

Wilderness First Aid



**AMERICAN
SAFETY &
HEALTH
INSTITUTE**

AMERICAN SAFETY & HEALTH INSTITUTE

An HSI Company

Wilderness First Aid Instructor Guide, *Version 8.0*

Purpose of this Guide

This ASHI *Wilderness First Aid Version 8.0 Instructor Guide* is solely intended to give information on the presentation and administration of ASHI Wilderness First Aid certified training classes. The information in this book is furnished for that purpose and is subject to change without notice.

Notice of Rights

No part of this ASHI *Wilderness First Aid Version 8.0 Instructor Guide* may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying and recording, or by any information storage and retrieval system, without written permission from American Safety & Health Institute.

Trademarks

The ASHI logo is a registered trademark of American Safety & Health Institute, Inc. (ASHI).

American Safety & Health Institute
1450 Westec Drive
Eugene, OR 97402
800-447-3177
541-344-7099

E-mail: response@hsi.com

Visit our website at emergencycare.hsi.com

Copyright © 2018 American Safety & Health Institute
All rights reserved. Printed in the United States of America.

First Edition—2018



Part 1: Program Design and Instructional Tools	1
Program Design	1
Program Overview.....	1
Program Structure.....	1
Core Training Content.....	Class Method
Third-Party Training Content.....	Classroom Training
Class Type.....	
Training Content	1
Initial Classroom Class.....	1
Four-Step Instructional Approach.....	2
Step 1: Present the Knowledge Content.....	Step 4: Wrap It Up
Step 2: Demonstrate Skills.....	Certification Requirements
Step 3: Allow Adequate Time for Students to Practice Skills.....	
Instructional Tools	4
Instructor Guide.....	Skill Guides
Instructor/Training Center Portal in Otis.....	Scenario Sheets
Student Book.....	Performance Evaluation Sheets
Program Slide Presentation.....	Written Exam
Exercise Guides.....	
Part 2: Class Requirements and Administration	5
Class Requirements	6
Before Class.....	Teaching Space
Learning Environment.....	Classroom Safety
Instructor Ratios.....	Student Illness and Other Emergencies
Equipment and Materials List.....	6
Required.....	Recommended
May Be Required (Regulatory Agency).....	
Conducting a Class.....	7
During Class.....	8
After Class.....	8
Administration	8
Skill Evaluation.....	8
Skill Remediation.....	8
Written Exam.....	8
Criteria for Certification.....	9
Class Documentation	9
Class Roster.....	9
Performance Evaluation Sheet.....	9
Rate Your Program Course Evaluation.....	9

Part 3: Initial Training, Classroom	11
<i>Initial Class Outline and Time Frame</i>	12
<i>Introduction</i>	19
PREPARING TO HELP	
<i>Wilderness First Aid</i>	20
<i>Protecting Yourself</i>	22
<i>Legal Considerations</i>	24
<i>Getting Help</i>	26
<i>Moving and Lifting</i>	29
ASSESSMENT	
<i>Scene Assessment</i>	32
<i>Initial (Primary) Assessment</i>	35
<i>Focused (Secondary) Assessment</i>	38
Scenario Practice — Assessment	44
SUDDEN INJURY	
<i>Shock</i>	46
<i>Control of Bleeding</i>	48
<i>Major Wounds</i>	55
<i>Facial Injuries</i>	59
<i>Minor Wounds</i>	63
<i>Cleaning, Closing, and Dressing Wounds</i>	66
<i>Burns</i>	70
Scenario Practice — Sudden Injury I	73
<i>Head, Neck, or Back Injuries</i>	75
<i>Musculoskeletal Injuries</i>	81
<i>Extended Injury Management</i>	89
Scenario Practice — Sudden Injury II	92
SUDDEN ILLNESS	
<i>Altered Mental Status</i>	94
<i>Breathing Difficulty, Shortness of Breath</i>	100
<i>Abdominal Problems</i>	105
<i>Pain, Severe Pressure, or Discomfort in Chest</i>	110
<i>Poisoning</i>	112
Scenario Practice — Sudden Illness	115

ENVIRONMENTAL EMERGENCIES

Heat Emergencies 117

Cold Emergencies 121

Bites and Stings 127

Submersion 132

Lightning 135

Altitude Illnesses 137

 Scenario Practice — Environmental Emergencies 140

OTHER WILDERNESS CONSIDERATIONS

Emotional Considerations 142

First Aid Kits 145

Protection from the Elements 150

Water and Food 152

WILDERNESS FIRST AID

Evaluation 155

Documentation and Certification 157

APPENDIX

Class Forms and Slide Presentation Available in Otis

Primary Sources 169

Additional Sources 169

End Notes 170



PART 1:
PROGRAM DESIGN AND
INSTRUCTIONAL TOOLS

PREVIEW

Program Design

Program Overview

The ASHI Wilderness First Aid training program is intended for individuals who are not healthcare providers or professional rescuers but desire or are required to be certified in wilderness first aid knowledge and skills. Certification in Adult CPR and AED is required as a prerequisite for this program. Training in basic first aid is recommended.

Wilderness environments create special situations not usually encountered in an urban or suburban environment. When a person becomes injured or ill in the wilderness, the time and distance to traditional emergency medical services maybe hours or even days. First aid providers in a wilderness setting will be faced with limited resources, have to care for a patient for a much longer time period, and need to make decisions about when and how fast to evacuate an ill or injured person.

The goal of this training program is to help students develop the knowledge, skills, and confidence to respond to a medical emergency in a remote or wilderness setting. Founded in basic principles of instructional design and learning theory, ASHI promotes a “toolbox” approach to learning. This approach gives Instructors flexibility in both presentation strategies and materials in order to reach students with widely varying abilities in the countless instructional settings that exist in the real world. Wilderness First Aid is designed to include a significant amount of hands-on skill practice.

Boy Scouts of America Requirements

This wilderness first aid course has been designed to meet the Wilderness First Aid Curriculum and Doctrine Guidelines, 2017 Edition, established by the Boy Scouts of America for a 16-hour Wilderness First Aid course. Students must be at least 14 years of age to meet age requirements for Boy Scouts of America (BSA) High Adventure Camp participation and wilderness first aid certification.

Program Structure

ASHI Wilderness First Aid contains only core training content.

Core Training Content

The core training content is the minimum knowledge and skill content that is required for certification in ASHI Wilderness First Aid.

Third-Party Training Content

Additional training materials that are not produced by HSI may also be used to enhance ASHI Wilderness First Aid at the discretion of the training center director. These additional materials may not be used in lieu of ASHI Wilderness First Aid materials and may not be used to shorten or otherwise alter the core training content required for certification.

Important:

ORGANIZATIONS LIKE THE BOY SCOUTS OF AMERICA, REGULATORY AGENCIES, AND OTHER APPROVERS MAY REQUIRE SPECIFIC HOURS OF INSTRUCTION OR OTHER PRACTICES. INSTRUCTORS MUST BE FAMILIAR WITH AND COMPLY WITH ALL APPLICABLE LOCAL, STATE, PROVINCIAL, FEDERAL LAWS AND ADMINISTRATIVE RULES AS THEY PERTAIN TO THE APPROVAL, DELIVERY, AND ADMINISTRATION OF THIS TRAINING. HSI MAINTAINS A DATABASE OF ALL REGULATORY APPROVALS IN OTIS.

