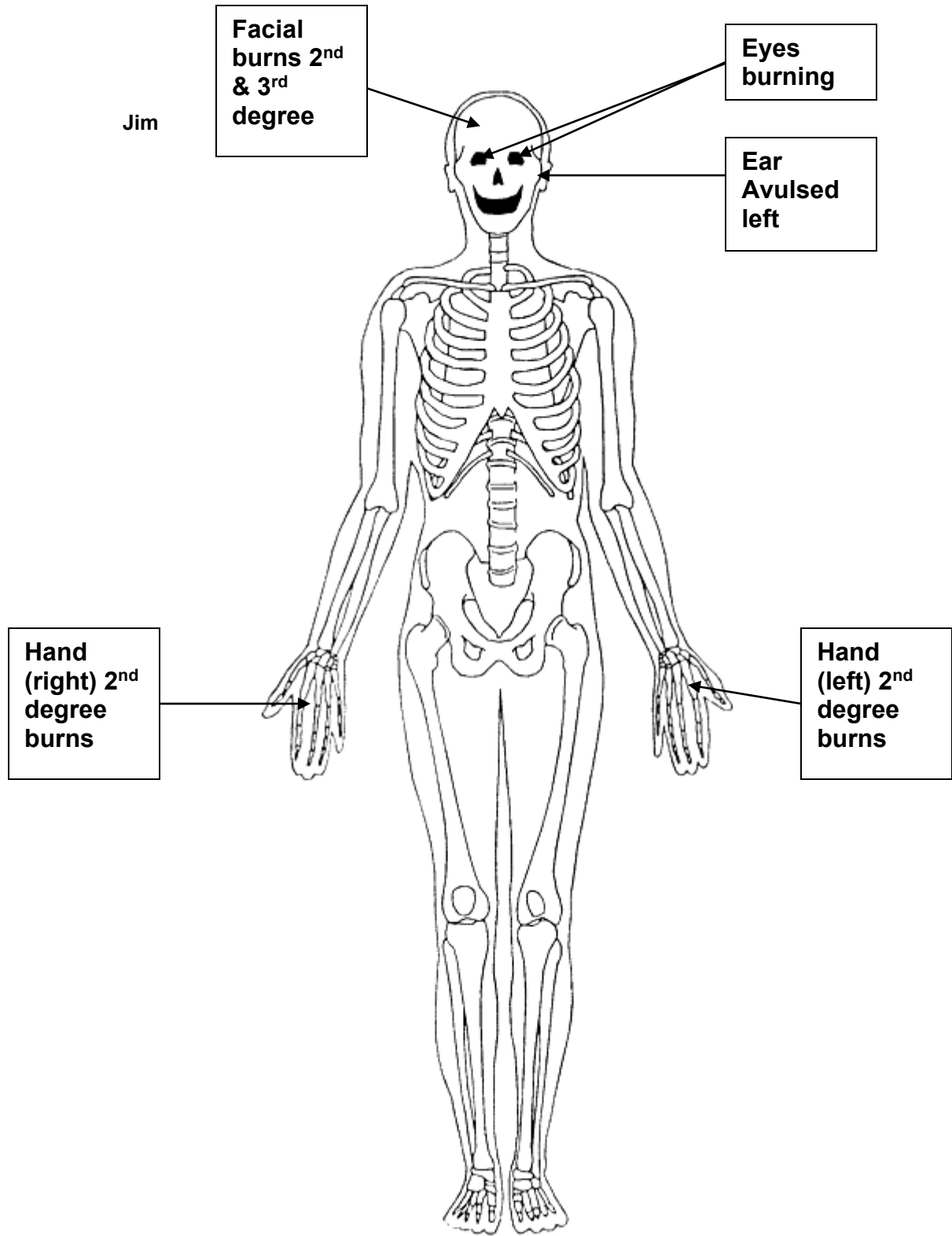
