Stanislaus County Sheriff Regional Training Division First Aid /CPR Course #21798

Expanded Outline 2017

- I. Role of the public safety first aid provider to include:
 - A. Integration with EMS personnel to include active shooter incidents
 - 1. Communication and coordination with Emergency medical personnel.
 - B. Minimum equipment and first aid kits
 - 1. IFAK
 - 2. Basic first aid kit
 - 3. Personal Protective Equipment (PPE)
 - a. Bloodborne Pathogens
- II. Pre-Test (written) Title 22 Section 100022 (C) The hours for the retraining may be reduced to those hours needed to cover the topics indicated necessary by the pretest.
- III. Heart Attack and sudden cardiac arrest to include:
 - A. Sudden cardiac arrest and early defibrillation
 - Pulse Location
 - 2. Ventilation
 - B. Chain of survival
 - 1. Recognition and activation
 - 2. Early CPR
 - Defibrillation
 - 4. Advanced life support
 - 5. Post-cardiac arrest care
- IV. CPR and AED for adults, children, and infants, following current AHA Guidelines
 - A. Rescue breathing
 - 1. Mouth-to-Mouth
 - 2. Mouth-to-Mask
 - 3. Bag-valve-mask (BVM)
 - B. Chest compressions and CPR/AED
 - 1. Basic AED operation
 - 2. Using the AED
 - 3. Compression depth
 - 4. Compression rate
 - 5. Troubleshooting and other considerations
 - C. Recovery position- on the injured side with support for the victim's back or in a supine position with a soft object.
 - 1. This position allows the drainage from the mouth and prevents the victim's tongue from blocking the airway.
- V. Recognition and identification of adult and pediatric patients for both medical and traumatic emergencies

- A. Performing a primary assessment
 - 1. Check for responsiveness
 - 2. Check pulse
 - 3. Check airway
 - 4. Check for breathing
- B. Performing a secondary assessment
 - 1. Vital signs
 - 2. Head-to-toe assessment
- C. Obtaining a patient history
 - 1. Information relating to the current condition
 - 2. past medical problems

VI. Medical emergencies

- A. Respiratory emergencies
 - 1. Breathing difficulties
 - a. Causes of inadequate breathing (most common)
 - i. Existing illness (emphysema, asthma)
 - ii. Allergic reaction
 - iii. Cardiac emergencies
 - b. COPD
 - i. Disease involving inflammation and thickening of the airway
- B. Allergic reaction and anaphylaxis
 - 1. Assist with administration of Epinephrine (Epi-pen)
- C. Altered mental status
 - 1. Symptoms of altered mental status
 - 2. First aid measures
- D. Diabetic emergencies
 - 1. Administration of oral glucose
- E. Alcohol and drug emergencies
 - 1. Assisted naloxone administration and accessing EMS

VII. Facial injuries

- A. Objects in the eye
 - 1. Stabilize impaled object
 - 2. Cover both eyes
 - 3. Do not apply direct pressure
- B. Chemical in the eye
 - 1. Flush affected eye
 - 2. Do not rub eye
 - 3. Contact poison control
- C. Nosebleed
 - 1. Seated position leaning slightly forward
 - 2. Pinch the nose midway (bone and cartilage meet)
 - 3. Do not pack nostrils
- D. Dental emergencies
 - 1. Ensure airway is clear
 - 2. Control bleeding
 - 3. Transport the tooth
 - 4. In saline, whole milk or victim's saliva

- E. Burns
 - 1. Severity
 - a. First Degree
 - b. Second Degree
 - c. Third Degree
 - 2. First Aid Measures
 - a. Thermal Burns
 - b. Chemical Burns
 - c. Electrical Burns
 - d. Radiation Burns
 - Indicators
 - a. Acute exposure
 - b. Chronic exposure

VIII. Environmental emergencies

- A. Drowning
 - 1. Respiration & circulation is priority
 - 2. Dangers of attempting a water rescue
- IX. Bites and stings
 - A. Insect bites and stings
 - 1. Usual reactions:
 - i. Local Swelling
 - ii. Minor pain
 - iii. Itching
 - 2. Allergic Reaction
 - i. Burning sensation
 - ii. Hives
 - iii. Swollen lips & tongue
 - iv. Difficulty breathing
 - v. Respiratory failure
 - B. Animal and human bites
 - 1. Control bleeding
 - Assisted administration of epinephrine auto-injector and accessing EMS
 - 1. May not directly administer unless specific training is completed.
 - i. Department optional skill requires LEMSA approval for training and deployment.