Class Types

There is only one class type for ASHI Wilderness First Aid. Regardless of whether the student is new, or has taken Wilderness First Aid in the past, each class is taught as if it is initial training.

Class Methods

There is a single method for teaching and certifying students in ASHI Wilderness First Aid: instructor-led classroom training.

Classroom Training

This is an instructor-led, in-person, classroom-based approach where the core knowledge content is provided using the student book and/or a slide presentation, followed by demonstration of skills and the opportunity for instructor-facilitated student skill and scenario practices. There is a maximum student to instructor ratio of 10:1. The recommended ratio is 6:1.

Training Content

Initial Classroom Class

The content of the initial class is divided into sections. Sections are further divided into lessons. Each lesson provides an approximate length, skill and/or knowledge objectives (What Students Should Learn), an encouraging reason for learning (Why This Topic Matters), lists required equipment, and describes the necessary instructor activities. The outline and estimated time frame for the Initial Instructor-Led Class are provided in Part 3.

ASHI promotes a “toolbox” approach to learning. This means that various presentation methods and tools may be used by the instructor to meet the knowledge and skill objectives of the course, including skill guides, slides, scenario sheets, and performance evaluations. The focus is on gaining the skills and building the confidence to handle an emergency situation. Skills are best learned and retained by repeated hands-on practice. Instructors can make the most of class time by limiting lectures to essential knowledge, and focusing on hands-on skill practice.

Four-Step Instructional Approach

In general, ASHI follows a basic four-step instructional approach (some lessons may include fewer or additional steps).

Step 1: Present the Knowledge Content

The student book and the program slide presentation are the primary tools provided to deliver knowledge content for the class.

The Student Book is designed to provide core knowledge content.

The program slide presentation provides a framework for presenting the cognitive content for the class. Slides focus on the key points of information and allow Instructors to highlight content using other delivery methods. Slide notes provide more detail on content.

Key points are also included for each lesson in this Instructor Guide and can be used to emphasize key content throughout the class.

Step 2: Demonstrate Skills

When demonstrating skills, a high-quality performance is essential because students will tend to copy it.

When giving a demonstration, consider using the WHOLE-PART-WHOLE method:

WHOLE: Demonstrate the entire skill, beginning to end, briefly naming each action or step.

PART: Demonstrate the skill again, step-by-step, integrating information and facts while pointing out common errors in technique. Present only the knowledge necessary to for the student to adequately perform the skill. To help, have students look at the appropriate Skill Guide as you demonstrate.

WHOLE: Demonstrate the entire skill again — in real-time — without comment. Perform it without remarks, interruption, or explanation. This helps students get a feel for the tempo of the skill and the opportunity to observe the sequence of actions before they practice.

Step 3: Allow Adequate Time for Students to Practice the Skills

Skill practice within lessons is accomplished through the hands-on practice of individual skills in small groups.

Important:

STUDENTS WILL ALSO DEVELOP HANDS-ON SKILLS IN SCENARIO PRACTICES LOCATED THROUGHOUT THE COURSE. SCENARIO PRACTICES ENABLE LARGER TEAMS OF STUDENTS TO DISCOVER, ASSESS, AND ADMINISTER CARE IN SIMULATED EMERGENCIES. INSTRUCTORS GUIDE THE PRACTICES USING SCENARIO SHEETS.

For individual skill practice, break students into small groups with the required equipment for the practice. Have one student act as a coach by reading the skill steps from the Skill Guide while another student performs the skill on a prop or on another student who is playing the role of the ill or injured person. Have students rotate through the roles until all have played each role.

An Instructor should circulate through the classroom, answering questions, correcting errors in technique, and providing constructive feedback and positive reinforcement. Avoid anxiety-producing, perfection-oriented skill checks. A stimulating, but non-threatening, environment is best for learning.

Team-based scenario practices are integrated throughout the program to allow students to simulate, as much as possible, care for an ill or injured person in a variety of situations.

Step 4: Wrap It Up

Ask for and answer questions as briefly and concisely as you can. If available, finish with a short knowledge check or problem-solving scenario to help students recall key information.

The initial class proceeds lesson by lesson until its conclusion. ASHI Wilderness First Aid certification cards are issued to those students who have earned them.

Certification Requirements

Instructors must be current and properly authorized as an ASHI First Aid Instructor to issue Wilderness First Aid certification cards.

The certification requirement for an initial class requires students to demonstrate indicated skill competency using skill guides, Scenario Sheets, or performance evaluations. A Written Exam is not required for certification unless required by a regulatory agency.

Important:

WHEN NOT REQUIRED, THE WRITTEN EXAM MAY BE USED AS A PRE-, POST-, OR IN-CLASS ACTIVE LEARNING TOOL. THE INDIVIDUAL'S SCORE ON AN OPTIONAL EXAM MAY NOT BE USED TO WITHHOLD A PROPERLY EARNED CERTIFICATION CARD. WHEN A WRITTEN EXAM IS NOT USED OR REQUIRED, INSTRUCTORS CAN MEASURE COGNITIVE UNDERSTANDING BY INFORMAL OBSERVATION AND QUESTIONING USING THE KNOWLEDGE CHECK FEATURE.

Instructional Tools

This ASHI Wilderness First Aid Instructor Guide, slides, scenario sheets, exercise guides, and performance evaluations are the materials necessary for a properly qualified and authorized instructor to conduct Wilderness First Aid classes.

Instructor Guide

The ASHI Wilderness First Aid Instructor Guide provides the program design and curriculum for training classes.

The first part of the guide provides detailed information on how to prepare for and administer training classes.

The middle, and largest portion, of the instructor guide provides a lesson-by-lesson curriculum detailing how to meet the identified learning objectives.

The final portion of the guide is an appendix with information on how to get and use support materials for training, including the course roster, slide presentation, scenario sheets, and practice guides.

Instructor/Training Center Portal in Otis

The instructor/training center portal in Otis provides access to the most current support documents, including performance evaluations, exams, skill sheets, errata sheets, and more. Please see Otis for the most up-to-date information. Login to Otis at otis.hsi.com/login. If you need assistance logging into Otis, call 877-440-6049 to speak with technical support.

Student Book

The ASHI Wilderness First Aid Student Book is an up-to-date resource that covers the core knowledge and skill content required for certification. Each participant should have a current print or digital Student Book readily available during and after the class.

Program Slide Presentation

PowerPoint slide presentations are provided as visual tools to highlight the key points of the content and guide Instructors in class. The program slide presentation files are available in Otis.

Exercise Guides

In addition to skill- and scenario-based practices, lessons in the ASHI Wilderness First Aid program may include an exercise to complete as part of the lesson. Exercise guides include any student handouts along with instructions for conducting the exercise.

Skill Guides

Skill guides combine words and photographs of the correct steps of a skill in the proper sequence. They are visual, easy-to-use instructional tools, used by the instructor as a teaching aid and by students during skill practice. Skill guides are included in the Student Book.

Scenario Sheets

Scenario Sheets are student practice tools used to help student teams learn how to apply skills and make reasoned judgments and decisions in a realistic, simulated setting. Required team-based scenario practices are integrated throughout the ASHI Wilderness First Aid program. Scenario Sheets and instructions for their use are available in Otis.

