

Occupational First Aid

Level 2 Training Guide Deliberate Practice



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DAY 1

Deliberate Practice 1

Primary Survey / Secondary Survey

CPR / AED

Instructions

Skills

In this session, you will practise:

- Primary Survey / Secondary Survey
- CPR / AED

Instructions

Take turns playing the role of OFA attendant and patient:

- The OFA attendant completes the steps listed in the left column.
- The patient responds based on the information in the right column.

Each learner should use a different Scenario if possible.

At the end of each skill, each learner does a **Self-Assessment**. If you have questions, ask the instructor for help.

Do a **Self-Assessment** at the end of each skill.

Primary Survey / Secondary Survey

Scenario 1 (approx. 7 min/learner)

Work in groups of three.

Read the scenario out loud

You were called into the warehouse to help a worker. A forklift hit the worker when the operator was unloading a trailer. He says he was hit as the forklift was backing out of the trailer with a pallet of product. He was knocked to the ground, but the forklift was not going very fast. His left leg was injured.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	Area where accident happened has been cordoned off Forklift has been secured 1 injured Based on mechanism of injury, spinal motion restriction required
<input type="checkbox"/> Manually stabilize head and neck if required	
<input type="checkbox"/> If possible, train helper to take over manual stabilization	
<input type="checkbox"/> LOC (AVPU)	Patient is alert
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Speaking clearly, stabilize head and neck
<input type="checkbox"/> Breathing (look, listen, feel)	Breathing is effective
<input type="checkbox"/> Circulation (signs of shock, RBS)	No signs of shock No blood or other injuries
<input type="checkbox"/> Critical interventions	Support injured leg in position found Cover with a blanket <i>Protocol for fractures covered later in course</i>
<input type="checkbox"/> Transport decision	Medical aid - transport by BC EHS suspected fracture (unable or unwilling to walk)

OFA Attendant	Patient
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> Breathing (rate and quality) LOC (AVPU) Heart rate and quality Skin (colour, temperature, condition) 	Time Breathing 12/min, effective and even Alert, eyes open, speaking Heart rate 88 regular Skin normal, dry and warm
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> Where does it hurt? What happened? Allergies (medical device?) Medications Past medical history 	Leg hurts to move it No associated problems No allergies No medications No relevant past medical history
<input type="checkbox"/> Head-to-toe exam (injuries)	Pain is in lower leg, above ankle No other injuries found Further treatment: <i>Protocol for fractures covered later in course</i>
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn 2 Gaining Competence 3 Fully Competent

What do you need to improve? How will you improve?

Primary Survey / Secondary Survey

Scenario 2 (approx. 7 min/learner)

Work in groups of three.

Read the scenario out loud

A farm worker was kicked in the leg by a horse when he was loading the horse into a small transport trailer. He tells you that he thinks his leg is broken. When you arrive, the rancher is sitting. He did not fall.

Practice the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 injured Based on mechanism of injury, spinal motion restriction is not required
<input type="checkbox"/> LOC (AVPU)	Patient is alert
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Speaking clearly
<input type="checkbox"/> Breathing (look, listen, feel)	Normal
<input type="checkbox"/> Circulation (signs of shock, RBS)	No signs of shock Small amount of blood on pantleg Deformity just below the knee No other injuries
<input type="checkbox"/> Critical interventions	No interventions needed The patient should be positioned supine and the leg manually stabilized
<input type="checkbox"/> Transport decision	Medical aid - transport by BC EHS Suspected fracture (unable or unwilling to walk)

OFA Attendant	Patient
Secondary Survey	
<input type="checkbox"/> Record name, date, time, findings	Time
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing 12/min; effective and even Alert Heart rate 64/min, easily felt Skin normal, dry and warm
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	No relevant medical history
<input type="checkbox"/> Head-to-toe exam (injuries)	Pain is in lower leg, just below the knee No other injuries found Further treatment: <i>Protocol for fractures covered later in course</i>
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

CPR / AED

Scenario 1 (approx. 10 min/learner)

Work in groups of two or three. Use a mannequin when practising CPR/AED.

Read the scenario out loud

A worker who had been complaining of chest pain began to collapse and was helped to the floor. When you arrive, he is lying supine and is not breathing. A helper is available to assist with using the AED.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards Co-workers tell you what happened 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	Doesn't respond to verbal or pain stimulus Patient is unresponsive
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Not speaking
<input type="checkbox"/> Breathing (look, listen, feel)	When you arrive, patient is not breathing
CPR/AED Ask a helper to get an AED. <input type="checkbox"/> 30 chest compressions <ul style="list-style-type: none"> • Hard surface; expose chest • Kneel with your knees apart • Hands between nipples • Interlock fingers, arms straight • Press straight down (at least 5 cm and 100/min) 	30 chest compressions
<input type="checkbox"/> If unresponsive, pocket mask ventilations 2 breaths	Upon ventilation, chest rises with 2 breaths; AED arrives
<input type="checkbox"/> Continue CPR; attach AED (helper assists): <ul style="list-style-type: none"> • Bare chest • Turn on AED; follow prompts • Shave hair; remove med patches; chest dry • Apply pads at least 1 in from implanted devices 	After 2 min of CPR and AED, patient starts to breathe.