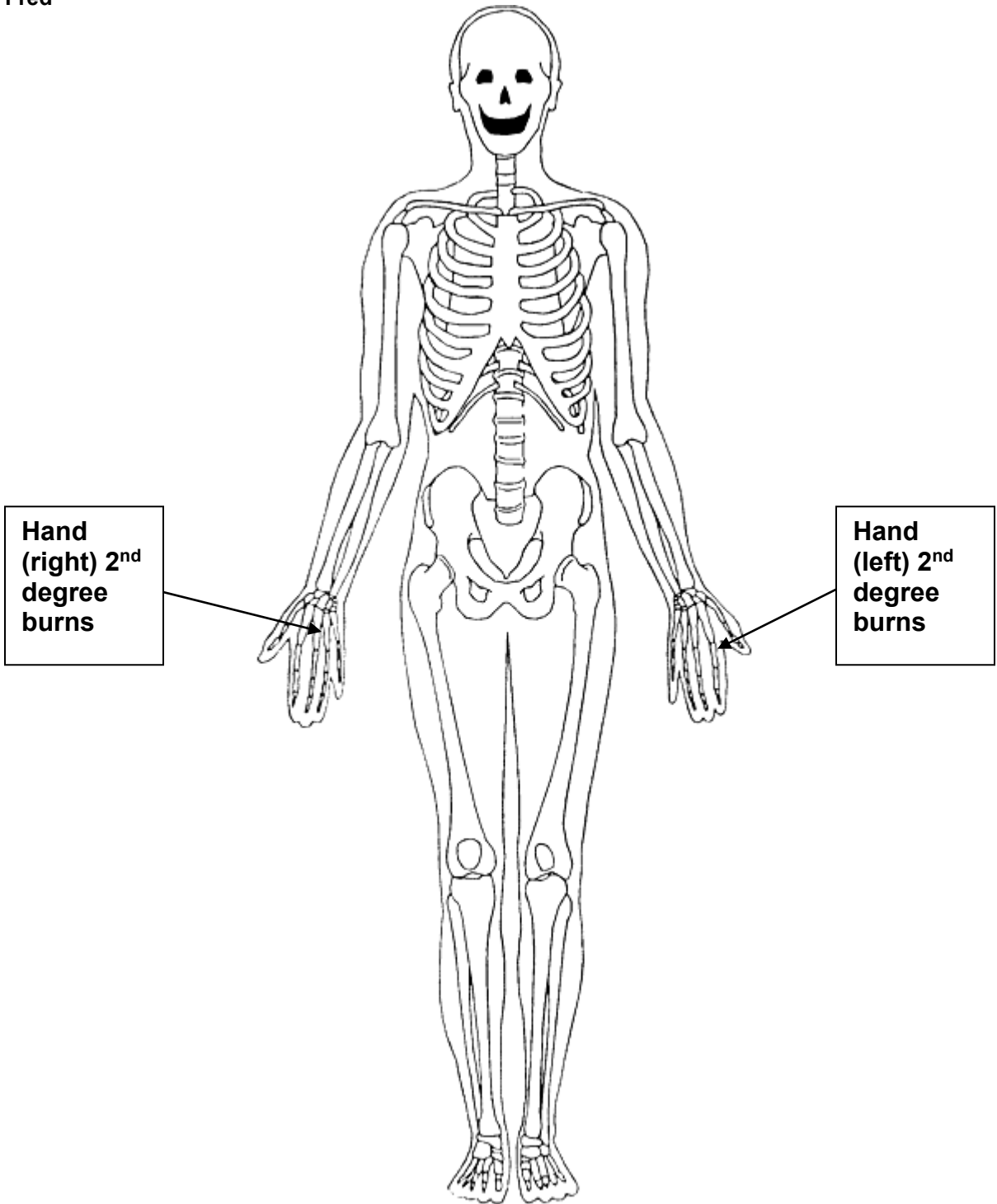