Performance Evaluation Sheets

Instructors can use performance evaluation sheets for a more formal approach to evaluating required skills. Performance evaluation is a scenario-based assessment process that provides sound, fair, consistent, uniform, objective, and reliable documentation of a student team's competency according to the skill criteria. Performance evaluation sheets and instructions for their use are available in Otis and are included in the Otis-powered desktop or mobile application.

Written Exam

Unless required by a regulatory agency, it is not required for students to take and pass the Written Exam. However, the Written Exam documents are provided as an instructional tool and can be used to check student learning and effective retention of knowledge objectives.

Two Written Exam versions, an answer sheet, and answer keys are included in the program documents in Otis.

ASHI Wilderness First Aid slide presentations were created using PowerPoint® presentation graphics program. PowerPoint® is a registered trademark of Microsoft Corporation in the United States and/or other countries.

PART 2:
CLASS REQUIREMENTS
AND ADMINISTRATION

PREVIEW

Class Requirements

Important:

COMPLETE STANDARDS AND GUIDELINES FOR QUALITY ASSURANCE INCLUDING PROGRAM STANDARDS, CERTIFICATION STANDARDS, AND THE TERMS AND CONDITIONS FOR INSTRUCTOR AND INSTRUCTOR TRAINER AUTHORIZATION ARE LOCATED IN THE MOST RECENT VERSION OF THE HSI TRAINING CENTER ADMINISTRATION MANUAL (TCAM) AVAILABLE AT <http://www.hsi.com/qualityassurance>.

ALL INSTRUCTORS HAVE AGREED TO COMPLY WITH THESE STANDARDS BY SUBMITTING A SIGNED APPLICATION FOR INSTRUCTOR AUTHORIZATION.

Before Class

A few days before the class, confirm the date, location, and number of students. Ensure you have the appropriate materials, equipment, and paperwork for the class (see Equipment and Materials List for detailed information).

Review this Instructor Guide, paying particular attention to the outline and time frame for the class. Review the slides and key points for each lesson. Review all of the included Instructor Notes to see if you need to adjust your approach to training. Familiarize yourself with the student book.

Learning Environment

Because of the underlying nature of a Wilderness First Aid course, classes could be taught in a wide variety of settings ranging from a traditional classroom to a backcountry campsite. The ideal learning environment is comfortable, efficient, and distraction-free with sufficient space, resources, and equipment. Instructors should take practical efforts to ensure a physically safe, reasonably comfortable and appropriate learning environment so as not to distract from the learning experience. When possible, challenging class setups should be anticipated and the learning environment be made as favorable as possible.

Instructor Ratios

Wilderness First Aid has been developed for a maximum class size of 10 students to 1 instructor; the recommended class size is 6 students to 1 instructor. Personal supervision is necessary to ensure effective facilitation, assistance, guidance, and supervision. Additional equipment and the assistance of other authorized instructors are recommended for all skill sessions where possible.

Teaching Space

If taught indoors, the area should be large enough to accommodate chairs, tables, and skill practice space for up to 10 students. Wilderness First Aid requires hands-on practice and evaluation of skills. Ensure that adequate and appropriate space for these activities is provided. Allow about 15 to 17 square feet per student whenever possible. Avoid lecture hall-type of arrangements.

Classroom Safety

Make sure there are no obvious hazards in the teaching space, such as items that can be tripped over. Discourage students from smoking, eating, or engaging in disruptive or inappropriate behavior. Have an emergency response plan in case of serious injury or illness, including evacuation routes from the area. Be aware of and share with students the location of the nearest bathrooms, exit, phone, first aid kit, AED, fire alarm pull station, and fire extinguisher.

NOTICE:

WARN STUDENTS TO AVOID AWKWARD OR EXTREME POSTURES OF THE BODY. IMPROPER LIFTING AND MOVING IS A LEADING CAUSE OF BACK INJURY. ALL STUDENTS MUST PAY ATTENTION TO PROPER LIFTING AND MOVING TECHNIQUES DURING PRACTICE.

Warn students that classroom activities involving lifting and moving that may aggravate previous back injuries and they should not practice moving simulated victims if they have a history of back problems.

Student Illness and Other Emergencies

Advise students to not attend class if they have an illness such as influenza or a fever. Training centers should provide reasonable accommodation to students to make up class time or skill sessions. If a student has a medical emergency, instructors should provide the appropriate first aid care and activation of EMS.

Equipment and Materials List

Some equipment and materials are required for teaching, while other items are optional (like the Written Exam). Some equipment and materials are recommended but not required. Use the lists below to prepare the right equipment and materials for the training you are delivering.

Required

- Wilderness First Aid Instructor Guide, 1 for each class (print or digital)
- Wilderness First Aid Student Book, 1 for each student (print or digital)
- Wilderness First Aid certification cards, 1 for each student who fulfills the requirements (print or digital)
- Class Roster, 1 for each class (print or digital)
- Rate Your Program course evaluations, 1 for each student
- Medical care report forms, multiple for each class
- Exercise Guides, 1 set of instructions for each class, 1 handout for each student
 - Documentation

- Scenario Sheets, 1 for each student team (print or digital)
 - Initial Assessment — Responsive
 - Focused Assessment
 - Severe Bleeding
 - Open Chest Injury
 - Burn Injury
 - Head, Neck, and Back
 - Long Bone Fracture
 - Abdominal Problem
 - Pain, Severe Pressure, or Discomfort in Chest
 - Heat Stroke
 - Hypothermia
- Wristwatch with second hand or timer on mobile phone, 1 for each student group
- Shears, 1 for each student group
- Irrigating syringes (or similar), 1 for each student group
- Blankets (or similar), 1 for each student group
- Water bottles, 1 for each student group
- EpiPen® and/or Epinephrine Injection, USP auto-injector training devices, 1 for each student group
- Non-latex disposable gloves, multiple pairs per student
- Dressings, multiple for each student group
- Conforming roll bandages, multiple for each student group
- Commercial tourniquets, 1 for each student group
- Materials for improvised tourniquets, 1 for each student group
- Commercial packed dressing training packs or similar improvised materials, 1 for each student group
- Bleeding control props (packed dressing practice), 1 for each student group
- Moleskin or commercial blister pads, 1 for each student group
- Tape or commercial butterfly bandages, 1 for each student group
- Material for occlusive dressing, 1 for each student group
- Materials for improvised cervical collars, 1 for each student group
- Triangular bandages (or similar), multiples for each student group
- Malleable splints and/or materials for improvised splints, 1 for each student group
- Materials for creating a hypothermia wrap, 1 for each student group

May Be Required (Regulatory Agency)

- Written exams A and B, 1 version for each student (print)
- Written exams answer sheets, 1 for each student (print)
- Written exams answer keys, A and B, 1 for each instructor/assistant (print)
- Performance evaluations, 1 set for each student team (print or digital)
 - Initial Assessment — Responsive
 - Focused Assessment
 - Severe Bleeding
 - Open Chest Injury
 - Burn Injury
 - Head, Neck, and Back
 - Long Bone Fracture
 - Abdominal Problem
 - Pain, Severe Pressure, or Discomfort in Chest
 - Heat Stroke
 - Hypothermia

Recommended

- Wilderness First Aid Slide Presentation, 1 for each class
- Sign-in sheet
- Commercial pressure bandages or similar improvised materials, 1 for each student group
- Bleeding control props (for pressure dressing and tourniquet practice), 1 for each student group.
- Minor wound props, 1 for each student group
- 5–10 lb. weighted items (optional shoulder dislocation practice)
- Pens and pencils, 1 for each student when Written Exam is administered
- Blankets, mats, or kneepads
- Name tags or tent cards, 1 for each student
- Large black markers for student name tags or tent cards
- Spare projector bulb (as needed)
- Extension cord (as needed)
- White board with dry erase pens and eraser, if available
- Large envelope for class paperwork, including Written Exam answer sheets when required

Conducting a Class

1. Arrive early. Give yourself plenty of time to get organized.
2. Circulate a sign-in sheet or the Class Roster. Be sure all students sign-in.