OFA Attendant	Patient
<input type="checkbox"/> Analyze heart rhythm: <ul style="list-style-type: none"> • "Stop compressions and don't touch the patient" • Standing clear • Follow voice prompts or press Analyze 	
<input type="checkbox"/> Deliver a shock: <ul style="list-style-type: none"> • "I'm clear. Everyone is clear. Do not touch the patient." • If prompted, press Shock 	
<input type="checkbox"/> Transport decision	Rapid transport
<input type="checkbox"/> If unresponsive after shock or No Shock prompt: <ul style="list-style-type: none"> • Continue CPR for 2 min or 5 cycles of 30:20 • Reanalyze heart rhythm • Oxygen via pocket mask (if available and you're trained) 	
<input type="checkbox"/> Switch roles every 2 min	If unresponsive and not breathing normally, continue CPR/AED until normal breathing resumes or BC EHS arrives and asks you to stop.

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

CPR / AED

Scenario 2 (approx. 10 min/learner)

Work in groups of two or three. Use a mannequin when practising CPR/AED.

Read the scenario out loud

You are called to a meeting room where a worker has been having chest pain. By the time that you arrive 6 min later, she is no longer conscious and has been helped to the floor. She is lying supine and not breathing. A helper is available to assist with using the AED.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards Co-workers tell you what happened 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	Doesn't respond to verbal stimulus Patient is unresponsive
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Not speaking
<input type="checkbox"/> Breathing (look, listen, feel)	When you arrive, patient is not breathing
CPR/AED Ask helper to get an AED. <input type="checkbox"/> 30 chest compressions <ul style="list-style-type: none"> • Hard surface; expose chest • Kneel with your knees apart • Hands between nipples • Interlock fingers, arms straight • Press straight down (at least 5 cm and 100/min) 	30 chest compressions
<input type="checkbox"/> If unresponsive, pocket mask ventilations 2 breaths	Upon ventilation, chest rises with 2 breaths; AED arrives
<input type="checkbox"/> Continue CPR; attach AED (helper assists): <ul style="list-style-type: none"> • Bare chest • Turn on AED; follow prompts • Shave hair; remove med patches; chest dry • Apply pads at least 1 in from implanted devices 	After 2 min of CPR and AED, patient starts to breathe.

OFA Attendant	Patient
<input type="checkbox"/> Analyze heart rhythm: <ul style="list-style-type: none"> • "Stop compressions and don't touch the patient" • Standing clear • Follow voice prompts or press Analyze 	
<input type="checkbox"/> Deliver a shock: <ul style="list-style-type: none"> • "I'm clear. Everyone is clear. Do not touch the patient." • If prompted, press Shock 	
<input type="checkbox"/> Transport decision	Rapid transport
<input type="checkbox"/> If unresponsive after shock or No Shock prompt: <ul style="list-style-type: none"> • Continue CPR for 2 min or 5 cycles of 30:20 • Reanalyze heart rhythm • Oxygen via pocket mask (if available and you're trained) 	
<input type="checkbox"/> Switch roles every 2 min	If unresponsive and not breathing normally, continue CPR/AED until normal breathing resumes or BC EHS arrives and asks you to stop.

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

DAY 1

Deliberate Practice 2

Partial Airway Obstruction Conscious

Complete Airway Obstruction Conscious

Instructions

Skills

In this session, you will practise:

- Partial Airway Obstruction Conscious
- Complete Airway Obstruction Conscious

Instructions

Take turns playing the role of OFA attendant and patient:

- The OFA attendant completes the steps listed in the left column.
- The patient responds based on the information in the right column.

Each learner should use a different Scenario if possible.

At the end of each skill, each learner does a **Self-Assessment**. If you have questions, ask the instructor for help.

Do a **Self-Assessment** at the end of each skill.

Partial Airway Obstruction Conscious

Scenario 1 (approx. 5 min/learner)

Work in pairs.