**HARLAN COUNTY
SAFETY DAYS
FIRST AID
PROBLEM
2012**

FIELD LAY OUT



Fred



LIST OF INJURIES

Jim

Facial Burns 2nd & 3rd degree

Eyes Burning

Ear Avulsed (left)

Hand (left) 2nd degree burn

Hand (right) 2nd degree burn

Fred

Hand (left) 2nd degree burns

Hand (right) 2nd degree burns

Monday morning at approximately 9:00 a.m., Fred and Jim are working on a D10R Caterpillar dozer installing new batteries. Fred, while helping Jim, notices Ralph climbing up on his loader across the pit. While holding the battery lead for Jim, Fred smells something then hears a loud bang. Looking back around he sees his co-worker Jim fall backwards off the other side of the dozer screaming. Fred feels a stinging on his hands. He quickly exits the dozer and runs around to help Jim. When you and your partner arrive you find Fred holding Jim trying to comfort him.

Please help, treat and transport as needed.

EMS is located in a nearby town.

INITIAL ASSESSMENT

PROCEDURES		CRITICAL SKILL
1. SCENE SIZE UP	<input type="checkbox"/> <input type="checkbox"/>	*A. Observe area to ensure safety *B. Call for help
2. MECHANISM OF INJURY	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Determine causes of injury, if possible *B. Triage: Immediate, Delayed, Minor or Deceased. *C. Ask patient (if conscious) what happened

Triage;

Jim

Respirations: < 30 per minute

Perfusion: Capillary refill < 2 seconds

Mental Status: Able to follow commands

Fred

Respirations: < 30 per minute

Perfusion: Capillary refill < 2 seconds

Mental Status: Able to follow commands

Both patients are delayed the teams may treat either first.

Jim

1. INITIAL ASSESSMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Verbalize general impression of the patient(s) *B. Determine responsiveness/level of consciousness (AVPU) Alert, Verbal, Painful, Unresponsive *C. Determine chief complaint/apparent life threat
2. ASSESS AIRWAY AND BREATHING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Correctly execute head-tilt/chin-lift or jaw thrust maneuver, depending on the presence of cervical spine (neck) injuries B. Look for absence of breathing (no chest rise and fall) or gasping, which are not considered adequate (within 10 seconds) C. If present, treat sucking chest wound
3. ASSESS FOR CIRCULATION	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Check for presence of a carotid pulse (5-10 seconds) B. If present, control life threatening bleeding C. Start treatment for all other life threatening injuries/conditions (reference Rule 2).

Continue with Patient Assessment

PATIENT ASSESSMENT

PROCEDURES	CRITICAL SKILL	
1. HEAD	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check head for DOTS: Deformities, Open wounds, Tenderness and Swelling *B. Check and touch the scalp *C. Check the face *D. Check the ears for bleeding or clear fluids *E. Check the eyes for any discoloration, unequal pupils, reaction to light, foreign objects and bleeding *F. Check the nose for any bleeding or drainage *G. Check the mouth for loose or broken teeth, foreign objects, swelling or injury of tongue, unusual breath odor and discoloration

Facial Burns 2nd & 3rd degree and Eyes burning (Teams can treat head as a unit)

		BURNS
PROCEDURES		CRITICAL SKILLS
1. DETERMINE BURN TYPE	<input type="checkbox"/>	*A. Determine type <ul style="list-style-type: none"> ▪ Thermal ▪ Chemical ▪ Electrical
2. DETERMINE BODY SURFACE AREA	<input type="checkbox"/>	*A. Determine Body Surface Area (BSA) using rule of nines
3. BURN CARE (All Types)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Remove patient from source of burn and prevent further contamination *B. Consider the type of burn and stopping the burning process initially with water or saline if appropriate *C. Remove jewelry *D. Continually monitor the airway for evidence of closure *E. Cover the burned area with a dry sterile dressing *F. Do not use any type of ointment, lotion or antiseptic *G. Do not break blisters *H. Ensure patient does not get hypothermic
4. CARE FOR CHEMICAL BURNS	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Protect yourself from exposure to hazardous materials B. Wear gloves, eye protection, and respiratory protection *C. Brush off dry powders *D. Consider flushing with large amounts of water *E. Continue flushing the contaminated area *F. Use caution not to contaminate uninjured areas when flushing or brushing
5. REASSESS	<input type="checkbox"/>	*A. Reassess level of consciousness (AVPU), respiratory status, and patient response

Multiple burns will be treated as per procedures listed in patient assessment.

