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FIRST AID AND CPR
8-Hour (Refresher)
Expanded Course Outline
Updated: 2016
Eric Thomson

1. Law Enforcement and Emergency Medical Services
 - a. Orientation to the EMS system
 - i. 9-1-1 access
 - ii. Enhanced 9-1-1
 - b. Interaction with EMS personnel
 - i. Jurisdictional disagreements
 - ii. Public expectation
 - iii. Pre-event planning and familiarization
 - c. Identification of local EMS and trauma systems
 - i. Local EMS resources and expectations
 - ii. Local trauma protocols
 - d. Integration with EMS personnel
 - i. Understanding the needs of EMS responders
 - ii. Examples of major incidents between LE and EMS
 - iii. Patient care and crime scenes
 - e. Peace Officer Roles and Responsibilities
 - i. Responding to the scene
 - ii. Ensuring officer safety as well as the safety of ill or injured individuals and the public
 - iii. Evaluating the emergency situation
 - iv. Taking necessary enforcement actions related to the incident
 - v. Initiating actions regarding the well-being and care of the ill or injured persons
 - f. Peace Officer Welfare and Safety
 - i. Chain of transmission of infectious pathogens
 1. Being present
 2. Entry site
 3. Quantity and/or susceptibility
 - ii. Universal precautions
 - g. Minimum equipment and first aid kits
 - i. Penal Code Section 13518.1 (pocket mask)
 - ii. Tourniquet, occlusive dressing, AED
 - iii. Personal Protective Equipment (PPE)
 1. Gloves
 2. Eye protection
 3. Masks / gowns
 4. Ventilation devices
 - iv. Bloodborne pathogens
 1. Awareness

- 2. Precautions
 - 3. Reporting
 - v. Airborne Transmissible Diseases
 - 1. Awareness
 - 2. Precautions
 - 3. Reporting
 - vi. Decontamination considerations
 - 1. Removal of contaminated gloves
 - 2. Equipment, uniforms and shoes
 - h. Legal Protections Regarding Emergency Medical Services
 - i. Act within scope of their employment
 - ii. Act in good faith
 - iii. Provide a standard of care that is within the scope of their training and agency policy
2. Victim Assessment
- a. Single Victim
 - i. Primary assessment
 - 1. Responsiveness
 - 2. Airway
 - 3. Breathing
 - 4. Circulation
 - ii. Secondary assessment
 - 1. Vital signs
 - 2. Head-to-toe assessment
 - 3. Patient history
 - b. Multiple Victim Assessment
 - i. Triage system
 - c. Moving a Victim
 - i. When to move
 - 1. Unable to treat
 - 2. Scene unsafe
 - ii. Techniques
 - 1. Shoulder drag
 - a. Use hands and grasp the victim under the armpits
 - b. Stabilize the victim's head and neck to reduce the risk of injury
 - c. Carefully lift the victim, keeping the head and shoulders as close to the ground as possible
 - d. Drag the victim so that the head, torso, and legs remain in a straight line
 - e. Do not pull sideways.
 - f. Gently place the victim in the new location
 - g. Assess the victim's condition
 - 2. Lifts and carries:
 - a. Soft litters

- b. Manual extraction including fore/aft, side-by-side, shoulder/belt

3. Basic Life Support

- a. Sudden cardiac arrest
 - i. American Heart Association science updates 2015
 - 1. Focus on immediate compressions
 - 2. Delivery of shock from AED within 3 minutes
- b. Chain of survival (Out-of-hospital)
 - i. Recognition and early activation of EMS
 - ii. Immediate high-quality CPR
 - iii. Rapid defibrillation
 - iv. Basic and advanced EMS
 - v. Advanced life support and post-arrest care
- c. Soft tissue injuries and wounds
 - i. Review of basic treatment
 - ii. Dressings and Bandages
 - iii. Bleeding / shock control
- d. Amputations and impaled objects
 - i. Review of basic treatment
 - ii. Bleeding / shock control
- e. CPR and AED for adults, children, and infants (Current AHA Guidelines)
 - i. Assessment
 - 1. Responsiveness
 - a. Speak with the victim
 - b. If the victim does not respond, officer should tap the victim or shout
 - 2. Pulse
 - a. Place an index and middle finger on the front of the victim's throat at the largest cartilage of the victim's larynx
 - b. Slide the fingers off the victim's throat to the side of the neck toward the officer
 - c. Position fingers between the trachea and the large muscles on the side of the victim's neck for 5-10 seconds
 - 3. Breathing
 - a. Take a position, officer's ear near the victim's mouth and eyes, looking toward the victim's chest
 - b. Look for the rise and fall of the chest
 - c. Listen for the sound of breathing
 - d. Feel for the breath from the victim's nose or mouth
 - ii. Compressions
 - 1. Location, depth, rate
 - 2. Ratios: 1 rescuer vs team rescue
 - iii. Ventilation
 - 1. Head-tilt/chin-lift maneuver