Read the scenario out loud

You are called to a meeting room to attend to a fellow worker who is choking. As you approach, she is coughing effectively and asking for help. Her skin is flushed.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 injured Based on mechanism of injury, spinal motion restriction is not required
<input type="checkbox"/> LOC (AVPU)	Eyes are open Patient is alert
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Coughing and asking for help
<input type="checkbox"/> Position for comfort and coughing	After being positioned for comfort, patient stops coughing
<input type="checkbox"/> Breathing (look, listen, feel)	Not breathing BECOMES COMPLETE AIRWAY OBSTRUCTION
<input type="checkbox"/> Up to 5 back blows: <ul style="list-style-type: none"> • Tell patient what you'll be doing • Your arm across patient's upper body • Up to 5 back blows 	
<input type="checkbox"/> Up to 5 ab thrusts: <ul style="list-style-type: none"> • From behind, wrap both arms around patient's waist • Hold fist with thumb against abdomen (midline above navel) • With other hand, grasp fist and press in and upwards 	After back blows and ab thrusts, patient spits out food
<input type="checkbox"/> Repeat back blows and ab thrusts as needed	

OFA Attendant	Patient
<input type="checkbox"/> Position for comfort; reassess breathing	Breathes normally
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin colour normal No other injuries
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Rapid Transport
Secondary Survey	
<input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Patient's own
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Sore throat, abdominal pain
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn 2 Gaining Competence 3 Fully Competent

What do you need to improve? How will you improve?

Partial Airway Obstruction Conscious

Scenario 2 (approx. 5 min/learner)

Work in pairs.

Read the scenario out loud

You are out with colleagues having a celebratory lunch when one of your co-workers starts to choke. He is coughing and asking for help.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 injured Based on mechanism of injury, spinal motion restriction is not required
<input type="checkbox"/> LOC (AVPU)	Eyes are open Patient is alert
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Coughing and asking for help
<input type="checkbox"/> Position for comfort and coughing	After being positioned for comfort, patient keeps coughing
<input type="checkbox"/> Breathing (look, listen, feel)	He inhales adequately before each cough Can speak in 3 to 4 word sentences
<input type="checkbox"/> Circulation (signs of shock, RBS)	55+ Skin colour normal No other injuries
<input type="checkbox"/> Critical interventions <ul style="list-style-type: none"> • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Partial airway obstruction is not relieving Showing signs of respiratory distress Rapid Transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality 	Patient's own

OFA Attendant	Patient
<ul style="list-style-type: none"> • Skin (colour, temperature, condition) 	
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Sore throat, abdominal pain
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Complete Airway Obstruction Conscious

Scenario 1 (approx. 10 min/learner)

Work in pairs.

Read the scenario out loud

At a health and safety meeting, a worker stands up and clutches his throat. He's unable to speak or cough. His face is red.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 injured Based on mechanism of injury, spinal motion restriction is not required
<input type="checkbox"/> LOC (AVPU)	Eyes are open, but patient is unable to speak Patient is alert
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Patient's eyes follow you Patient nods when you ask if he's choking
<input type="checkbox"/> Up to 5 back blows: <ul style="list-style-type: none"> • Tell patient what you'll be doing • Your arm across patient's upper body • Up to 5 back blows 	
<input type="checkbox"/> Up to 5 ab thrusts: <ul style="list-style-type: none"> • From behind, wrap both arms around patient's waist • Hold fist with thumb against abdomen (midline above navel) • With other hand, grasp fist and press in and upwards 	After back blows and ab thrusts, airway clears Patient coughs
<input type="checkbox"/> Repeat back blows and ab thrusts as needed	
<input type="checkbox"/> Position for comfort; reassess breathing	Patient takes deep breaths
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is pale Patient complains of abdominal pain where you performed abdominal thrusts

OFA Attendant	Patient
<input type="checkbox"/> Critical Interventions: <ul style="list-style-type: none"> • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Rapid Transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Patient's own
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Sore throat, burning nasal passages abdominal pain
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Complete Airway Obstruction Conscious

Scenario 2 (approx. 10 min/learner)

Work in pairs.

Read the scenario out loud

You are meeting with a colleague in her office. She is snacking on a cookie. Suddenly, she starts to choke. She's unable to speak or cough. Her face is red.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 injured Based on mechanism of injury, spinal motion restriction is not required
<input type="checkbox"/> LOC (AVPU)	Eyes are open, but patient is unable to speak Patient is alert
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Patient's eyes follow you Patient nods when you ask if she's choking
<input type="checkbox"/> Up to 5 back blows: <ul style="list-style-type: none"> • Tell patient what you'll be doing • Your arm across patient's upper body • Up to 5 back blows 	
<input type="checkbox"/> Up to 5 ab thrusts: <ul style="list-style-type: none"> • From behind, wrap both arms around patient's waist • Hold fist with thumb against abdomen (midline above navel) • With other hand, grasp fist and press in and upwards 	After back blows and ab thrusts, airway clears Patient coughs
<input type="checkbox"/> Repeat back blows and ab thrusts as needed	
<input type="checkbox"/> Position for comfort; reassess breathing	Patient takes deep breaths
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is pale Patient complains of abdominal pain where you performed abdominal thrusts