During Class

1. Start on time. Briefly cover class expectations: class goal, certification requirements, classroom safety, facilities, mobile phone use, and breaks.
2. Stay on track. Keep lessons within their time limits. End discussions when they are not productive or lead off topic.
3. At the beginning of each lesson, briefly communicate the knowledge and skill objectives, and explain why this topic matters.
4. Present the knowledge content and emphasize the key points as needed. Ask for and briefly answer any questions.
5. Demonstrate skills and facilitate student practices. Answer questions and offer constructive guidance and positive feedback as appropriate.
6. Upon class completion, issue Wilderness First Aid certification cards to those individuals who earned them.
7. Offer and collect students' Rate Your Program evaluations.

After Class

Complete and sign the Class Roster. If used, complete and sign performance evaluations.

Administration

Skill Evaluation

The instructor must evaluate each student for skill competency — the ability of the individual to do the skill adequately. Each student or student team must be able to demonstrate the skills in the proper sequence according to the skill criteria as it appears in a skill guide, Scenario Sheet, performance evaluation sheet, or program standard.

Skill Remediation

As time permits, the remediation, or the correction of inadequate skill performance, should be offered to students who are experiencing skill difficulties.

Generally, address student skill problems throughout the class using the gentle correction of skills and positive coaching. If possible, assist students privately during breaks, lunch, or at the end of the class.

Be polite, considerate, encouraging and professional when remediating skills.

If the student is unable or unwilling to perform skills, you can issue the student a Recognition of Participation document, especially in cases where knowledge or experience is a greater goal than certification for the student.

If a student needs certification and requires more remediation than can be provided during a class, recommend the student attend another training class.

Written Exam

A Written Exam is not required for certification unless required by a regulatory agency

Evaluation of the core knowledge objectives in Wilderness First Aid is normally accomplished by informal observation and questioning throughout a training class.

When a Written Exam is required, adequate time must be added to the class to complete the exam. Two versions of the Written Exam, along with instructions for their use, are included online in Otis. An exam answer sheet is also available to help minimize the amount of paper used. Exam answer keys are provided for both exam versions to aid in exam correction.

Each student must obtain a passing score of 73% or better. If a student does not pass the first Written Exam, he or she must take the alternative version. If a student does not pass the alternative version, he or she must retake the class.

ASHI is implementing open-book exams with the G2015 training programs. Open-book exams emphasize critical thinking and problem solving over recall of memorized facts, and decrease test anxiety. Open-book exams mean that students may use reference materials to take exams when they are required. Reference materials include any notes taken during the class as well as the print or digital ASHI Student Book.

Although students may use reference materials while taking the exam, they should not be allowed to openly discuss the exam with other students or the instructor. Their answers should be their own. Instructors may read aloud the exam to the students as necessary without providing the answers.

Consider the following tips to prevent cheating if students take the Written Exam.

1. Before distributing the exams, remind students those who are caught cheating will not receive certification cards.
2. Request a photo ID if you suspect someone may be taking the test in place of a student. Taking an exam for someone else constitutes cheating.
3. Inform students there is to be no talking during the exam. If a student has a question during the exam, ask that student to raise a hand and you will go to him or her.
4. For extra precaution, use both versions of the exam, alternating them between students to make copying from another student more difficult.
5. Walk around the room throughout the exam. Do not do other work while monitoring the exam.

Criteria for Certification

When the instructor determines a student has demonstrated adequate knowledge and skill competency, the instructor may issue a certification card (print or digital).

Certification means verification that on the indicated class completion date the student demonstrated achievement of the required knowledge and hands-on skill objectives to the satisfaction of a currently authorized ASHI instructor or instructor trainer.

Certification does not guarantee future performance, or imply licensure or credentialing. Certification is documented by the legitimate issuance of a correctly completed ASHI certification card.

Important:

SEE THE MOST RECENT VERSION OF THE HSI TRAINING CENTER ADMINISTRATION MANUAL (TCAM) FOR COMPLETE PROGRAM STANDARDS REGARDING CERTIFICATION. THE TCAM IS AVAILABLE AT <http://www.hsi.com/qualityassurance>.

Class Documentation

All of the class documentation forms used in the ASHI Wilderness First Aid training program are available for download in the documents section of Otis. A complete list of those forms can be found in the Appendix of this Instructor Guide.

There may be periodic revisions or updates to the class documentation forms. Refer to Otis for the most current version.

Class Roster

The Class Roster is the principal record of training. The roster verifies student completion of the class. It also documents the results of the Written Exam and remediation, if used during training. A complete, accurate, and legible Class Roster signed by the authorized instructor or submitted online through Otis is required for every

training class. The Class Roster must be promptly delivered to the training center responsible for the class or submitted online through Otis. The training center is required to keep clear, legible, and orderly class records (paper or digital) for no less than 3 years.

Performance Evaluation Sheet

Instructors can use performance evaluation sheets for a more formal approach to evaluating required skills. Performance evaluation is a scenario-based assessment process that provides sound, fair, consistent, uniform, objective, and reliable documentation of a student team's competency according to the skill criteria.

A student team's performance evaluation sheet signed by the instructor should be considered important potential evidence demonstrating instructor evaluation of each student team's skill competency. Although a secondary record of training, a performance evaluation sheet may be required by state regulation or organizational policy.

When used, signed performance evaluation sheets must be promptly delivered to the training center responsible for the class.

Rate Your Program Course Evaluation

Encouraging class participants to provide feedback and then using that feedback to improve instruction is an essential aspect of any quality educational effort. HSI requires that students be given the opportunity to evaluate any ASHI class using the Rate Your Program course evaluation form.

When used, course evaluations must be promptly delivered to the training center responsible for the class.

Additionally, class participants may provide Rate Your Program feedback directly to HSI at <http://www.hsi.com/rateyourprogram>. All information obtained by HSI through this process is reviewed and shared with the training center, instructor, or instructor trainer as appropriate.