- a. Provides maximum airway opening
 - b. Do not use if suspected head, neck or spinal injury
 - 2. Jaw-thrust maneuver
 - a. Use if head, neck or spinal injury is suspected
 - b. Open airway on an unconscious victim
 - c. Allows the airway to be opened without moving the victim's head or neck
- iv. Rescue breathing
 - 1. Every 5-6 seconds when victim has a pulse but not breathing
- v. Mouth-to-Mouth
 - 1. Pinch nose
 - 2. Infants-Officer's mouth covers infant's nose and mouth
- vi. Mouth-to-Mask
 - 1. Use one-way valve for protection
- vii. Bag-valve-mask (BVM)
 - 1. Assemble to use with or without supplemental oxygen
 - 2. Meant to be used with more than one rescuer
- f. Automated External Defibrillator (AED)
 - i. Basic AED operation
 - ii. Using the AED
 - iii. Troubleshooting and other considerations
- g. Recovery position
 - i. Spinal injury precautions
- h. Airway Obstructions
 - i. Minor obstruction
 - 1. Allow victim to cough / leave alone
 - ii. Severe obstruction
 - 1. Adult
 - a. Abdominal thrusts
 - b. Chest thrusts
 - c. CPR
 - 2. Child
 - a. Abdominal thrusts
 - b. Chest thrusts
 - c. CPR – look for item in mouth during ventilation
 - 3. Infant
 - a. Back blows
 - b. Chest thrusts
 - c. CPR – look for item in mouth during ventilation
 - 4. Pregnant or obese individual
 - a. Chest thrusts (standing)
 - b. CPR – look for item in mouth during ventilation
- i. Rescue Breathing
 - i. Pulse but not breathing- give breath every 5-6 seconds
- j. Bleeding Control

- i. Soft tissue injuries and wounds
 - 1. Review of basic treatment
 - 2. Dressings and Bandages
 - 3. Shock control
- ii. Amputations and impaled objects
 - 1. Review of basic treatment
 - 2. Shock control
- iii. Internal bleeding
 - 1. Indictors
 - 2. Shock control
- iv. Bleeding control techniques
 - 1. Direct pressure
 - 2. Pressure points
 - 3. Tourniquets

k. Shock

i. Indicators

- 1. Altered mental status
 - a. Confusion
 - b. Anxiety
 - c. Restlessness
 - d. Combativeness
 - e. Sudden unconscious
- 2. Pale, cool, moist skin
- 3. Profuse seeping
- 4. Thirst, nausea, vomiting
- 5. Blue/gray lips, nail beds, tongue, ears
- 6. Dull eyes
- 7. Dilated pupils
- 8. Rapid pulse
- 9. Weak pulse
- 10. Abnormal respiration rate
- 11. Shallow labored breathing

ii. Bleeding and temperature control

- 1. Control all external bleeding
- 2. Place victim in appropriate position
- 3. Be alert for vomiting
- 4. Maintain victim's body temperature
- 5. Place victim on back with legs elevated 6-12 inches (unless spinal injury)

4. Traumatic Injuries

a. Head Injuries

i. Indicators

- 1. Mechanism of injury
 - a. Striking vehicle windshield
 - b. Blow to the head
 - c. falls

