VERNON POLICE DEPARTMENT

Training Outline (2019)

COURSE TITLE: First Aid and CPR - Review & Skill Competency Evaluations

DATE(S):

LENGTH: 2-3 hours (every two years)

LOCATION: Vernon Police Department – Briefing Room

INSTRUCTOR(S): Sergeant Ignacio Estrada, Officer Jason Lucas

PURPOSE: This instructor led skills demonstration course is part of the California

Commission on Police Officer Standards and Training's (P.O.S.T.) *First Aid /CPR/AED* online retraining course. This course meets the legislative refresher training mandate for

First Aid, CPR, and AED (PC 13518) and Title 22, Division 9, Chapter 1.5.

LEARNING OUTCOME:

As first responders, peace officers should assume the primary responsibility for:

- Ensuring peace officer safety as well as the safety of ill or injured individuals and the public
- Evaluating the emergency situation (scene size-up)
- Initiating actions regarding the well-being and care of the ill or injured persons
- Taking necessary enforcement actions related to the incident

OBJECTIVES:

Student(s) will discuss and demonstrate the proper care and treatment for the following medical emergencies:

1. Adult Cardiopulmonary Resuscitation:

- a) Verbalizes Scene Safety BSI/PPEs
- b) Checks responsiveness (unresponsive patient)
- c) Verbalizes activation of EMS
- d) Opens airway, checks breathing/circulation (5-10 seconds) (Pulse, no breathing)
- e) Opens airway, delivers one rescue breath each 5 seconds, using CPR mask and bag valve device (continues for 2 minutes, re-assesses) (No pulse, no breathing)
- f) Provides 30 chest compressions bottom ½ of sternum, 100-120/minute 2-2.4 inches deep, uses heel of "stacked" hands, full recoil after each compression, delivers two breaths for each "cycle"
- g) After 5 cycles or after each 2 minutes, re-checks pulse and breathing

2. Clearing Obstructed Airway (Conscious Adult/Child):

- a) Verbalizes scene safety/BSI/PPEs
- b) Determines if patient is fully obstructed, asks if victim can speak
- c) Gets permission from the adult victim to treat the obstruction
- d) Positions behind patient (bladed stance), encircles abdomen with arms, places thumb side of fist just above patient's navel
- e) Provides abdominal thrusts, inward and upward in "J" motion
- f) Continues thrusts until object expelled or patient becomes unconscious
- g) Verbalizes carefully assisting unconscious patient to the floor
- h) Verbalizes beginning steps for unconscious obstructed airway
- i) Provides standing "chest thrusts" technique for pregnant/obese victims
- j) Verbalizes advice to medically assess patient after airway cleared

3. Clearing Obstructed Airway (Conscious Infant)

- a) Verbalizes scene safety/BSI/PPEs activation of EMS
- b) Verbalizes signs of obstruction (color, anxiety, unable to cry)
- c) Positions infant in head-down, well-supported position
- d) Provides 5 (five) back slaps (light blows) between shoulder blades
- e) Positions infant face up, head down, well-supported position
- f) Provides 5 (five) chest thrusts (as in CPR)
- g) Continues cycle of back slaps/chest thrusts for 5 cycles
- h) After five cycles, airway clear and baby begins to cry slightly, verbalizes continuing to monitor until fully clear, advises to seek medical follow-up

4. Child Cardiopulmonary Resuscitation (Unwitnessed Event):

- a) Verbalizes scene safety/BSI/PPEs
- b) Checks responsiveness (unwitnessed/unresponsive patient)
- c) Verbalizes activation of EMS (unless needs to leave patient to do so)
- d) Opens airway, delivers one rescue breath each 3 seconds, using CPR mask, and bag valve device (verbalizes using proper size bag)
- e) After 2 minutes re-checks pulse/breathing/activates EMS if not already done (no pulse, no breathing)
- f) Provides 30 chest compressions, bottom ½ of sternum, 100-120/minute about 2 inches deep, uses heel of one hand or "stacked" hands, full recoil after each compression, delivers two breaths for each "cycle"
- g) After 5 cycles, or after each 2 minutes, activates EMS re-checks pulse and breathing

5. Child Cardiopulmonary Resuscitation (Witnessed Event):

- a) Verbalizes scene safety/BSI/PPEs
- b) Checks responsiveness (witnessed/unresponsive patient)
- c) Verbalizes activation of EMS
- d) Opens airway, checks breathing/circulation (5-10 seconds) (Pulse, no breathing)
- e) Opens airway, delivers one rescue breath each 3 seconds, using CPR mask, and bag valve device (verbalizes using proper size bag)
- f) After 2 minutes re-checks pulse/breathing (No pulse, no breathing)