OFA Attendant	Patient
<input type="checkbox"/> Critical Interventions: <ul style="list-style-type: none"> • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Rapid Transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Patient's own
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Sore throat, burning nasal passages abdominal pain
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

DAY 2

Deliberate Practice

Partial Airway Obstruction Conscious

Partial Airway Obstruction Unresponsive

Complete Airway Obstruction Conscious

Complete Airway Obstruction Unresponsive

Instructions

Skills

In this session, you will practise:

- Partial Airway Obstruction Unresponsive
- Complete Airway Obstruction Unresponsive

Instructions

Take turns playing the role of OFA attendant and patient:

- The OFA attendant completes the steps listed in the left column.
- The patient responds based on the information in the right column.

Each learner should use a different Scenario if possible.

At the end of each skill, each learner does a **Self-Assessment**. If you have questions, ask the instructor for help.

Do a **Self-Assessment** at the end of each skill.

Partial Airway Obstruction Unresponsive

Scenario 1 (approx. 10 min/learner)

Work in pairs with a mannequin or in groups of three. Use a person for the secondary survey.

Read the scenario out loud

A mill worker was struck in the face by a log as it broke free from a jam. When you arrive, he is lying supine. There is blood around his mouth. You hear a gurgling sound.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	Hazard has been removed Co-workers tell you what happened 1 person injured Based on mechanism of injury, spinal motion restriction required
<input type="checkbox"/> Manually stabilize head and neck if required	
<input type="checkbox"/> If possible, train helper to take over manual stabilization	
<input type="checkbox"/> LOC (AVPU)	Doesn't respond to verbal stimulus Patient is unresponsive
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway: <ul style="list-style-type: none"> • Head-tilt/chin-lift; assess airway 5 to 10 sec • Ask for help if available • Two-person roll patient lateral (attendant maintain stabilization) • Rolled/folded blanket under head to maintain stabilization • Finger sweep • Reassess 	Blood in and around patient's mouth Gurgling Roll and finger sweep does not clear airway
<input type="checkbox"/> Maintain lateral or 3/4 prone	
<input type="checkbox"/> Breathing (look, listen, feel)	Patient is breathing quietly in lateral or 3/4 prone
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is pale No other injuries

OFA Attendant	Patient
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Rapid Transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Patient responds to pain only Remaining vitals as found
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Facial lacerations, broken nose, missing denture
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Partial Airway Obstruction Unresponsive

Scenario 2 (approx. 10 min/learner)

Work in pairs with a mannequin or in groups of three. Use a person for the secondary survey.

Read the scenario out loud

A worker was struck in the face by a beam as it broke from a cable. She is lying supine when you arrive on the scene. You see blood on her face and bubbles by her nose and mouth. You hear a noisy, gurgling sound as you approach.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	Hazard has been removed Co-workers tell you what happened 1 person injured Based on mechanism of injury, spinal motion restriction required
<input type="checkbox"/> Manually stabilize head and neck if required	
<input type="checkbox"/> If possible, train helper to take over manual stabilization	
<input type="checkbox"/> LOC (AVPU)	Doesn't respond to verbal stimulus Patient is unresponsive
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway: <ul style="list-style-type: none"> • Head-tilt/chin-lift; assess airway 5 to 10 sec • Ask for help if available • Two-person roll patient lateral (attendant maintain stabilization) • Rolled/folded blanket under head to maintain stabilization • Finger sweep • Reassess 	Blood in and around patient's mouth Gurgling Roll and finger sweep does not clear airway
<input type="checkbox"/> Maintain lateral or 3/4 prone	
<input type="checkbox"/> Breathing (look, listen, feel)	Patient is breathing
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is pale and cyanotic No other injuries

OFA Attendant	Patient
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Rapid Transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Patient responds to pain only Remaining vitals as found
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Facial lacerations, broken nose, missing denture
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Complete Airway Obstruction Unresponsive

Scenario 1 (approx. 10 min/learner)

Work in groups of three.