2. Mental status
 - a. Agitated, confused, combative
 - b. Appears intoxicated
 - c. Decreased level of consciousness
 - d. Loss of short term memory
 - e. Loss of consciousness
3. Vital signs
 - a. Abnormal breathing patterns
 - b. Decreased pulse
 - c. General deterioration of vital signs
4. Visible injury
 - a. Deformity of the head or skull
 - b. Visible bone fragments
5. Appearance
 - a. Clear or bloody fluid from the ears or nose
 - b. Unequal pupils
 - c. Bruising behind ears
 - d. Discoloration around eyes
 - e. Paralysis
 - f. Priapism

ii. Treatment

1. Do not move victim's head
 2. Activate EMS
 3. Control bleeding
 4. Check for cerebrospinal fluid in ears/nose and bandage loosely
 5. Be prepared for projectile vomiting
 6. Treat for shock
 7. Spinal immobilization
 - a. Manual stabilization technique
 - b. Awareness of market devices
 - i. Collars, boards, extraction devices
- b. Chest and Abdominal Injuries
- i. Review of basic treatment for chest wall injuries
 1. Treat for shock
 2. Control bleeding
 - a. Application of chest seals
 - b. Moist sterile dressings (non-open chest wounds)
 3. Immobilize penetrating objects
 4. Secondary survey-continue monitoring
 5. Positioning
 - a. Recovery position (no spinal injury)
 - b. Supine (spinal injury)
- c. Bone, Joint, and Muscle Injuries
- i. Expose injury site
 - ii. Assess for fractures

- iii. Control excessive bleeding
 - iv. Treat for shock
 - v. Apply dressing and bandages to immobilize injury
 - 1. Immobilize bones above and below the joint
 - 2. Do not attempt to manipulate or straighten limbs
 - 3. Leave fingers and toes exposed unless affected
 - 4. Check for circulation below injury site
 - vi. Bleeding / shock control
 - vii. Improvisational splinting
- d. Burns
 - i. Degrees
 - 1. First, Second, Third
 - ii. Types and Treatment
 - 1. Thermal
 - 2. Chemical
 - 3. Electrical
 - 4. Radiation
- e. Facial injuries
 - i. Objects in the eye
 - 1. Immobilize and protect
 - 2. Chemical in the eye
 - a. Rinse and evaluate
 - b. Poison control
 - ii. Nosebleed
 - 1. Lean forward
 - 2. Pressure / do not pack
 - iii. Dental emergencies
 - 1. Collection of tooth
- 5. Medical Emergencies
 - a. Cardiac Emergencies
 - i. Heart attack
 - 1. Minor to severe
 - 2. Blockage of blood/lack of oxygen
 - 3. Coronary artery disease
 - 4. Signs/Symptoms
 - a. Chest pain
 - b. Radiating pain
 - c. Vital signs
 - d. Mental status
 - 5. Treatment
 - a. Position of comfort
 - b. Access EMS
 - b. Respiratory Emergencies
 - i. Common conditions
 - ii. Labored and shallow breathing
 - iii. Position of comfort

- iv. Inhalers and other medication
- c. Seizures
 - i. Indicators:
 - 1. staring spells
 - 2. disorientation
 - 3. lethargy
 - 4. slurred speech
 - 5. eyes rolling upward
 - ii. Treatment
 - 1. Protect airway
 - 2. Protect from further injury
 - 3. Do not restrain
 - 4. Do not put anything in mouth
- d. Strokes
 - i. Recognition
 - 1. Mental status
 - 2. Mobility
 - 3. Vision
 - 4. communication
 - ii. Treatment
 - 1. Activate EMS
 - 2. Conscious- elevate head and shoulders slightly
 - 3. Unconscious/uninjured- recovery position, injured side down (if known)
 - 4. Maintain open airway
 - 5. Do not give victim food/drink
- e. Diabetic Emergencies
 - i. Low blood sugar (hypoglycemia)
 - 1. Hostile behavior
 - 2. Administration of oral glucose
 - ii. High blood sugar (hyperglycemia)
 - 1. Diabetic coma
- f. Poisoning and Substance Abuse
 - i. Alcohol and drug emergencies
 - ii. Withdrawal considerations
 - iii. Accessing EMS
 - iv. Poison Control
 - v. Officer Safety
- g. Temperature Related Emergencies
 - i. Mild hypothermia
 - 1. Indicators
 - a. Shivering
 - b. Fatigue
 - c. Confusion
 - d. Rapid breathing and pulse
 - 2. Treatment