Ear Avulsed (left)

DRESSINGS AND BANDAGING - OPEN WOUNDS

PROCEDURES		CRITICAL SKILL
1. EMERGENCY CARE FOR AN OPEN WOUND	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Control bleeding *B. Prevent further contamination *C. Bandage dressing in place after bleeding has been controlled *D. Keep patient lying still
2. APPLY DRESSING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Use sterile dressing B. Cover entire wound C. Control bleeding D. Do not remove dressing
3. APPLY BANDAGE	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Do not bandage too tightly. B. Do not bandage too loosely. C. Do not leave loose ends. D. Cover all edges of dressing. E. Do not cover tips of fingers and toes, unless they are injured. F. Bandage from the bottom of the limb to the top (distal to proximal) if applicable.

Avulsion

- *1. Wrap in slightly moistened sterile dressing
- 2. Place in plastic bag or wrap in plastic
- *3. Keep part cool avoid freezing
- *4. Do not place in water or direct contact with ice
- *5. Transport with patient
- 6. Label with patients name

Continue Patient Assessment

2. NECK	<input type="checkbox"/> <input type="checkbox"/>	*A. Check the neck for DOTS *B. Inspect for medical ID	
3. CHEST	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check chest area for DOTS *B. Feel chest for equal breathing movement on both sides *C. Feel chest for inward movement in the rib areas during inhalations	
4. ABDOMEN	<input type="checkbox"/>	*A. Check abdomen (stomach) for DOTS	
5. PELVIS	<input type="checkbox"/> <input type="checkbox"/>	*A. Check pelvis for DOTS *B. Inspect pelvis for injury by touch (Verbally state inspection of crotch and buttocks areas)	
6. LEGS	L <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	R <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check each leg for DOTS B. Inspect legs for injury by touch C. Unresponsive: Check legs for paralysis (pinch inner side of leg on calf) *D. Responsive: Check legs for motion; places hand on bottom of each foot and states "Can you push against my hand?" *E. Check for medical ID bracelet
7. ARMS	L <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	R <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check each arm for DOTS B. Inspect arms for injury by touch C. Unresponsive: Check arms for paralysis (pinch inner side of wrist) *D. Responsive: Check arms for motion (in a conscious patient; team places fingers in each hand of patient and states "Can you squeeze my fingers?" *E. Check for medical ID bracelet

Hand (left) 2nd degree burn

PROCEDURES	BURNS CRITICAL SKILLS	
1. DETERMINE BURN TYPE	<input type="checkbox"/>	*A. Determine type <ul style="list-style-type: none"> ▪ Thermal ▪ Chemical ▪ Electrical

2. DETERMINE BODY SURFACE AREA	<input type="checkbox"/>	*A. Determine Body Surface Area (BSA) using rule of nines
3. BURN CARE (All Types)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Remove patient from source of burn and prevent further contamination *B. Consider the type of burn and stopping the burning process initially with water or saline if appropriate *C. Remove jewelry *D. Continually monitor the airway for evidence of closure *E. Cover the burned area with a dry sterile dressing *F. Do not use any type of ointment, lotion or antiseptic *G. Do not break blisters *H. Ensure patient does not get hypothermic
4. CARE FOR CHEMICAL BURNS	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Protect yourself from exposure to hazardous materials B. Wear gloves, eye protection, and respiratory protection *C. Brush off dry powders *D. Consider flushing with large amounts of water *E. Continue flushing the contaminated area if applicable *F. Use caution not to contaminate uninjured areas when flushing or brushing
5. CARE FOR ELECTRICAL BURNS	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Ensure safety before removing patient from the electrical source *B. If the patient is still in contact with the electrical source or you are unsure, do not approach or touch the patient, contact power company *C. Monitor the patient closely for respiratory and cardiac arrest D. Treat the soft tissue injuries associated with the burn *E. Look for both an entrance and exit wound
6. REASSESS	<input type="checkbox"/>	*A. Reassess level of consciousness (AVPU), respiratory status, and patient response