PART 3:
INITIAL TRAINING,
CLASSROOM

PREVIEW

Initial Class Outline and Time Frame

Lesson	Lesson Title	Knowledge Objectives	Skill Objectives	Approximate Length (min)
DAY 1				
Introduction	Describe the purpose of the program, health and safety precautions, and conduct a warm-up exercise.			5
PREPARING TO HELP				
1	Wilderness First Aid	Define wilderness first aid. Describe the difference between wilderness first aid and standard first aid.		8
2	Protecting Yourself	Describe the importance of establishing a safe scene including checking for hazards and standard precautions.	(Optional) Demonstrate the removal of contaminated gloves.	8
3	Legal Considerations	Discuss the importance of documentation.		8
4	Getting Help	Describe how to activate professional help for a wilderness emergency. Describe situations that would require an evacuation versus a rapid evacuation.		10
5	Moving and Lifting	Discuss the importance of proper lifting and moving of ill or injured people.	Demonstrate a one-rescuer roll from back to side, side to back, and facedown to back. Demonstrate a two- and three-rescuer roll from back to side, side to back, and facedown to back. Demonstrate body elevation and movement (BEAM) of a person. Demonstrate placing a person into a recovery position.	45
ASSESSMENT				
6	Scene Assessment	Define mechanism of injury (MOI) and nature of illness (NOI) and describe why they are important factors in assessment. Describe the importance of immediately establishing control of the scene. Assess the number of victims and the need for additional resources.		5
7	Initial (Primary) Assessment	Describe the purpose of the Initial Assessment.		10
8	Focused (Secondary) Assessment	Describe the importance of a chief complaint. Describe the purpose of the Focused Assessment. Discuss the importance of documentation. Discuss the importance of a hands-on physical exam. Discuss the importance of taking a history and how to do so. Discuss the importance of vital signs and how they can change over time.	Demonstrate documentation in written and verbal form using information gathered via the subjective, objective, assessment, and plan (SOAP) format. Demonstrate a physical exam on a person. Demonstrate how to take a set of vital signs including: level of responsiveness (LOR), heart rate, regularity and quality (HR), respiratory rate, rhythm, and quality (RR), tissue color, temperature, and moisture (TCTM). Demonstrate taking a (SAMPLE) history by asking questions related to: symptoms, allergies, medications, pertinent medical history, last intake and output, and events surrounding the incident.	60

Lesson	Lesson Title	Knowledge Objectives	Skill Objectives	Approximate Length (min)
ASSESSMENT (CONTINUED)				
Scenario Practice — Assessment		Initial Assessment — Responsive (20 mins)	Demonstrate how to perform an initial assessment including a quick scan for major bleeding and assessing airway, breathing, circulation, disability, and the environment (ABCDE method).	40
		Focused Assessment (20 mins)	Demonstrate how to perform a complete focused assessment.	
SUDDEN INJURY				
9	Shock	<p>Define shock and discuss briefly the stages of shock.</p> <p>List the signs and symptoms of shock and describe the person in which shock may be a potential threat to life.</p> <p>Describe the long-term care for a person in shock.</p> <p>Describe situations involving shock that would require an evacuation versus a rapid evacuation.</p>		15
10	Control of Bleeding	Describe how to recognize and provide first aid treatment for control of bleeding including direct pressure, tourniquets, and packing the wound.	Demonstrate control of bleeding including direct pressure, tourniquets, and packing the wound.	55
BREAK (LUNCH)				30
11	Major Wounds	<p>Describe the emergency treatment of and long-term care for a chest injury.</p> <p>Describe situations involving chest injury that would require an evacuation versus a rapid evacuation.</p> <p>Explain how to recognize and provide first aid treatment for an open abdominal injury.</p> <p>Explain how to recognize and provide first aid treatment for an amputation.</p> <p>Describe how to provide first aid treatment for an impaled object.</p>		15
12	Facial Injuries	Define and describe treatment for common medical problems related to ears, nose, and teeth.		7
13	Minor Wounds	<p>Define abrasion, laceration, and blister.</p> <p>Define and describe the treatment for chafing.</p> <p>Describe situations involving wounds that would require an evacuation versus a rapid evacuation.</p> <p>Describe how wounds could be prevented.</p>	Demonstrate wilderness treatment, including the use of improvisation, for laceration, abrasion, and blister.	20
14	Cleaning, Closing, and Dressing Wounds	Describe proper wound-cleaning techniques, including pressure irrigation, scrubbing, and rinsing.	Demonstrate proper wound-cleaning techniques, including pressure irrigation, scrubbing, and rinsing.	20
15	Burns	Define the proper management of superficial, partial-thickness and full-thickness burns in short- and long-term settings.		10

Lesson	Lesson Title	Knowledge Objectives	Skill Objectives	Approximate Length (min)
SUDDEN INJURY (CONTINUED)				
Scenario Practice — Sudden Injury I		Severe Bleeding (20 mins)	Demonstrate control of bleeding including direct pressure, tourniquets, and packing the wound. Demonstrate the emergency treatment for a person in shock.	60
		Open Chest Injury (20 mins)	Demonstrate a field assessment and treatment of a person with an open chest injury.	
		Burn Injury (20 mins)	Demonstrate the proper management of superficial, partial-thickness, and full-thickness burns in short- and long-term settings.	
16	Head, Neck, or Back Injuries	List the signs and symptoms of a closed head injury and a skull fracture. Describe the emergency treatment of and long-term care for a head injury. Describe situations involving head injuries that would require an evacuation versus a rapid evacuation. Describe how some head injuries could be prevented. List the most common mechanisms of injury that can lead to spinal trauma. List the signs and symptoms of spinal injury. Describe situations involving spinal injuries that would require an evacuation versus a rapid evacuation. Describe how some spinal injuries could be prevented.	Demonstrate how to properly restrict spinal motion with an improvised collar. Demonstrate how to straighten the body to facilitate treatment.	35
BREAKS THROUGHOUT THE DAY				20

END OF DAY 1

Lesson	Lesson Title	Knowledge Objectives	Skill Objectives	Approximate Length (min)
DAY 2				
SUDDEN INJURY (CONTINUED)				
17	Musculoskeletal Injuries	<p>Define muscle injury, fracture, and dislocation.</p> <p>List the signs and symptoms of a strain, sprain, fracture, and dislocation.</p> <p>Define RICE (rest, immobilize, cold, and elevate) and describe its use.</p> <p>Describe the emergency treatment, including the use of improvisation, for: strains and sprains, fractures, and dislocations, including reduction of dislocated: fingers, toes, patella, and shoulder.</p> <p>Describe the emergency treatment for angulated fractures and open fractures.</p> <p>Describe situations involving bone and joint injuries that would require an evacuation versus a rapid evacuation.</p> <p>Describe how to prevent some bone and joint injuries.</p>	<p>Demonstrate the emergency treatment, including the use of improvisation, for fractures.</p> <p><i>(Optional)</i> Demonstrate the emergency treatment, including the use of improvisation, for dislocations.</p>	60
18	Extended Injury Management	<p>Describe the long-term care for injuries to bones and joints.</p> <p>Describe the signs, symptoms, and treatment of wound and skin infections.</p> <p>Describe personal and camp hygiene and their role in prevention of skin infections.</p> <p>Describe situations involving wound infections that would require an evacuation versus a rapid evacuation.</p> <p>Describe how wound infections could be prevented.</p>		10
Scenario Practice — Sudden Injury II		Head, Neck, and Back Scenario (20 mins)	<p>Demonstrate a field assessment and treatment for injuries to the head.</p> <p>Demonstrate a field assessment and treatment for injuries to the spine.</p>	40
		Long Bone Fracture (20 mins)	<p>Demonstrate a field assessment and treatment for injuries to bones and joints.</p> <p>Demonstrate the emergency treatment, including the use of improvisation, for fractures.</p>	