Read the scenario out loud

You receive a phone call and are summoned to the senior executive area. Co-workers say a visitor was choking on a veggie bite from the catered lunch and slowly collapsed. When you arrive, she is lying supine on the floor. You think to yourself—Brussel sprouts—it's no wonder she choked.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards Co-workers tell you what happened 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	Doesn't respond to verbal or pain stimulus Patient is unresponsive
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Head-tilt/chin-lift	
<input type="checkbox"/> Breathing (look, listen, feel)	When you arrive, patient is not breathing
<input type="checkbox"/> Apply CPR <ul style="list-style-type: none"> • 30 chest compressions • Attempt to ventilate • Reposition head; attempt to ventilate again • 30 chest compressions • Look in mouth; remove any object • Attempt to ventilate • Reposition head; attempt to ventilate again • Repeat compression, look in mouth, and vent attempts as needed 	Unable to ventilate on first attempt Nothing in mouth until second cycle of chest compressions when a Brussel sprout is removed. Upon ventilation, two breaths go in
<input type="checkbox"/> Reassess breathing	Patient starts to breathe again You can now hear regular, quiet breathing
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin normal, warm and dry No cyanosis No other injuries

OFA Attendant	Patient
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> 3/4 prone	
<input type="checkbox"/> Transport decision	Rapid Transport - unresponsive
Secondary Survey	
<input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Patient's own - patient unresponsive
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Nothing remarkable found
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Complete Airway Obstruction Unresponsive

Scenario 2 (approx. 10 min/learner)

Work in groups of three.

Read the scenario out loud

A worker is found unconscious in his office chair. His lunch is half-eaten on his desk. It's a gluten free veggie sandwich. You think to yourself—it's no wonder he choked. As you approach, co-workers gently lay him supine.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards Co-workers tell you what happened 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	Doesn't respond to verbal or pain stimulus Patient is unresponsive
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Head-tilt/chin-lift	
<input type="checkbox"/> Breathing (look, listen, feel)	When you arrive, patient is not able to speak and not breathing
<input type="checkbox"/> Apply CPR <ul style="list-style-type: none"> • 30 chest compressions • Attempt to ventilate • Reposition head; attempt to ventilate again • 30 chest compressions • Look in mouth; remove any object • Attempt to ventilate • Reposition head; attempt to ventilate again • Repeat compression, look in mouth, and vent attempts as needed 	Unable to ventilate on first attempt Nothing in mouth until second cycle; food is removed. Upon ventilation, two breaths go in.
<input type="checkbox"/> Reassess breathing	Patient starts to breathe again You can now hear regular, quiet breathing

OFA Attendant	Patient
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin normal, warm and dry No cyanosis No other injuries
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> 3/4 prone	
<input type="checkbox"/> Transport decision	Rapid Transport - unresponsive
Secondary Survey	
<input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Patient's own - patient unresponsive
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Nothing remarkable found
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn 2 Gaining Competence 3 Fully Competent

What do you need to improve? How will you improve?

DAY 3

Deliberate Practice

Massive Bleeding

Amputation

Major Eye Injury

Major Sprains, Dislocations and Fractures

Instructions

Skills

In this session, you will practise:

- Massive Bleeding
- Amputation
- Major Eye Injury
- Major Burns
- Major Sprains, Dislocations and Fractures

Instructions

Take turns playing the role of OFA attendant and patient:

- The OFA attendant completes the steps listed in the left column.
- The patient responds based on the information in the right column.

Each learner should use a different Scenario if possible.

At the end of each skill, each learner does a **Self-Assessment**. If you have questions, ask the instructor for help.

Do a **Self-Assessment** at the end of each skill.

Massive Bleeding

Scenario 1 (approx. 10 min/learner)

Work in groups of three.

Read the scenario out loud

A forklift driver is thrown out of the vehicle when it tips over. When you arrive, the driver is lying supine. She is moving. The left thigh of her pants is soaked with blood and there is a large pool of blood on the ground.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	Hazard has been controlled 1 person injured Based on mechanism of injury, spinal motion restriction required
<input type="checkbox"/> Manually stabilize head and neck if required	
<input type="checkbox"/> If possible, train helper to take over manual stabilization	
<input type="checkbox"/> LOC (AVPU)	Her eyes are open She is alert
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway and breathing on approach	You hear and feel regular, quiet breathing
<input type="checkbox"/> Apply direct pressure: <ul style="list-style-type: none"> • Scissors and dressings • Apply direct pinpoint pressure on wound and maintain • More dressing and direct pressure • If available, helper takes over direct pressure 	Arterial spurting bleed Bleeding is not controlled by direct pressure Tourniquet is needed
<input type="checkbox"/> Tourniquet: <ul style="list-style-type: none"> • Apply tourniquet proximal to wound • Secure strap around limb • Say that you would tighten windlass until bleeding stops (don't actually do it) • Anchor windlass • Tag tourniquet with time applied 	Tourniquet stops the bleeding.

OFA Attendant	Patient
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is pale, cool and dry She has a large contusion on her head as well as the leg bleed
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • More dressings if needed • Bandage • Supine • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Rapid transport
Secondary Survey	
<input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing 28/min; shallow and effective Patient is alert Heart rate is 112; regular and weak Skin is pale, cool and dry
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Swelling on the top of the head Patient obeys commands – all extremities
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn 2 Gaining Competence 3 Fully Competent

What do you need to improve? How will you improve?