Multiple burns will be treated as per procedures listed in patient assessment.

Hand (right) 2nd degree burns

PROCEDURES		BURNS	CRITICAL SKILLS
1. DETERMINE BURN TYPE	<input type="checkbox"/>	*A. Determine type <ul style="list-style-type: none"> ▪ Thermal ▪ Chemical ▪ Electrical 	
2. DETERMINE BODY SURFACE AREA	<input type="checkbox"/>	*A. Determine Body Surface Area (BSA) using rule of nines	
3. BURN CARE (All Types)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Remove patient from source of burn and prevent further contamination *B. Consider the type of burn and stopping the burning process initially with water or saline if appropriate *C. Remove jewelry *D. Continually monitor the airway for evidence of closure *E. Cover the burned area with a dry sterile dressing *F. Do not use any type of ointment, lotion or antiseptic *G. Do not break blisters *H. Ensure patient does not get hypothermic	
4. CARE FOR CHEMICAL BURNS	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Protect yourself from exposure to hazardous materials B. Wear gloves, eye protection, and respiratory protection *C. Brush off dry powders *D. Consider flushing with large amounts of water *E. Continue flushing the contaminated area if applicable *F. Use caution not to contaminate uninjured areas when flushing or brushing	
5. REASSESS	<input type="checkbox"/>	*A. Reassess level of consciousness (AVPU), respiratory status, and patient response	

Multiple burns will be treated as per procedures listed in patient assessment.

Continue Patient Assessment

8. BACK SURFACES	□	*A. Check back for DOTS
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IMMOBILIZATION - LONG SPINE BOARD (Backboard)

PROCEDURES	CRITICAL SKILL
1. MOVE THE PATIENT ONTO THE LONG SPINE BOARD	<ul style="list-style-type: none"> <li data-bbox="646 1045 1427 1150">□ A. One First Aid Provider at the head must maintain in-line immobilization of the head and spine <li data-bbox="646 1150 1427 1224">□ B. First Aid Provider at the head directs the movement of the patient <li data-bbox="646 1224 1427 1297">□ C. Other First Aid Provider control movement of the rest of body <li data-bbox="646 1297 1427 1371">□ D. Other First Aid Provider position themselves on same side <li data-bbox="646 1371 1427 1476">□ E. Upon command of First Aid Provider at the head, roll patient onto side toward First Aid Providers <li data-bbox="646 1476 1427 1549">□ F. Quickly assess posterior body, if not already done <li data-bbox="646 1549 1427 1623">□ G. Place long spine board next to the patient with top of board beyond top of head <li data-bbox="646 1623 1427 1770">□ H. Place patient onto the board at command of the First Aid Provider at head while holding in-line immobilization using methods to limit spinal movement <li data-bbox="646 1770 1427 1841">□ I. Slide patient into proper position using smooth coordinated moves keeping spine in alignment

2. PAD VOIDS BETWEEN PATIENT AND LONG SPINE BOARD	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Select and use appropriate padding B. Place padding as needed under the head C. Place padding as needed under torso
3. IMMOBILIZE BODY TO THE LONG SPINE BOARD	<input type="checkbox"/>	A. Strap and secure body to board ensuring spinal immobilization, beginning at shoulder and working toward feet
4. IMMOBILIZE HEAD TO THE LONG SPINE BOARD	<input type="checkbox"/> <input type="checkbox"/>	A. Using head set or place rolled towels on each side of head B. Tape and/or strap head securely to board, ensuring cervical spine immobilization
5. REASSESS	<input type="checkbox"/> <input type="checkbox"/>	*A. Reassess distal circulation, sensation, and motor function *B. Assess patient response and level of comfort

