

Problem 1 – Points to review and treatment

ABCD First – B as in urgent need to control bleeding first

Hold direct pressure with gloved hand immediately for min of 3 mins

Typically, would splint radius/ulna/hand. Discuss RISE. But for this problem OEC tech can verbalize splinting.

When apply tourniquet: Place 2 to 3 inches above injury and tighten until bleeding stop. Please remember to note and mark on Pt.; time and date tourniquet was applied.

Remember to send amputated thumb with Pt as transfer to EMS. Best to wrap thumb in Sterile or clean gauze and put in plastic bag. Keep cold/on-ice (but not ice direct to skin).

Discuss Pt with a CR greater than 2 seconds. PT. needs to transport to Level 1 trauma center for immediate surgery.

Problem 2 – Points to review and treatment

ABCD – Always ABC first. Be ready to assist ventilations.

Call for AED

Unconscious PT.; need to be concerned for SMR(Spinal Motion Restriction)?

Admin Narcan - remember: there are no contraindications.

Wait 3-5 min and admin second dose if needed. After administer; put in recovery position. Monitor Vitals

BVM with supplemental O2 as soon as possible. Most important is to manage airway at all times and assist ventilations as needed.

Oral Airway. Might want to wait if patient has patent airway or can get in

Recovery Position. If Narcan is effective, probably will regain consciousness.

Problem 3 – Points to review and treatment

ABCD – Make sure bleeding is control before move on. May use Pt. to assist

Care for an Avulsion and replacing flap.

Thoughts on splinting and ice for Pt leg to help bleeding control: RISE.

Animal bite: thoughts of rabies or other infections. Most likely not with a police K-9 dog. But keep in mind

Medication Eliquis. Did OEC tech ask what it was for? Discuss concern for a Pt. on blood thinner that is bleeding.

Problem 4 – Points to review and treatment

Scene safe; weapon secured and out of harms way?

ABCD First – B as in urgent need to control bleeding first (getting the hint yet)

Direct pressure with glove or gauze for min 3 mins

Discuss proper packing wound method.

Discuss only Hemostatic/Combat/Z-fold gauze and usage. If use, best to take combat gauze wrapper and tape to or wrap around injury so hospital know it is in use on wound. Demo was complete beginning of our station.

Reminder: Look for exit wound and treat if needed.

Be prepared Tourniquet may be needed. See Pt. #1 notes on Tourniquet.

Problem 5 – Points to review and treatment

ABCD (including need for spinal motion restriction)

Discuss assessment and interaction with Child versus adult. IE smile/friendly voice, crouch down and interact at child height level, use simple words, use a familiar face when possible (mom/dad) and etc.

Security or Rangers a good idea (fire pit and fall)?

Peds C-Collar or need to use other padding to secure C-spine. Remember: head of baby/child is typically larger in proportion to body as compared to adult.

Hand Burns: reminder to wrap fingers individually and not the entire hand together.