Massive Bleeding

Scenario 2 (approx. 10 min/learner)

Work in groups of three.

Read the scenario out loud

A groundskeeper is thrown off the lawn tractor when it rolls over a steep hill. When you arrive, the worker is lying supine and not moving. His pants on the left thigh are soaked with blood and there is a large pool of blood on the ground.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	Hazard has been controlled 1 person injured Spinal motion restriction required
<input type="checkbox"/> Manually stabilize head and neck if required	
<input type="checkbox"/> If possible, train helper to take over manual stabilization	
<input type="checkbox"/> LOC (AVPU)	His eyes are closed, no response to voice, Patient moans and withdraws to pain
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway and breathing on approach	Open the airway You hear and feel regular, quiet breathing
<input type="checkbox"/> Apply direct pressure: <ul style="list-style-type: none"> • Scissors and dressings • Apply direct pinpoint pressure on wound and maintain • More dressing and direct pressure • If available, helper takes over direct pressure 	Moderate flow of dark blood (venous) Bleeding is controlled by direct pressure Tourniquet is not needed
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is normal, warm and dry A large contusion on his head and the leg bleed
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • More dressings if needed • Bandage • Supine • Blanket 	Apply more dressings and bandage the wound
<input type="checkbox"/> Transport decision	Rapid transport – unresponsive

OFA Attendant	Patient
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> Breathing (rate and quality) LOC (AVPU) Heart rate and quality Skin (colour, temperature, condition) 	Time Breathing 24/min; effective Responds to pain only Heart rate 112; weak and regular Skin pale, cool and clammy
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> Where does it hurt? What happened? Allergies (medical device?) Medications Past medical history 	Patient's own No medical alerts found
<input type="checkbox"/> Head-to-toe exam (injuries)	Thigh injury hemorrhage is controlled Withdraws from pain
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn 2 Gaining Competence 3 Fully Competent

What do you need to improve? How will you improve?

Amputation

Scenario 1 (approx. 10 min/learner)

Work in groups of three.

Read the scenario out loud

A hothouse worker's hand and part of her forearm was amputated when she caught her arm in a screw auger. When you arrive, she is sitting, leaning against a piece of farm equipment. She is speaking in a clear voice. Her arm is bleeding heavily.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	Patient's eyes are open, responds with clear speech, and is very anxious
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> If helper available, give them gloves	
<input type="checkbox"/> Airway and breathing on approach	Talking normally - Airway is clear Breathing is normal
<input type="checkbox"/> Control bleeding: <ul style="list-style-type: none"> • Direct pressure; patient supine • Expose site of bleeding • Keep upper arm in contact with ground • Additional dressings if needed • More direct pressure if needed • If available, helper takes over direct pressure 	You can see red blood spurting out of the wound Apply dressings and direct pressure on the wound Dressings soak through rapidly Bleeding is not controlled by direct pressure
<input type="checkbox"/> Tourniquet: <ul style="list-style-type: none"> • Apply tourniquet proximal to wound • Secure strap around limb • Say that you would tighten windlass until bleeding stops (don't actually do it) • Anchor windlass • Tag tourniquet with time applied 	Tourniquet is needed Bleeding stops after tourniquet is applied
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is cold, pale and clammy No other injuries found

OFA Attendant	Patient
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • Bandage using crepe roller; do not cover tourniquet • Supine • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Rapid transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing 24/min; effective Patient is alert Heart rate is 104 and regular Skin is pale, cool, clammy
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient is allergic to Demerol No known medications No pertinent medical history
<input type="checkbox"/> Head-to-toe exam (injuries)	Partial amputation of forearm; no other injuries found Patient complains of being cold and thirsty
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	
<input type="checkbox"/> Prepare amputated part: <ul style="list-style-type: none"> • Clean off gross foreign matter • Dress in sterile, moist gauze • Waterproof bag with seal; inside another bag with ice • Label bag with time amputated; transport with patient 	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Amputation

Scenario 2 (approx. 10 min/learner)

Work in groups of three.