SHOCK

PROCEDURES		CRITICAL SKILL
1. CHECK FOR SIGNS AND SYMPTOMS OF SHOCK	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check for pale (or bluish) skin (in victim with dark skin examine inside of mouth and nailbeds for bluish coloration). *B. Check for cool, clammy skin *C. Check for weakness
2. TREATMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Keep victim lying down B. Cover with blanket to prevent loss of body heat and place a blanket under the patient. (Do not try to place blanket under patient with possible spinal injuries) C. Elevate according to injury *D. Reassure and calm the patient

Option 1: Elevate the lower extremities or foot end of the back board. This procedure is performed in most cases. Place the patient flat, face up and elevate the legs or foot end of the back board 8 to 12 inches. Do not elevate any limbs with possible fractures or pelvic injuries until they have been properly splinted. Remember to consider the mechanism of injury for every patient.

Teams must lift the patient to simulate transport

Fred

1. INITIAL ASSESSMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Verbalize general impression of the patient(s) *B. Determine responsiveness/level of consciousness (AVPU) Alert, Verbal, Painful, Unresponsive *C. Determine chief complaint/apparent life threat
2. ASSESS AIRWAY AND BREATHING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Correctly execute head-tilt/chin-lift or jaw thrust maneuver, depending on the presence of cervical spine (neck) injuries B. Look for absence of breathing (no chest rise and fall) or gasping, which are not considered adequate (within 10 seconds) C. If present, treat sucking chest wound
3. ASSESS FOR CIRCULATION	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Check for presence of a carotid pulse (5-10 seconds) B. If present, control life threatening bleeding C. Start treatment for all other life threatening injuries/conditions (reference Rule 2).

Continue with Patient Assessment

PATIENT ASSESSMENT

PROCEDURES			CRITICAL SKILL
1. HEAD	<input type="checkbox"/>	<input type="checkbox"/>	*A. Check head for DOTS: Deformities, Open wounds, Tenderness and Swelling *B. Check and touch the scalp *C. Check the face *D. Check the ears for bleeding or clear fluids *E. Check the eyes for any discoloration, unequal pupils, reaction to light, foreign objects and bleeding *F. Check the nose for any bleeding or drainage *G. Check the mouth for loose or broken teeth, foreign objects, swelling or injury of tongue, unusual breath odor and discoloration
2. NECK	<input type="checkbox"/>	<input type="checkbox"/>	*A. Check the neck for DOTS *B. Inspect for medical ID
3. CHEST	<input type="checkbox"/>	<input type="checkbox"/>	*A. Check chest area for DOTS *B. Feel chest for equal breathing movement on both sides *C. Feel chest for inward movement in the rib areas during inhalations
4. ABDOMEN	<input type="checkbox"/>		*A. Check abdomen (stomach) for DOTS
5. PELVIS	<input type="checkbox"/>	<input type="checkbox"/>	*A. Check pelvis for DOTS *B. Inspect pelvis for injury by touch (Verbally state inspection of crotch and buttocks areas)
6. LEGS	L <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	R <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check each leg for DOTS B. Inspect legs for injury by touch C. Unresponsive: Check legs for paralysis (pinch inner side of leg on calf) *D. Responsive: Check legs for motion; places hand on bottom of each foot and states "Can you push against my hand?" *E. Check for medical ID bracelet

7. ARMS	L	R	*A. Check each arm for DOTS B. Inspect arms for injury by touch C. Unresponsive: Check arms for paralysis (pinch inner side of wrist) *D. Responsive: Check arms for motion (in a conscious patient; team places fingers in each hand of patient and states "Can you squeeze my fingers?" *E. Check for medical ID bracelet
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