X. Poisoning

- A. Exposure to chemical, biological, radiological or nuclear (CBRN) substances
 - 1. Recognition of exposure
 - 2. Scene safety
- B. Poison control system
 - 1. 1-800-222-1222

- XI. Psychological emergencies
 - A. Causes of psychological emergencies
 - 1. Mental illness
 - 2. Medication / Drugs
 - 3. Involvement in an incident
 - i. Traffic collision
 - ii. Witness or victim of a violent crime
 - B. Signs & Symptoms of psychological emergencies
 - Extreme agitation / aggression or passivity
 - 2. Increased heart rate / shortness of breath
 - 3. Anxiety / extreme perspiration
 - 4. Unresponsiveness / Tunnel vision

XII. Patient movement

- A. Emergency movement of patients
 - 1. Spinal immobilization
 - i. Reduce the risk of injury
 - 2. Imminent danger
 - 3. Unable to assess
- B. Proper procedures for moving a victim
 - 1. Shoulder Drag
 - 2. Lifts and carries
 - i. Soft litters
 - ii. Manual extraction including fore/aft, side-by-side, shoulder/belt
- XIII. Tactical and rescue first aid principles applied to violent circumstances
 - A. Principles of tactical rescue and first aid
 - 1. Movement to threat vs casualty care
 - B. Determining treatment priorities
 - 2. Triage –green, yellow, red or black
- XIV. Orientation to the EMS system, including
 - A. 9-1-1 access
 - 1. Public Safety Answering Point
 - B. Interaction with EMS personnel
 - 1. First Responder
 - 2. Emergency Medical Technician
 - 3. Paramedic
 - C. Identification of local EMS and trauma systems
 - Receiving facility Trauma Center
- XV. Trauma emergencies
 - A. Soft tissue injuries and wounds
 - 1. Abrasion
 - 2. Incision
 - Laceration
 - 4. Puncture

- B. Amputations and impaled objects
 - 1. Transport amputated part with victim (keep on ice)
 - 2. Do not attempt to remove object
- C. Chest and abdominal injuries
 - 1. Review of basic treatment for chest wall injuries
 - i. Blunt trauma
 - ii. Penetrating object
 - iii. Compression
 - 2. Application of chest seals
- D. Head, neck or back injury
 - 1. Spinal immobilization
 - 2. Mechanism of injury
 - Mental status
 - 4. Vital signs
 - 5. Visible injury
 - 6. Appearance
- E. Musculoskeletal trauma and splinting
 - 1. Direct
 - 2. Indirect
 - 3. Twisting
 - i. Splint in position found, may need to secure to body
- F. Internal bleeding
 - Activate EMS
 - 2. Place victim in comfortable position
 - 3. Treat for shock
- G. Control of bleeding, including direct pressure, tourniquet, hemostatic dressings, chest seals and dressings
 - Training in the use of hemostatic dressing shall result in competency in the application of hemostatic dressing. Included in the training shall be the following topics and skills:
 - ii. Review of basic methods of bleeding control to include but not be limited to:
 - *direct pressure
 - *pressure bandages
 - *tourniquet
 - *hemostatic dressing and wound packing
 - ii. Types of hemostatic dressings
 - *QuikClot Combat Gauze
 - *HemCon ChitoFlex PRO Dressing
 - *Celox Gauze

XVI. Legal issues

- A. Officer/Deputies responsibilities
 - Assess emergency situation
 - 2. Initiate appropriate emergency medical care with the scope of the officer's training and specific agency policy

- B. Duty to act
 - 1. 1799.102 H&S Code
 - i. Scope of their employment
 - ii. Good Faith
 - iii. Scope of their training and specific agency policy

XVII. Safety protocols

- A. Scene Size-Up
 - Location
 - 2. Type of emergency
 - 3. Nature of ill/Injured Person
 - 4. Additional resources
 - 5. Action required
- B. Safety precautions
 - 1. Exposure to biological and CBRN substances
 - 2. Armed suspects
 - 3. Unsafe scene conditions / hazards / explosives / animals

XVIII. Assessment of the students.

- A. Oral assessment
 - 1. Roles of a public safety first aid provider
 - 2. Sudden Cardiac Arrest
 - 3. Facial injuries
 - Drowning
 - 5. Bites and stings
 - 6. Poisoning
 - 7. Psychological Emergencies
- B. Demonstration assessment (in each topic area)
 - 1. Adult / Infant CPR (dummies)
 - 2. Adult / Infant Rescue breathing (dummies)
 - 3. Adult / Infant Obtrusive Airway (dummies)
 - 4. AED training on the dummies
 - 5. Officer down scenario Student will demonstrate:
 - *Tactical and rescue first aid principles
 - *Recognition of traumatic emergency
 - *Interaction with EMS personal
 - *Trauma emergency
 - *Patent movement
- C. Final Test (written) Title 22 Section 100022 (B) covering those topics included in the retraining for those person's failing to pass the pretest.