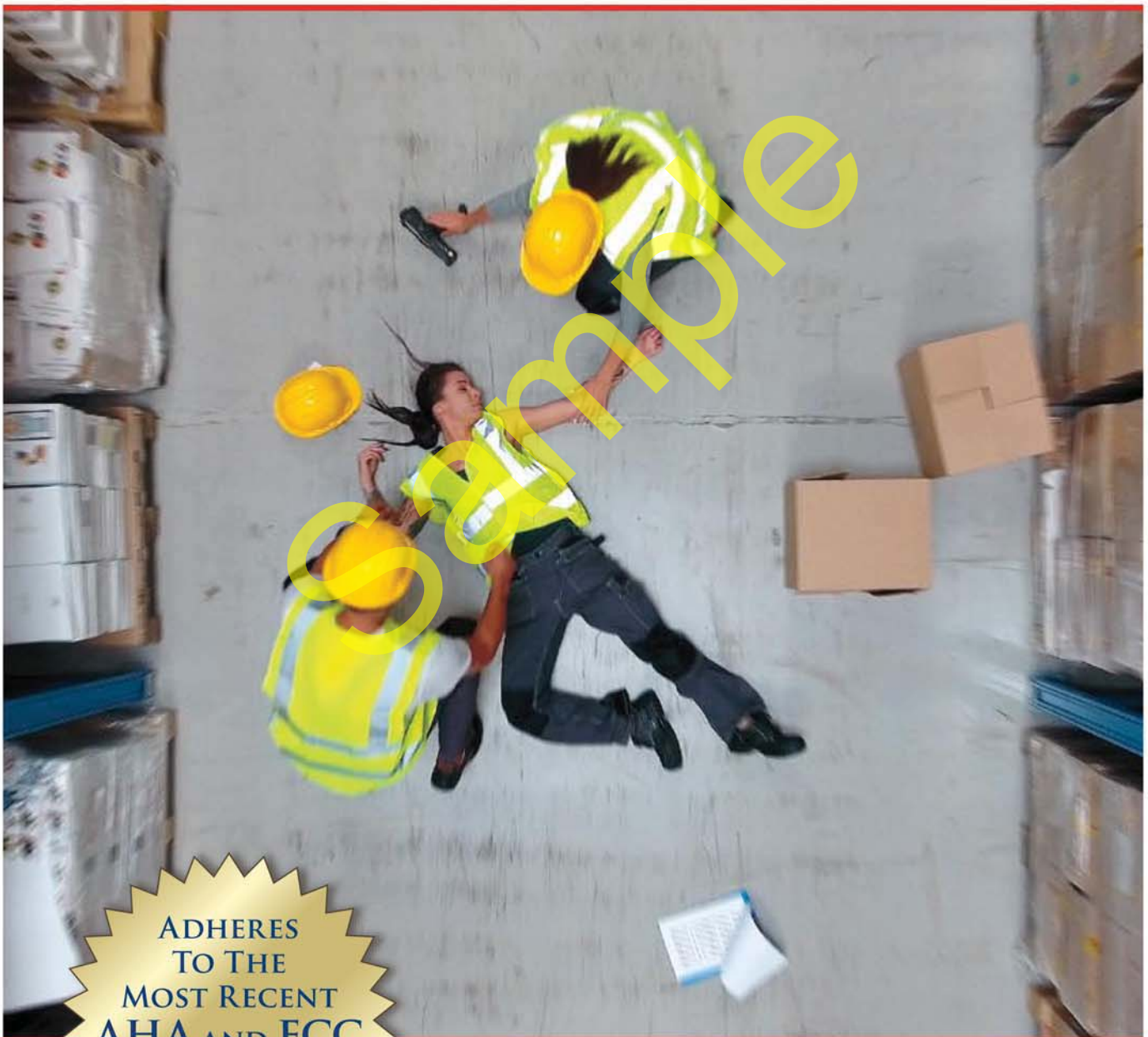




AMERICAN
TRAUMA EVENT
MANAGEMENT

TRAINING MANUAL

CPR › FIRST AID › AED › BBP › EO²



ADHERES
TO THE
MOST RECENT
AHA AND ECC
GUIDELINES
(AS OF MARCH 2020)



American Trauma Event Management programs conform to national standards that are based on the same scientific guidelines and treatment recommendations used by the American Heart Association (AHA) most recent guidelines as of March 2020, (ILCOR) International Liaison Committee on Resuscitation most recent guidelines as of March 2020 as well as the following organizations.

The information in this book is based on the following authorities and organizations:

(AHA) American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care Science Circulation, 2015 and updates on the most recent guidelines through March 2020.