SUDDEN ILLNESS

19	Altered Mental Status	Describe how to recognize and provide first aid treatment for altered mental status.		20
20	Breathing Difficulty, Shortness of Breath	<p>Describe the basics of an allergic response and its treatment and prevention.</p> <p>Define and list the signs and symptoms of anaphylaxis.</p> <p>Describe the function of epinephrine and describe conditions under which an injection of epinephrine will be considered.</p> <p>Describe the use of an epinephrine auto-injector.</p> <p>Describe the function of oral antihistamines in anaphylaxis, and discuss when and how much will be used.</p> <p>Describe situations involving anaphylaxis that would require an evacuation versus a rapid evacuation.</p> <p>Describe how some allergic reactions including anaphylaxis could be prevented.</p>	<p>Demonstrate how to use an epinephrine auto-injector.</p>	30

Lesson	Lesson Title	Knowledge Objectives	Skill Objectives	Approximate Length (min)
SUDDEN ILLNESS (CONTINUED)				
21	Abdominal Problems	<p>Define and describe the treatment of and long-term care for stomachache and diarrhea.</p> <p>List the indications causing serious abdominal pain and/or discomfort.</p> <p>Describe situations involving abdominal problems that would require an evacuation versus a rapid evacuation.</p> <p>Describe personal and camp hygiene and their role in prevention of abdominal problems.</p>		20
22	Pain, Severe Pressure, or Discomfort in Chest	<p>Define heart attack and list the signs and symptoms of a heart attack.</p> <p>Describe the long-term care for a person having a heart attack.</p> <p>Describe situations involving a heart attack that would require an evacuation versus a rapid evacuation.</p>		15
23	Poisoning	<p>Define and describe the treatment of poisoning from the contact or ingestion of poisonous plants.</p>		15
Scenario Practice — Sudden Illness		Abdominal Problem (20 mins)	Demonstrate a field assessment and treatment for abdominal pain and/or discomfort.	40
		Pain, Severe Pressure, or Discomfort in Chest (20 mins)	Demonstrate a field assessment and treatment for pain, severe pressure, or discomfort in chest.	
BREAK (LUNCH)				30
ENVIRONMENTAL EMERGENCIES				
24	Heat Emergencies	<p>Define heat cramps, heat exhaustion, heat stroke, and dilutional hyponatremia.</p> <p>List the signs and symptoms of heat cramps, heat exhaustion, heat stroke, and dilutional hyponatremia.</p> <p>Describe the emergency treatment of and long-term care for heat cramps, heat exhaustion, heat stroke, and dilutional hyponatremia.</p> <p>Describe situations involving heat problems that would require an evacuation versus a rapid evacuation.</p> <p>Describe the prevention of heat illnesses.</p>		15
25	Cold Emergencies	<p>Describe the mechanisms of heat loss versus heat gain.</p> <p>Define hypothermia.</p> <p>List the signs and symptoms of mild and severe hypothermia.</p> <p>Describe the emergency treatment of and long-term care for mild and severe hypothermia.</p> <p>Describe situations involving hypothermia that would require an evacuation versus a rapid evacuation.</p> <p>Describe the prevention of hypothermia.</p> <p>Describe the treatment and prevention for non-freezing cold injury and frostbite.</p>	Demonstrate the emergency treatment for hypothermia.	30
26	Bites and Stings	<p>Describe treatment and prevention of bites from mosquitoes, ticks, and venomous snakes.</p>		10

Lesson	Lesson Title	Knowledge Objectives	Skill Objectives	Approximate Length (min)
ENVIRONMENTAL EMERGENCIES (CONTINUED)				
27	Submersion (Drowning)	Describe briefly the general sequence of events at a submersion (drowning) incident. Describe the safest and most efficient means of removing a submersion victim from the water. Describe emergency treatment for a drowned person. Describe situations involving submersion that would require an evacuation versus a rapid evacuation. Describe how to prevent some drowning incidents.		15
28	Lightning Strikes	Describe how lightning can cause injury and/or death. Describe the emergency treatment of and long-term care for lightning-induced injuries including respiratory arrest and cardiac arrest. Describe situations involving lightning that would require an evacuation versus a rapid evacuation. Describe the prevention of a lightning-induced injury and/or death.		12
29	Altitude Illnesses	Define altitude illnesses including acute mountain sickness (AMS), high altitude cerebral edema (HACE), and high altitude pulmonary edema (HAPE). List the signs and symptoms of AMS, HACE, and HAPE. Describe the emergency treatment of and long-term care for AMS, HACE, and HAPE. Describe the prevention of AMS, HACE, and HAPE, including, briefly, the process of acclimatization. Describe situations involving high altitude sickness that would require an evacuation versus a rapid evacuation.		15
Scenario Practice – Environmental Emergencies		Heat Stroke (20 mins)	Demonstrate the emergency treatment for heat stroke.	40
		Hypothermia (20 mins)	Demonstrate the emergency treatment for hypothermia.	
OTHER WILDERNESS CONSIDERATIONS				
30	Emotional Considerations	Describe the emotional considerations that need to be taken for ill and injured people, and providers that care for them.		5
31	First Aid Kits	Describe the contents and uses of an adequate wilderness first aid kit based on size of group, destination and duration of trip, and time of year.		15
32	Protection from the Elements	Describe steps people can take to protect themselves from the harmful environmental effects of the sun, rain, and hot and cold temperatures.		7
33	Water and Food	Describe how to manage water and food in order to prevent contamination.		10
BREAKS THROUGHOUT THE DAY				20

Lesson	Lesson Title	Knowledge Objectives	Skill Objectives	Approximate Length (min)
EVALUATION				
Skill and Performance Evaluation		<i>Skill evaluation, required. Performance evaluation, optional, unless required.^a</i>		0–30
Written Exam		<i>Optional, unless required.^b</i>		0–90
CONCLUSION				
Documentation and Certification		<i>Verify class documentation and issue certification cards to students who earned them.</i>		5+
			Total Time^{c,d}	16 hours

- ^a At a minimum, skill competency is visually evaluated by Instructors during the required skill and scenario practices for the class. A performance evaluation can be used to provide a more formal approach to skill evaluation. When a performance evaluation is not required by organizational policy, it is optional.
- ^b When a Written Exam is not required by organizational policy, it is optional. The exam may be used before, during, or after class as an active learning tool; however, the participant's score on an optional exam may not be used to withhold a properly earned certification card. See Written Exam on page 8.
- ^c Class size, class location, instructor-to-student ratios, the variety of equipment used, and other factors will affect the actual schedule.
- ^d Projected times for lessons take into account review and discussion of key points, brief introductions and answers to questions, and demonstrations and student practices. Lesson times are influenced by class preparation, available equipment, and instructor efficiency. These could increase the time needed to meet the core learning objectives. Lesson times do not include optional skills demonstrations and practices. Performance of optional skills demonstrations and practices will add to overall class time.

PREVIEW

Wilderness First Aid

Class Method: Initial

Class Type: Classroom

Length: 8 minutes

Why This Topic Matters

Wilderness first aid training will address the unique challenges and issues specific to becoming ill or injured in a remote location.