- g) Provides 30 chest compressions bottom ½ of sternum, 100-120/minute about 2 inches deep, uses heel of one hand or "stacked" hands, full recoil after each compression, delivers two breaths for each "cycle"
- h) After 5 cycles, or after each 2 minutes, activates EMS re-checks pulse and breathing

6. Application of Chest Seals:

- a) Verbalizes scene safety/BSI/PPEs
- b) Checks for signs/symptoms of pneumothorax, verbalizes, checks wound, checks breath sounds, signs of shock etc.
- c) Checks for entry/exit wounds
- d) Exposes wound site(s)
- e) Wipes wound area(s) as clean and dry as possible
- f) Applies Chest Seal(s) (use of vented seal preferred)
- g) After application of seal places victim on injured side, or in position of comfort, as patient condition dictates
- h) Monitors victim's breathing function verbalizes need to "burp" non-vented chest seals if breathing becomes compromised
- i) Verbalizes treating victim for shock as appropriate

7. Secondary Survey (Trauma):

- a) Verbalizes scene safety
- b) Verbalizes/ensures BSI, PPEs
- c) Checks responsiveness (Responsive/conscious patient)
- d) Activates EMS as appropriate
- e) Verbalizes general impression (complexion/LOC, etc.)
- f) Verbalizes need to treat life-threatening issues first
- g) Conducts head-to-toe, "hands-on" assessment
- h) Determines vitals (pulse/respirations/etc.)
- i) Identifies chief complaint/injuries
- j) Establishes/verbalize treatment priorities

8. Bleeding Control Techniques – Tourniquets (S.O.F.T.) Plus Treat For Shock:

- a) Verbalizes scene safety
- b) Verbalizes/utilizes PPEs
- c) Exposes/visualizes bleeding site
- d) Applies direct pressure at wound site (gloved hand or compress) (Bleeding continues)
- e) Verbalizes adding additional dressing (not removing first one) (Bleeding continues)
- f) Applies pressure dressing (checks pulse after application) (Bleeding continues)
- g) Applies commercially available tourniquet (proximal to wound, not over joints) (Bleeding continues)

9. Bleeding Control Techniques – Hemostatic Dressing / Wound Packing Plus Treat For Shock:

a) Verbalizes scene safety

- b) Verbalizes/utilizes PPEs
- c) Exposes/visualizes bleeding site
- d) Applies direct pressure at wound site (gloved hand or compress) (Bleeding continues)
- e) Verbalizes adding additional dressing (not removing first one) (Bleeding continues)
- f) Applies pressure dressing (checks pulse after application) (Bleeding continues)
- g) Applies commercially available tourniquet (proximal to wound, not over joints) (Bleeding continues)
- h) Re-evaluates wound/bleeding applies 2nd tourniquet (above first) (Bleeding continues)
- i) Visualizes wound/bleeding, packs site with hemostatic dressing
- j) Applies direct pressure over hemostatic dressing at least 3 minutes (Bleeding controlled)
- k) Recognizes/verbalizes signs and symptoms of shock
- 1) Places patient in "shock" position/maintains body temperature, monitors ABCs

Note: A record with the associated CPT Credit will be sent to the student's POST Training Profile when they complete the self-paced online portion AND enter the date of the instructor-led skills demonstration.



ADULT CARDIOPULMONARY RESUSCITATION

Student Name		

Skill Step	Critical Performance Criteria	PASS	FAIL
1	Verbalizes Scene Safety BSI/PPEs		
2	Checks responsiveness (unresponsive patient)		
3	Verbalizes activation of EMS		
4	Opens airway, checks breathing/circulation (5-10 seconds) (Pulse, no breathing)		
5	Opens airway, delivers one rescue breath each 5 seconds, using CPR mask and bag valve device (continues for 2 minutes, re-assesses) (No pulse, no breathing)		
6	Provides 30 chest compressions bottom ½ of sternum, 100-120/minute 2-2.4 inches deep, uses heel of "stacked" hands, full recoil after each compression, delivers two breaths for each "cycle"		
7	After 5 cycles or after each 2 minutes, re-checks pulse and breathing		
Instructor	Comments		
	Instructor Signature		
	Print Instructor Name		
	Date		



CLEARING OBSTRUCTED AIRWAY CONSCIOUS ADULT/CHILD

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Skill Step	Critical Performance Criteria	PASS	FAIL
1	Verbalizes scene safety/BSI/PPEs		
2	Determines if patient is fully obstructed, asks if victim can speak		
3	Gets permission from the adult victim to treat the obstruction		
4	Positions behind patient (bladed stance), encircles abdomen with arms, places thumb side of fist just above patient's navel		
5	Provides abdominal thrusts, inward and upward in "J" motion		
6	Continues thrusts until object expelled or patient becomes unconscious		
7	Verbalizes carefully assisting unconscious patient to the floor		
8	Verbalizes beginning steps for unconscious obstructed airway		
9	Provides standing "chest thrusts" technique for pregnant/obese victims		
10	Verbalizes advice to medically assess patient after airway cleared		
Instructor C	Comments	,	