<https://www.heart.org>

(ILCOR) International Liaison Committee on Resuscitation; (The International Liaison Committee on Resuscitation (ILCOR) includes eight international resuscitation organizations: the [American Heart Association](#) (AHA), [European Resuscitation Council](#) (ERC), [Heart and Stroke Foundation of Canada](#) (HSFC), [Resuscitation Council of Asia](#) (RCA), [Resuscitation Council of Southern Africa](#) (RCSA), the [Australia and New Zealand Council on Resuscitation](#)(ANZCOR), and the [InterAmerican Heart Foundation](#) (IAHF) and updates on the most recent guidelines through March 2020.

(OSHA) Occupational Safety and Health Association

First Aid Standards guidelines

All courses meet or exceed the Federal Regulations of the following codes:

29 CFR 1910.151 ; 37 FR 5504 ; 29 CFR 1910.1030

<http://www.osha.gov/Publications/OSHA3317first-aid.pdf>

(OSHA) Occupational Safety and Health Association

Bloodborne Pathogens Guidelines

<http://www.osha.gov/Publications/osh3186.pdf>

(FDA) Food and Drug Association

Review guidelines for Emergency Oxygen

<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm?fr=201.161>

AED guidelines by State Legislation

<http://www.ncsl.org/default.aspx?tabid=14506>

Dept. of Homeland Security

Stop the Bleed

<https://www.dhs.gov/stopthebleed>

(ILCOR) International Liaison Committee on Resuscitation

<http://www.ilcor.org>

2015 AHA and ARC Guidelines for First Aid

(DOT) Department of Transportation

<https://search.usa.gov/search?query=oxygen&affiliate=usdot>

Table of Contents

Good Samaritan Laws	1	Shock	33
Activating 911	1	Primary Survey	34
Heart Disease	4	Secondary Survey	34
Adult CPR	8	Head to Toe Exam	35
Child CPR	9	Head Trauma	36
Infant CPR	10	Musculoskeletal Injuries	37
Hands Only CPR	12	Thermal Burns	39
Emotional Response	12	Electrical Burn	41
Recovery Position	13	Chemical Burn	42
AED	14	Stroke	43
Choking Adult / Child	21	Seizures	44
Choking Alone or Pregnant	22	Fainting	45
Choking Infant	23	Diabetic Emergencies	45
Severe Wound Care	25	Asthma	46
Minor Wound Care	28	Allergic Reaction	47
Puncture Wound	29	Bites	48
Amputations	29	Hypothermia	51
Internal Bleeding	29	Frost Bite	52
Nosebleed	30	Heat Exhaustion/Stroke	53
Dental Injury	30	Drug Overdose	54
Ear Injury	30	Poisoning	56
Eye Injury	31	BBP	57
Open Chest Wound	31	Oxygen	72
Gunshots	32		

1

Acting as a First Responder

Most injuries and illnesses are minor. These incidents normally involve a person who is breathing. An illness or accident becomes life-threatening when the event affects the amount of oxygen required by the body's tissues and organs.



Good Samaritan Laws



Legal doctrines that protect a rescuer who has voluntarily helped a person in distress from being successfully sued for "wrongdoing". The laws vary by jurisdiction, yet all 50 states have some type of Good Samaritan law.

Activating Emergency Medical Services

Getting EMS to the scene quickly is a fundamental responsibility of a responder. Activate EMS when a person has:

- Chest Pain
- Drug Overdose
- Heart Attack
- Heat Stroke
- Puncture Wounds
- Poisoning
- Serious Burns
- Bleeding That Will Not Stop
- Unequal Pupil Size
- Sudden Slurred Speech
- Injuries to the Hands or Face
- Sudden Blindness
- Problems with Movement or Sensation
- Vomiting Blood or Persistent Vomiting
- Broken Bone via an Open Wound



Universal Precautions

The actual risk of contracting a disease when providing first aid is minimal. It is prudent to protect yourself with personal protection equipment (PPE) such as face masks, gloves, gowns, foot protection and eye masks. PPE should be worn by an individual during events where bodily fluids are present to protect against exposure to bloodborne pathogens.





"Think" First First? AID AID?

First

First, verify scene safety. You cannot help the person if you become injured. Before approaching a person be aware of the dangers that you may face. Call out "HELP" to get the attention of bystanders.

A

Activate 911 ~ If no one responds to your call for help, call 911 yourself. If possible, place the phone at the side of the person, with the speaker on.

I

Inform the person you are trained in First Aid and obtain consent ~ ask, if you can help. A conscious person has the right to refuse or accept care. If the person is unconscious, consent is implied or assumed.

D

Don personal protection ~ Provide a barrier between you and potential infections. However minimal the risk of contamination, assume that all blood and bodily fluids are infected.