What Students Should Learn

After completing this lesson, the student should be able to state or identify the following:

- Definition of wilderness first aid
- The difference between wilderness first aid and standard first aid

Instructor Activities

1 Present Knowledge Content — Student Book and/or Slides

- Emphasize key points as needed.
 - ✓ First aid is the immediate care given to a suddenly ill or injured person until a medical professional can assume responsibility.
 - ✓ Emergency medical services (EMS) in the United States has the ability to respond very quickly to most emergencies. Standard first aid training takes this into account and relies heavily on the fact that professional help is only minutes away.
 - ✓ Wilderness first aid takes into account an expected delay for an EMS or professional response. There are circumstances in which professional help can be delayed for hours, or even days.
 - ✓ For those who venture out into remote or wilderness areas, a different type of first aid training is required that takes into account things such as:
 - Limited access to medical supplies,
 - Exposure to outdoor elements, and
 - Extended response time for professional help.
 - ✓ Wilderness first aid is the assessment of and treatment given to an ill or injured person in a remote environment where definitive care by a healthcare professional and/or rapid transport are not readily available.
 - ✓ One of the focal points of wilderness first aid is the need to provide extended medical care treatments. In addition to the immediate stabilizing treatments found in standard first aid training, additional care will be necessary over time.
 - ✓ Medical emergencies that are rarely or never seen in an urban setting can more easily occur in the wilderness.
 - ✓ The need for evacuation of an ill or injured person is an additional issue to address when you are in a remote location.
 - ✓ At its core, wilderness first aid training is intended to:
 - Preserve life,
 - Alleviate suffering,
 - Prevent further illness or injury, and
 - Promote recovery.
 - ✓ Wilderness First Aid Provider
 - A wilderness first aid provider is someone trained not only to deal with the immediate care of a suddenly ill or injured person, but also to manage the issues created by being in a remote setting.
 - Compared to a standard first aid provider, a wilderness first aid provider needs to be trained not only in a greater breadth of topics but also in greater detail.

- ✓ Purpose of the Wilderness First Aid Course
 - Wilderness first aid providers need to be prepared to handle a wide variety of situations. This is best accomplished through effective training with plenty of hands-on skill and scenario-based practice.
 - This course is designed to provide students with the necessary cognitive knowledge to immediately manage medical emergencies in a remote location, and to initiate and participate in the process of evacuation.
 - This course includes a significant amount of time for practicing skills with hands-on exercises, and for applying those skills to simulated wilderness emergencies.
 - This wilderness first aid course has been designed to meet the Wilderness First Aid Curriculum and Doctrine Guidelines, 2017 Edition, established by the Boy Scouts of America for a 16-hour Wilderness First Aid course.
- Ask for and briefly answer any questions.
- Refer students to pages 1–2 of the Student Book.
- Use the Knowledge Check activity to evaluate and increase retention.

2 Wrap It Up

- Ask for and answer any questions before moving on to the next lesson.



Knowledge Check

What are some issues addressed in training to become a wilderness first aid provider that are not typically included in standard first aid training?

A wilderness first aid provider is someone trained not only to deal with the immediate care of a suddenly ill or injured person, but also to manage the issues created by being in a remote setting. Compared to a standard first aid provider, a wilderness first aid provider needs to be trained not only in a greater breadth of topics but also in greater detail. Wilderness first aid training takes into account things such as limited access to medical supplies, exposure to outdoor elements, and extended response time for professional help.

PREVIEW

Protecting Yourself

Class Method: Initial

Class Type: Classroom

Length: 8 minutes

Why This Topic Matters

Caring for someone in a medical emergency could expose you to infectious disease. Taking proper precautions reduces the chance for exposure.

What Students Should Learn

After completing this lesson, the student should be able to state or identify the following:

- The importance of establishing a safe scene

After completing this lesson, the student should be able to demonstrate the following:

- How to remove contaminated gloves (optional)

Equipment

- Disposable gloves (optional)

Instructor Activities

1

Present Knowledge Content — Student Book and/or Slides

- Emphasize key points as needed.
 - ✓ When caring for someone, you can be exposed to blood or other potentially infectious body fluids.
 - ✓ While the risk of contracting a disease is very low, it is wise to take simple measures to avoid exposure in the first place. Take precautions every time, no matter who you are giving first aid care to.
 - ✓ First aid in a remote setting usually involves extended first aid treatment time prior to getting an ill or injured person to professional medical care.
 - ✓ Extended first aid treatments can be more involved. Both of these factors substantially increase the risk of disease exposure.
 - ✓ Infectious Bloodborne Diseases
 - Infectious bloodborne diseases and pathogens include hepatitis B, hepatitis C, and HIV, the virus that causes AIDS.
 - Exposure to infectious bloodborne diseases can occur through the direct contact of infectious material with an open wound or sore, or by absorption through the membranes of the mouth, nose, and eyes.
 - Exposure can also occur through a skin puncture with a contaminated, sharp object.
 - If you are in a remote or delayed-response situation and suspect you have been exposed to potentially infectious body fluids, report this to any group leader or organizer, and follow up with your healthcare practitioner as soon as you are able.
 - There is no need to evacuate or initiate rescuers for an exposure if you can follow up with a medical provider within a few days.
 - ✓ Standard Precautions
 - It is important to routinely protect yourself from any exposure.
 - Minimizing your risk of exposure lowers the chance of infection.
 - Standard precautions is a set of protective practices used to prevent the transmission of diseases by exposure to blood or other potentially infectious body fluids, whether or not an infection is suspected.
 - To be effective, your approach is the same for everyone, regardless of relationship or age.

- ✓ Personal Protective Equipment
 - Personal protective equipment (PPE) describes protective barriers worn to prevent exposure to infectious diseases.
 - Disposable, non-latex gloves, such as nitrile, are the most commonly used protective barrier. Make sure they are readily accessible, even in a remote situation, and always use them when managing first aid care.
 - Inspect gloves for damage or tears when you put them on.
 - If damaged, replace them immediately. If gloves are unavailable or damaged, improvise protective barriers with materials on hand, such as a plastic bag.
 - After providing care, always remove contaminated gloves carefully and dispose of them properly.
 - Even after using gloves, use soap and water to clean your hands and any exposed skin. Use an alcohol-based hand sanitizer if soap and water are not available. Take the time needed to wash thoroughly.
 - Another commonly used type of PPE, a face shield, can prevent mouth, nose, and eye exposure when there is a possibility of splashing or spraying.

- Ask for and briefly answer any questions.
- Refer students to pages 2–4 of the Student Book.
- Use the Knowledge Check activity to evaluate and increase retention.

2 Demonstrate Skills (Optional)

- Provide WHOLE-PART-WHOLE demonstration of the following Skill Guide:
 - Skill Guide 1 — Removing Contaminated Gloves
- Demonstrate the whole skill with brief comments, demonstrate again step-by-step with comments, and demonstrate the whole skill again without comment.

3 Student Practice (Optional)

- Arrange students into pairs or small groups. Have one student act as a coach by reading the skill steps from the skill guide while another student simulates performing:
 - Removing Contaminated Gloves
- Have students rotate through the roles until all have played each role.
- Circulate through the groups looking for competent performance. Use positive coaching and gentle correction to improve student skills.

4 Evaluation

- Confirm each student demonstrates the correct steps and decision-making tasks in the proper sequence as defined by the skill criteria in the skill guide.