Hand (left) 2nd degree burn

PROCEDURES		BURNS CRITICAL SKILLS	
1. DETERMINE BURN TYPE	<input type="checkbox"/>	<input type="checkbox"/>	*A. Determine type <ul style="list-style-type: none"> ▪ Thermal ▪ Chemical ▪ Electrical
2. DETERMINE BODY SURFACE AREA	<input type="checkbox"/>	<input type="checkbox"/>	*A. Determine Body Surface Area (BSA) using rule of nines
3. BURN CARE (All Types)	<input type="checkbox"/>	<input type="checkbox"/>	*A. Remove patient from source of burn and prevent further contamination *A. Consider the type of burn and stopping the burning process initially with water or saline if appropriate *B. Remove jewelry *C. Continually monitor the airway for evidence of closure *D. Cover the burned area with a dry sterile dressing *E. Do not use any type of ointment, lotion or antiseptic *F. Do not break blisters *G. Ensure patient does not get hypothermic

<p>4. CARE FOR CHEMICAL BURNS</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Protect yourself from exposure to hazardous materials</p> <p>B. Wear gloves, eye protection, and respiratory protection</p> <p>*C. Brush off dry powders</p> <p>*D. Consider flushing with large amounts of water</p> <p>*E. Continue flushing the contaminated area if applicable</p> <p>*F. Use caution not to contaminate uninjured areas when flushing or brushing</p>
<p>5. REASSESS</p>	<input type="checkbox"/>	<p>*A. Reassess level of consciousness (AVPU), respiratory status, and patient response</p>

Multiple burns will be treated as per procedures listed in patient assessment.

Hand (right) 2nd degree burns

PROCEDURES		BURNS
		CRITICAL SKILLS
1. DETERMINE BURN TYPE	<input type="checkbox"/>	*A. Determine type <ul style="list-style-type: none"> ▪ Thermal ▪ Chemical ▪ Electrical
2. DETERMINE BODY SURFACE AREA	<input type="checkbox"/>	*A. Determine Body Surface Area (BSA) using rule of nines
3. BURN CARE (All Types)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Remove patient from source of burn and prevent further contamination *B. Consider the type of burn and stopping the burning process initially with water or saline if appropriate *C. Remove jewelry *D. Continually monitor the airway for evidence of closure *E. Cover the burned area with a dry sterile dressing *F. Do not use any type of ointment, lotion or antiseptic *G. Do not break blisters *H. Ensure patient does not get hypothermic
4. CARE FOR CHEMICAL BURNS	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Protect yourself from exposure to hazardous materials B. Wear gloves, eye protection, and respiratory protection *C. Brush off dry powders *D. Consider flushing with large amounts of water *E. Continue flushing the contaminated area if applicable *F. Use caution not to contaminate uninjured areas when flushing or brushing
5. REASSESS	<input type="checkbox"/>	*A. Reassess level of consciousness (AVPU), respiratory status, and patient response

Multiple burns will be treated as per procedures listed in patient assessment.

SHOCK

PROCEDURES		CRITICAL SKILL
1. CHECK FOR SIGNS AND SYMPTOMS OF SHOCK	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check for pale (or bluish) skin (in victim with dark skin examine inside of mouth and nailbeds for bluish coloration. *B. Check for cool, clammy skin *C. Check for weakness
2. TREATMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Keep victim lying down B. Cover with blanket to prevent loss of body heat and place a blanket under the patient. (Do not try to place blanket under patient with possible spinal injuries) C. Elevate according to injury *D. Reassure and calm the patient

NOTE: GIVE ENVELOPE # 1 AFTER TREATMENT FOR SHOCK IS STARTED AND PROCEDURE #1 COMPLETED.

ENVELOPE # 1

Fred refuses to be transported

Teams must clear the field and stop the clock