Read the scenario out loud

A batch plant worker's arm was amputated just above the elbow. When you arrive, he is speaking in a clear voice and resting against a wall. His arm is bleeding heavily.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	Patient's eyes are open, responds with clear speech, and is very anxious
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> If helper available, give them gloves	
<input type="checkbox"/> Airway and breathing on approach	Talking normally - Airway is clear Breathing is normal Speaking in full sentences
<input type="checkbox"/> Control bleeding: <ul style="list-style-type: none"> • Direct pressure; patient supine • Expose site of bleeding • Keep upper arm in contact with ground • Additional dressings if needed • More direct pressure if needed • If available, helper takes over direct pressure 	You can see red blood spurting out of the wound Apply dressings and direct pressure Dressings soak through rapidly Bleeding is not controlled by direct pressure
<input type="checkbox"/> Tourniquet: <ul style="list-style-type: none"> • Apply tourniquet proximal to wound • Secure strap around limb • Say that you would tighten windlass until bleeding stops (don't actually do it) • Anchor windlass • Tag tourniquet with time applied 	Tourniquet is needed Bleeding stops after tourniquet is applied
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is cold, pale and clammy No other injuries found

OFA Attendant	Patient
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • Bandage using crepe roller; do not cover tourniquet • Supine • Blanket • Oxygen if available and you're trained 	
<input type="checkbox"/> Transport decision	Rapid transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing 20/min; effective Patient is alert Heart rate is 104 and regular Skin is pale, cool, clammy
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient is allergic to penicillin No known medications No pertinent medical history
<input type="checkbox"/> Head-to-toe exam (injuries)	Complete amputation of forearm No other injuries found Patient complains of being cold and thirsty
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	
<input type="checkbox"/> Prepare amputated part: <ul style="list-style-type: none"> • Clean off gross foreign matter • Dress in sterile, moist gauze • Waterproof bag with seal; inside another bag with ice • Label bag with time amputated; transport with patient 	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Major Eye Injuries

Scenario 1 (approx. 7 min/learner)

Work in pairs.

Read the scenario out loud

An inexperienced residential construction worker was installing an aluminum railing on an unguarded deck. The worker was using a skill saw to trim an aluminum component when something penetrated his eye, and then he fell approximately 3 metres (10 ft) to the concrete below. When you arrive, he is lying supine on the ground covering his eye.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 person injured A small piece of metal protrudes from his right eye He's very anxious about being unable to see out of right eye Slight bleeding at the insertion point Based on mechanism of injury, spinal motion restriction required
<input type="checkbox"/> Manually stabilize head and neck if required	
<input type="checkbox"/> If possible, train helper to take over manual stabilization	
<input type="checkbox"/> LOC (AVPU)	His eyes are closed No response to voice Patient moans and withdraws to pain
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway	Speaks clearly
<input type="checkbox"/> Breathing	Breathing is normal
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is normal, warm and dry Penetrating wound to right eye Pain and deformity at left elbow (hold it still) No pain anywhere else
<input type="checkbox"/> Blanket	

OFA Attendant	Patient
<input type="checkbox"/> Injury care: <ul style="list-style-type: none"> • Both eyes covered with sterile dressing • Wearing gloves, helper holds dressings • Support any other injuries found during RBS 	
<input type="checkbox"/> Transport decision	Rapid transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing 20/min; regular and effective Patient is alert Heart rate 64; regular Skin normal, warm and dry
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Bleeding at right eye is minimal Controlled when covered with gauze (don't apply pressure) Patient complains of a headache Closed fracture/dislocation of left elbow Deformity and swelling posterior elbow Patient refuses to move left wrist for fear of increasing pain at the elbow Will move fingers if asked Patient is able to feel touch upon palpation Wiggles fingers and toes All extremities are warm to touch
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Major Burns

Scenario 1 (approx. 7 min/learner)

Work in pairs.

Read the scenario out loud

A glazier's arm caught fire while he was cleaning glass with chemicals. He has burns to his hand, arms and face. He is in a lot of pain. His co-workers soaked him with water to put out the fire.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	
<input type="checkbox"/> Start flushing burn with cool water	
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Patient's eyes are open and he is anxious Speaks clearly in full sentences
<input type="checkbox"/> Breathing (look, listen, feel)	Breathing is normal
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin on face is red and warm Second-degree partial and full-thickness burns to hand Second-degree partial-thickness burns to arms and face No obvious signs of shock No other injuries – ensure cooling continues
<input type="checkbox"/> Critical interventions: <ul style="list-style-type: none"> • Continue cooling • Remove jewelry 	
<input type="checkbox"/> Transport decision	Rapid transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	

OFA Attendant	Patient
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing 20/min, regular and effective Patient is alert Heart rate 88/min, easily felt Skin is red (from burns), warm and dry
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries) <ul style="list-style-type: none"> • Injuries assessed • Moist sterile gauze • Roller bandage • Elevate if possible 	Second-degree full-thickness burns to right forearm, wrist and hand No other injuries found Treat burn injuries on hands
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Major Sprains, Dislocations and Fractures

Scenario 1 (approx. 10 min/learner)

Work in pairs.