Is this scene safe? Could there be a shooter or electric dangers?

After ensuring the scene is safe, caring for the person is divided into two stages; **Primary and Secondary Survey**. The Primary Survey deals with immediate life-threatening situations. The Secondary Survey involves physical exams and medical history to detect non immediate life-threatening injuries and illnesses.

TRIAGE

*If more than one person is injured, quickly perform a primary survey on each person. Give lifesaving care first. The secondary care assessment should **ONLY** be completed **AFTER** the primary survey.*

Primary Survey Life-Threatening

- Check Responsiveness
- Check Breathing
- Check for Severe Wounds
- Check for Shock

Secondary Survey Non Life-Threatening

A few examples:

- Minor Burns or Injuries
- Sprains, Strains or Broken bones
- Coughs, Colds and Sore Throats

Choreographed Team for Increased Success

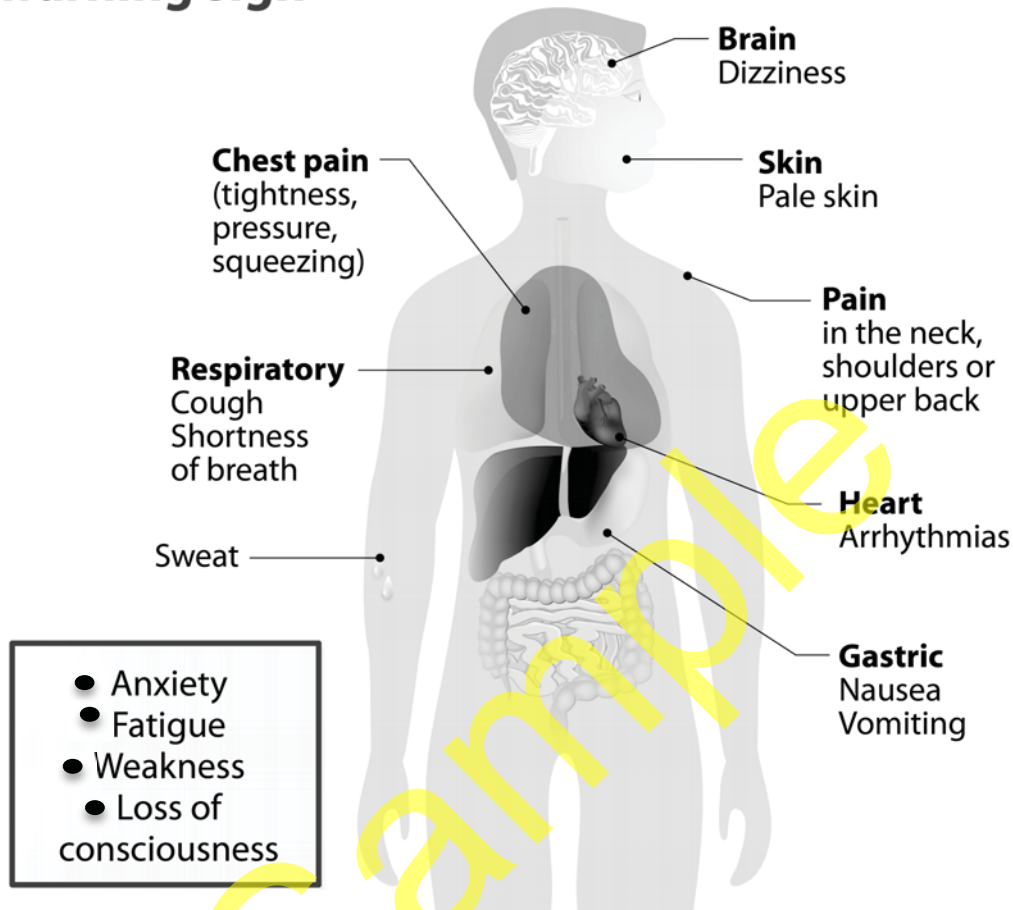
Ideally, more than 1 person will come to your call for help. Working together will increase the likelihood of a successful outcome and minimize interruptions in chest compressions when performing CPR.

Assign Team Tasks:

- Call 911
- Meet and Direct EMS
- Get the AED
- Monitor chest compression depth and rate
- Switch with the Compressor when fatigued



HEART ATTACK warning sign



Risk Factors for Heart Disease

Changeable conditions	Changeable behaviors	Unchangeable factors
<ul style="list-style-type: none"> • High blood pressure • High cholesterol • Diabetes 	<ul style="list-style-type: none"> • Smoking • Unhealthy diet • Obesity • Physical inactivity • Too much alcohol 	<ul style="list-style-type: none"> • Older age • Family history of heart disease