- a. Move to warm environment
 - b. Remove wet clothing
 - c. Do not give alcohol or caffeine
 - d. Keep victim moving
 - ii. Severe hypothermia
 - 1. Indicators
 - a. Lack of shivering
 - b. Rigid muscles and joints
 - c. Slow, shallow breathing
 - d. Irregular, weak or slow pulse
 - e. Decreased level of consciousness
 - f. Unwilling or unable to do simple activities
 - g. Slurred speech
 - 2. Treatment
 - a. Move to warm environment
 - b. Remove wet clothing
 - c. Do not give alcohol or caffeine
 - d. Monitor vital signs and perform CPR if necessary
 - e. Immobilize and protect frostnip/frostbite
 - i. Wrap each digit individually and loosely
 - ii. Re-warm slowly
 - iii. Heat cramps
 - 1. Indicators
 - a. Painful muscle spasms
 - b. Lightheadedness
 - c. Weakness
 - 2. Treatment
 - a. Remove victim from heat
 - b. Massage cramped muscles
 - c. Provide water in small amounts
 - d. Do not give alcohol or caffeine
 - iv. Heat exhaustion
 - 1. Indicators
 - a. Profuse sweating
 - b. Dizziness
 - c. Headache
 - d. Pale, clammy skin
 - e. Rapid pulse
 - f. Weakness
 - g. Nausea, vomiting
 - 2. Treatment
 - a. Remove victim from heat
 - b. Massage cramped muscles
 - c. Provide water in small amounts
 - d. Do not give alcohol or caffeine
 - v. Heat stroke

1. Indicators

- a. Red, hot, dry skin
- b. Rapid irregular pulse
- c. Shallow breathing
- d. Confusion
- e. Weakness
- f. Possible seizures or unconsciousness

2. Treatment

- a. Activate EMS
- b. Remove from heat
- c. Loosen clothing
- d. Cool victim's body rapidly
 - i. Douse with cool water
 - ii. Wrap in wet sheet or blanket
 - iii. Place ice pack in groin, neck, arm pits

h. Stings and Bites

- i. Officer safety
- ii. Usual reactions
 - 1. Local swelling
 - 2. Minor pain
 - 3. Itching
- iii. Allergic reaction
 - 1. Itching
 - 2. Burning
 - 3. Hives
 - 4. Swollen lips and tongue
 - 5. Difficulty breathing
 - 6. Respiratory failure
- iv. Treatment
 - 1. Remove stinger by scraping
 - 2. Wash with soap
 - 3. Apply ice to reduce swelling and rate of spread
 - 4. Apply heat to marine life stings
 - 5. Assist victim in taking epinephrine
 - a. Second dose if first fails to work
 - 6. Monitor for shock

6. Childbirth

- a. Normal Labor and Childbirth
 - i. Transport decisions
 - ii. Medical Aid
- b. Complications in Childbirth
 - i. Recognition
 - ii. Transport

7. Written, oral and/or demonstration assessment (in each topic area)

- a. Group discussion

- b. Written test
- c. Hands-on Skills
 - i. PPE glove removal
 - ii. Primary assessment
 - 1. Check for responsiveness
 - 2. Check airway
 - 3. Check for breathing
 - 4. Check pulse
 - 5. Look for serious bleeding
 - iii. Bleeding control of wound
 - 1. Pressure
 - 2. Dressing and bandaging
 - 3. Tourniquet
 - iv. CPR
 - 1. Adult, child and infant
 - v. Clear severely obstructed airway
 - 1. Conscious adult and infant
 - 2. Unconscious adult and infant
 - vi. Epinephrine pen assist

FIRST AID AND CPR

8-Hour (Refresher)

Course Hourly Timeline

Updated: 2016

Eric Thomson

| START | END | SUBJECT |
|--------------|------------|------------------------------------|
| 0800 | 0815 | Introductions / Objectives |
| 0815 | 0850 | LE and EMS (section 1) |
| 0850 | 0900 | BREAK |
| 0900 | 0920 | Victim Assessment (section 2) |
| 0920 | 0950 | CPR / AED Intro (section 3) |
| 0950 | 1000 | BREAK |
| 1000 | 1200 | CPR / AED (section 3) |
| 1200 | 1300 | LUNCH |
| 1300 | 1330 | Airway / Breathing (section 3) |
| 1330 | 1350 | Bleeding / Shock Intro (section 3) |
| 1350 | 1400 | BREAK |
| 1400 | 1430 | Bleeding / Shock (section 3) |
| 1430 | 1450 | Traumatic Injuries (section 4) |
| 1450 | 1500 | BREAK |
| 1500 | 1540 | Medical Emergencies (section 5) |
| 1540 | 1550 | Child Birth (section 6) |
| 1550 | 1600 | BREAK |
| 1600 | 1630 | Written Test |
| 1630 | 1700 | Review / Summary |