Instructor Signature	
Print Instructor Name	
Date	



CLEARING OBSTRUCTED AIRWAY INFANT (CONSCIOUS)

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Skill Step	Critical Performance Criteria	PASS	FAIL
1	Verbalizes scene safety/BSI/PPEs activation of EMS		
2	Verbalizes signs of obstruction (color, anxiety, unable to cry)		
3	Positions infant in head-down, well-supported position		
4	Provides 5 (five) back slaps (light blows) between shoulder blades		
5	Positions infant face up, head down, well-supported position		
6	Provides 5 (five) chest thrusts (as in CPR)		
7	Continues cycle of back slaps/chest thrusts for 5 cycles		
8	After five cycles, airway clear and baby begins to cry slightly, verbalizes continuing to monitor until fully clear, advises to seek medical follow-up		
Instructor	Comments	1	

Instructor Signature	
Print Instructor Name	
Date	



CHILD CARDIOPULMONARY RESUSCITATION UNWITNESSED EVENT

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Skill Step	Critical Performance Criteria	PASS	FAIL
1	Verbalizes scene safety/BSI/PPEs		
2	Checks responsiveness (unwitnessed/unresponsive patient)		
3	Verbalizes activation of EMS (unless needs to leave patient to do so)		
4	Opens airway, delivers one rescue breath each 3 seconds, using CPR mask, and bag valve device (verbalizes using proper size bag)		
5	After 2 minutes re-checks pulse/breathing/activates EMS if not already done (no pulse, no breathing)		
6	Provides 30 chest compressions, bottom ½ of sternum, 100-120/minute about 2 inches deep, uses heel of one hand or "stacked" hands, full recoil after each compression, delivers two breaths for each "cycle"		
7	After 5 cycles, or after each 2 minutes, activates EMS rechecks pulse and breathing		
Instructor	Comments		

Instructor Signature	
Print Instructor Name	
Date	



CHILD CARDIOPULMONARY RESUSCITATION WITNESSED EVENT

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Skill Step	Critical Performance Criteria	PASS	FAIL
1	Verbalizes scene safety/BSI/PPEs		
2	Checks responsiveness (witnessed/unresponsive patient)		
3	Verbalizes activation of EMS		
4	Opens airway, checks breathing/circulation (5-10 seconds) (<i>Pulse, no breathing</i>)		
5	Opens airway, delivers one rescue breath each 3 seconds, using CPR mask, and bag valve device (verbalizes using proper size bag)		
6	After 2 minutes re-checks pulse/breathing (No pulse, no breathing)		
7	Provides 30 chest compressions bottom ½ of sternum, 100-120/minute about 2 inches deep, uses heel of one hand or "stacked" hands, full recoil after each compression, delivers two breaths for each "cycle"		
8	After 5 cycles, or after each 2 minutes, activates EMS rechecks pulse and breathing		
Instructor Comments			

Instructor Signature	
Print Instructor Name	
Date	



APPLICATION OF CHEST SEALS

Student/Instructor Name

Critical Performance Criteria	PASS	FAIL		
Verbalizes scene safety/BSI/PPEs				
Checks for signs/symptoms of pneumothorax, verbalizes, checks wound, checks breath sounds, signs of shock etc.				
Checks for entry/exit wounds				
Exposes wound site(s)				
Wipes wound area(s) as clean and dry as possible				
Applies Chest Seal(s) (use of vented seal preferred)				
After application of seal places victim on injured side, or in position of comfort, as patient condition dictates				
Monitors victim's breathing function verbalizes need to "burp" non-vented chest seals if breathing becomes compromised				
Verbalizes treating victim for shock as appropriate				
Evaluator Comments				
	Verbalizes scene safety/BSI/PPEs Checks for signs/symptoms of pneumothorax, verbalizes, checks wound, checks breath sounds, signs of shock etc. Checks for entry/exit wounds Exposes wound site(s) Wipes wound area(s) as clean and dry as possible Applies Chest Seal(s) (use of vented seal preferred) After application of seal places victim on injured side, or in position of comfort, as patient condition dictates Monitors victim's breathing function verbalizes need to "burp" non-vented chest seals if breathing becomes compromised Verbalizes treating victim for shock as appropriate	Verbalizes scene safety/BSI/PPEs Checks for signs/symptoms of pneumothorax, verbalizes, checks wound, checks breath sounds, signs of shock etc. Checks for entry/exit wounds Exposes wound site(s) Wipes wound area(s) as clean and dry as possible Applies Chest Seal(s) (use of vented seal preferred) After application of seal places victim on injured side, or in position of comfort, as patient condition dictates Monitors victim's breathing function verbalizes need to "burp" non-vented chest seals if breathing becomes compromised Verbalizes treating victim for shock as appropriate		