5 Wrap It Up

- Ask for and answer any questions before moving on to the next lesson.



Knowledge Check

While you should always protect yourself from exposure to blood or other potentially infectious body fluids when providing first aid care, why is it particularly important to take precautions when providing care in a remote setting?

First aid in a remote setting usually involves extended first aid treatment time prior to getting an ill or injured person to professional medical care and these extended first aid treatments can be more involved. Both of these factors substantially increase the risk of disease exposure.

Initial (Primary) Assessment

Class Method: Initial

Class Type: Classroom

Length: 10 minutes

Why This Topic Matters

The initial assessment helps a first aid provider quickly identify immediate life-threatening problems.

What Students Should Learn

After completing this lesson, the student should be able to state or identify the following:

- The purpose of the Initial Assessment

Instructor Activities

1

Present Knowledge Content — Student Book and/or Slides

- Emphasize key points as needed.
 - ✓ Assessment Process
 - Before you can provide first aid care to an ill or injured person, you must first identify the things that are creating difficulty and harm. This is done through an organized, step-by-step assessment process, used in every situation.
 - Using a combination of an initial and a focused assessment, this process identifies immediate threats to life, prioritizes treatments, and provides a detailed method for identifying less serious injuries.
 - ✓ Initial Assessment
 - The goal of an initial assessment is to quickly identify any immediate life threats to an ill or injured person and to provide the indicated life-supporting care without delay.
 - If you discover a threat, stop and attend to it. Assessing for and treating lesser problems can wait.
 - The initial assessment steps can be easily remembered using the ABCDE mnemonic device:
 - Airway — Is it clear and open?
 - Breathing — Is it present? What is the quality of it?
 - Circulation — Is it present? What is the quality of it? Is there severe bleeding or shock?
 - Disability — Do you suspect head, neck, or back injury involving the spine?
 - Environment — Are environmental conditions creating immediate threats?
 - The activation of professional medical help and a rapid evacuation to advanced medical care is essential for any life-threatening condition. Depending on the circumstances, this must be done in the most immediate way possible.
 - If it is safe to approach, begin your initial assessment by first determining whether or not a person is responsive in any manner. It could be obvious, or require verbal and physical interaction on your part. If you are unsure, determine responsiveness by tapping or squeezing the shoulder and asking loudly, “Are you all right?”
 - A person who is unresponsive requires treatment learned in a CPR training course.
 - ✓ Airway
 - Continue your initial assessment of a responsive person by introducing yourself, indicating your level of training, and asking if it is okay to help. This will help to reassure the person that you are there to help and establish the person’s consent for your help.
 - If he or she consents to your help, ask an open-ended question about the situation, such as “What happened?” or “What’s wrong?”
 - At this point, because the focus of the initial assessment is to identify life-threatening issues, the answer to your question is less important than forcing a response that enables you to identify any serious problems with the airway.

- If responsive, gauge the approximate level of responsiveness.
 - People with a diminished level of responsiveness are more likely to develop a blocked airway due to the relaxation of the tongue in the airway.
 - If the person is found to be semi-responsive, consider placing the person in the recovery position to open and protect the airway.
- Look for things such as gum, tobacco, blood, or vomit. Listen for sounds such as gurgling or wheezing. If found immediately attempt to fix them.
 - Log roll the person if needed to drain fluids from the mouth. If seen, sweep the mouth to remove solid or semisolid matter.
- ✓ Breathing
 - Quickly form an impression of whether or not breathing is adequate based on rate, depth, and effort.
 - Adequate breathing is regular, even, and effortless.
 - Inadequate breathing may be fast, slow, shallow, labored, irregular, or gasping.
 - If breathing does not appear to be adequate, look for injury to the chest that could be interfering with the ability to take a breath. Consider the use of supplemental rescue breaths to assist breathing.
- ✓ Circulation
 - Scan the body for any signs of severe bleeding such as spurting wounds, large bloodstains, or pooling blood.
 - Check more closely if bulky clothing is worn that could mask signs of bleeding.
 - If significant bleeding is found, immediately expose the wound and attempt to control the bleeding using direct pressure, a tourniquet, or a packed dressing, such as a hemostatic dressing.
 - Look for progressive signs of impending shock.
 - Check for the presence of a radial pulse in the wrist as a quick measurement of adequate blood pressure.
 - Check the skin for tissue color, temperature, and moisture. Pale, cool, and clammy skin is an indication of shock.
 - If you suspect shock is occurring or likely to occur, make sure your other primary treatments such as the control of bleeding are being effectively provided.
- ✓ Disability
 - If you suspect a spinal injury may have occurred, immediately place a hand gently on the person's forehead and ask the person to stay still.
 - If another provider is available, have that person manually establish spinal motion restriction as soon as possible.
- ✓ Environment
 - If the environmental conditions, such as severe weather, create a serious burden or risk to the immediate or ongoing ability of the person to survive, attempt to change the conditions quickly.
 - If possible, move the person to a more protected or safer area.
 - If you cannot move the person, protect him or her from the environmental conditions as best you can.
- ✓ Additional Considerations
 - If an initial assessment has revealed problems that you cannot determine the severity of because they are hidden by clothing or the position of the person, quickly expose the affected area to take a look.
 - Cut or tear clothing away as necessary.
 - Log roll a person to expose areas of the body that are inaccessible.
 - It is okay to do multiple things at the same time. For example, if the mechanism of injury clearly suggests injury to the head, neck, or back, then spinal motion restriction from another provider can be established from the beginning of the assessment.
 - In many cases, the initial assessment takes only seconds when there are no obvious ABCDE life-threatening problems.
 - Remember to stay focused on only looking for life-threatening issues.
 - Highly visual moderate and minor things such as open wounds can draw your attention away.
 - If a life-threatening condition is present, immediately activate the process for getting help. Do not delay activation with additional assessment or care.

- Ask for and briefly answer any questions.
- Refer students to pages 21–25 of the Student Book.
- Use the Knowledge Check activity to evaluate and increase retention.

2 Demonstrate Skills

- Provide WHOLE-PART-WHOLE demonstration of the following Skill Guide:
 - Skill Guide 8 — Performing an Initial Assessment — Responsive
- Demonstrate the whole skill with brief comments, demonstrate again step-by-step with comments, and demonstrate the whole skill again without comment.

Instructor Note:

Students will get hands-on practice of Initial Assessment — Responsive in scenario practices.

3 Wrap It Up

- Ask for and answer any questions before moving on to the next lesson.

**Knowledge Check**

The initial assessment steps are easily remembered using the ABCDE mnemonic device. What are the 5 steps?

*ABCDE stands for **a**irway, **b**reathing, **c**irculation, **d**isability, and **e**nvironment. Ask the following questions while performing an initial assessment: Is the airway clear and open? Is breathing present and if so, what is its quality? What is the quality of circulation and is there any bleeding? Is there disability or injury involving the head, neck, back, or spine? Are environmental conditions creating immediate threats?*

PREVIEW

AMERICAN SAFETY & HEALTH INSTITUTE

An HSI Company

American Safety & Health Institute
1450 Westec Drive
Eugene, OR 97402 USA
800-447-3177 • 541-344-7099 • 541-344-7429 fax
emergencycare.hsi.com

Wilderness First Aid



Making the Workplace and Community Safer.