Certain documents or portions of documents related to this training may be exempt from disclosure under the California Public Records Act on one or more of the following grounds:

a. They are records dealing with security and safety procedures that are exempt pursuant to Government Code Section 6254(f). (Northern California Police Practices Project v. Craig (1979) 90 Cal.App.3d 116, 121-122.);

b. They are materials for which the City of San Rafael does not hold the copyright or have permission to publish.

Where exempt material can be reasonably segregated from nonexempt material in these records, the exempt material has been redacted and the nonexempt material is shown. Where it is not reasonably possible to segregate out the exempt material, the Department is withholding the entire document from disclosure.
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
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 sweating
      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

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