Evaluator Signature	
Print Evaluator Name	
Date	



SECONDARY SURVEY (TRAUMA)

Student Name

Critical Performance Criteria	PASS	FAIL
Verbalizes scene safety		
Verbalizes/ensures BSI, PPEs		
Checks responsiveness (Responsive/conscious patient)		
Activates EMS as appropriate		
Verbalizes general impression (complexion/LOC, etc.)		
Verbalizes need to treat life-threatening issues first		
Conducts head-to-toe, "hands-on" assessment		
Determines vitals (pulse/respirations/etc.)		
Identifies chief complaint/injuries		
Establishes/verbalize treatment priorities		
Instructor Comments		
	Verbalizes scene safety Verbalizes/ensures BSI, PPEs Checks responsiveness (Responsive/conscious patient) Activates EMS as appropriate Verbalizes general impression (complexion/LOC, etc.) Verbalizes need to treat life-threatening issues first Conducts head-to-toe, "hands-on" assessment Determines vitals (pulse/respirations/etc.) Identifies chief complaint/injuries Establishes/verbalize treatment priorities	Verbalizes scene safety Verbalizes/ensures BSI, PPEs Checks responsiveness (Responsive/conscious patient) Activates EMS as appropriate Verbalizes general impression (complexion/LOC, etc.) Verbalizes need to treat life-threatening issues first Conducts head-to-toe, "hands-on" assessment Determines vitals (pulse/respirations/etc.) Identifies chief complaint/injuries Establishes/verbalize treatment priorities

Instructor Signature
Print Instructor Name
Date



BLEEDING CONTROL TECHNIQUES – Tourniquets C.A.T-T / S.W.A.T-T / S.O.F-T/ PLUS TREAT FOR SHOCK

Student/Instructor Name

Critical Performance Criteria	PASS	FAIL
Verbalizes scene safety		
Verbalizes/utilizes PPEs		
Exposes/visualizes bleeding site		
Applies direct pressure at wound site (gloved hand or compress) (Bleeding continues)		
Verbalizes adding additional dressing (not removing first one) (Bleeding continues)		
Applies pressure dressing (checks pulse after application) (Bleeding continues)		
Applies commercially available tourniquet (proximal to wound, not over joints) (<i>Bleeding continues</i>)		
omments		
	Verbalizes scene safety Verbalizes/utilizes PPEs Exposes/visualizes bleeding site Applies direct pressure at wound site (gloved hand or compress) (Bleeding continues) Verbalizes adding additional dressing (not removing first one) (Bleeding continues) Applies pressure dressing (checks pulse after application) (Bleeding continues) Applies commercially available tourniquet (proximal to wound, not over joints) (Bleeding continues)	Verbalizes scene safety Verbalizes/utilizes PPEs Exposes/visualizes bleeding site Applies direct pressure at wound site (gloved hand or compress) (Bleeding continues) Verbalizes adding additional dressing (not removing first one) (Bleeding continues) Applies pressure dressing (checks pulse after application) (Bleeding continues) Applies commercially available tourniquet (proximal to wound, not over joints) (Bleeding continues)

Evaluator Signature	
Print Evaluator Name	
Date	



BLEEDING CONTROL TECHNIQUES – Hemostatic Dressing/Wound Packing PLUS TREAT FOR SHOCK

Student,	Instructor	Name
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Skill Step	Critical Performance Criteria	PASS	FAIL
1	Verbalizes scene safety		
2	Verbalizes/utilizes PPEs		
3	Exposes/visualizes bleeding site		
4	Applies direct pressure at wound site (gloved hand or compress) (Bleeding continues)		
5	Verbalizes adding additional dressing (not removing first one) (Bleeding continues)		
6	Applies pressure dressing (checks pulse after application) (Bleeding continues)		
7	Applies commercially available tourniquet (proximal to wound, not over joints) (<i>Bleeding continues</i>)		
8	Re-evaluates wound/bleeding applies 2 nd tourniquet (above first) (<i>Bleeding continues</i>)		
9	Visualizes wound/bleeding, packs site with hemostatic dressing		
10	Applies direct pressure over hemostatic dressing at least 3 minutes (<i>Bleeding controlled</i>)		
11	Recognizes/verbalizes signs and symptoms of shock		
12	Places patient in "shock" position/maintains body temperature, monitors ABCs		
Evaluator Comments			

Evaluator Signature			
Print Evaluator Name			
Date			