

Lesson Plan:
Brett Wuth

Lesson Plan

Scope:

What is included in this lesson, what's not and why.

Objectives:

At the conclusion of this lesson the participants:

1. will be able to

Time Plan:

Total Time: ?? minutes

Start	Material
00:00 3 min	<ul style="list-style-type: none">• Introduce topic title• Introduce Instructor• Present Objectives
00:03	<ul style="list-style-type: none">• instructional points in normal font• <i>aids, exercises, activities in italic</i>
	<i>Scope the audience</i> <ul style="list-style-type: none">• Who has what level of training?• <i>Solicit their input</i>
	Training available <ul style="list-style-type: none">• Standard First Aid, CPR<ul style="list-style-type: none">• 16 hour course• Everyone should have• Co-requisite for SAR Fundamentals• Wilderness First Aid<ul style="list-style-type: none">• not standardized, widely varying quality• technically equivalent to Standard First Aid• 40 hour course• Advanced Wilderness First Aid<ul style="list-style-type: none">• 80 hour course• Professional level training<ul style="list-style-type: none">• Prehospital: EMR, EMT, Paramedic (EMT-P)• Hospital: Practical Nurse, RN• Doctor• Military<ul style="list-style-type: none">• Medic
	This section does not replace first aid training. Highlights what might not be covered in Standard First Aid.
	“Casualty” vs. “Subject” vs. “Patient”

Start	Material
	Keeping out of trouble <ul style="list-style-type: none"> • Safety pyramid – self, team, subject • Do no harm • Act within your level of training • Don't abandon your casualty – turn over to higher care • Keep records
	Who is most likely to be your casualty? <ul style="list-style-type: none"> • Fellow searchers • Yourself • Subject
	Most likely casualty conditions? <ul style="list-style-type: none"> • Hypothermia • Injuries (trauma) • Shock
	Complications in SAR <ul style="list-style-type: none"> • It can be hours until hand-off to higher medical training • The condition may have progressed considerably by the time the subject is found • You may have to transport the casualty • The environment will make your casualty worse
	Hypothermia
	Injuries <ul style="list-style-type: none"> • Address bleeding • Immobilize joints above/below • Spinal considerations

Start	Material
	<p>Shock</p> <ul style="list-style-type: none"> • different from lay term: emotion - stunned • Oxygen (blood) not reaching organs causing them to fail • Deadly • Causes <ul style="list-style-type: none"> • Not enough blood (hypovolemic)– expect with major injuries • Not enough fluids – severe dehydration, burns • Not enough blood movement – heart problems (cardiogenic) • Blood vessels too dialated – brain/spinal injury (neurogenic), severe allergic reaction (anaphylactic), sever infection (septic) • Signs & Symptoms [ERI slides] <ul style="list-style-type: none"> • pale, cool clammy skin • rapid weak pulse • rapid shallow respirations • thirst, nauseau, vomitting • Restless, confused, disoriented, combative, lethargic • dilated pupils • late sign: slow weak pulse, low blood pressure • Treatment [ERI slides] <ul style="list-style-type: none"> • Maintain airway & assist breathing • Treat cause if possible • Elevate feet • Provide warmth to maintain body heat • Nothing by mouth • Gentle handling • Splint & immobilize injuries to reduce pain • Reassurance • Frequent reassessment

Aids:

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Frequently Asked Questions

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Feedback:

(date) Wuth presentation at

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Reference Material:

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Notes:

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