Read the scenario out loud

A worker was working alone changing the drive shaft on a 5-ton truck in the parking lot without chocking the wheels. When the worker disconnected the driveshaft, the vehicle started to roll and the worker's legs were pinned under the rear wheels. When you arrive, he is supine, screaming about pain in his legs.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards – truck secured 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	Patient is alert and in extreme pain
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Talking clearly
<input type="checkbox"/> Breathing (look, listen, feel)	Breathing is normal Chest rises and falls normally
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is normal, warm and dry A little blood soaked through one pant leg Both legs are unstable at the mid-thigh No pain anywhere else
<input type="checkbox"/> Immobilize manually	
<input type="checkbox"/> Transport decision	Rapid transport
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing is 20/min, regular and effective Patient is alert Heart rate is 88/min and regular Skin is warm, normal colour

OFA Attendant	Patient
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries) <ul style="list-style-type: none"> • Injuries assessed • Moist sterile gauze • Roller bandage • Elevate if possible 	Bi-lateral mid 1/3 femur fractures Minimal bleeding Can't feel or move feet
<input type="checkbox"/> Injury care: <ul style="list-style-type: none"> • Bandage • Apply ice • Immobilize • Recheck circulation 	
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

Major Sprains, Dislocations and Fractures

Scenario 2 (approx. 10 min/learner)

Work in pairs.

Read the scenario out loud

A forklift operator accidentally lowered a heavy pallet of produce onto a co-worker's foot. When the co-worker screamed, the operator quickly lifted the pallet and moved it out of the way. The injured worker was wearing knee-high sport socks with sandals. When you arrive, the injured worker is sitting on the warehouse floor. The worker has removed their footwear from their injured foot.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards – forklift is secured 1 person injured Spinal motion restriction not required
<input type="checkbox"/> LOC (AVPU)	Patient is alert Complains of extreme pain in left foot
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Talking clearly
<input type="checkbox"/> Breathing (look, listen, feel)	Breathing is normal, regular and effective
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin normal, warm and dry Blood soaked toes of left sock No pain anywhere else
<input type="checkbox"/> Immobilize manually	
<input type="checkbox"/> Transport decision	Rapid transport – unable/unwilling to walk
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing 20/min, regular and effective Patient is alert Heart rate is 88/min and regular Skin is warm, normal colour

OFA Attendant	Patient
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	No relevant medical history
<input type="checkbox"/> Head-to-toe exam (injuries) <ul style="list-style-type: none"> • Injuries assessed • Moist sterile gauze • Roller bandage • Elevate if possible 	Extreme pain in left foot, unable to walk Multiple open fractures of foot and toes Minimal bleeding, swelling and bruising near the ankle, moving ankle causes pain
<input type="checkbox"/> Injury care: <ul style="list-style-type: none"> • Bandage • Apply ice • Immobilize • Recheck circulation 	
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?

DAY 4

Deliberate Practice

Spinal Injuries

Instructions

Skills

In this session, you will practise:

- Spinal Injuries

Instructions

Take turns playing the role of OFA attendant and patient:

- The OFA attendant completes the steps listed in the left column.
- The patient responds based on the information in the right column.

Each learner should use a different Scenario if possible.

At the end of each skill, each learner does a **Self-Assessment**. If you have questions, ask the instructor for help.

Do a **Self-Assessment** at the end of each skill.

Spinal Injuries

Scenario 1 (approx. 7 min/learner)

Work in groups of three.

Read the scenario out loud

A worker was on the steep-sloped roof of a barn when he fell approximately 9 metres (30 ft) to the ground. The worker was wearing a fall protection harness but was not connected to the lifeline. When you arrive, the worker is supine and complaining of pain in his left flank (chest, back, abdomen and pelvis).

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Use PPE	
<input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 person injured and is lying supine Spinal motion restriction required
<input type="checkbox"/> Manually stabilize head and neck if required	
<input type="checkbox"/> If possible, train helper to take over manual stabilization	
<input type="checkbox"/> LOC (AVPU)	On approach, he's complaining about pain in his left side and back
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Speaking clearly
<input type="checkbox"/> Breathing (look, listen, feel)	Chest rises and falls normally
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin normal, warm and dry A little blood soaked through left chest area Pain in left chest, abdomen and back area No pain anywhere else
<input type="checkbox"/> Support both sides of pelvis using rolled blankets or similar (no pressure to top of pelvis)	
<input type="checkbox"/> Blanket	
<input type="checkbox"/> Transport decision	Rapid Transport Category

OFA Attendant	Patient
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> Breathing (rate and quality) LOC (AVPU) Heart rate and quality Skin (colour, temperature, condition) 	Time Breathing 24/min, shallow and effective Patient is alert Heart rate 96/min and regular Skin is pale, cool and dry
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> Where does it hurt? What happened? Allergies (medical device?) Medications Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Sharp pain in left flank, pelvis and back area Small laceration left anterior chest Minimal bleeding from chest injury Numbness and tingling in both feet Can move upper limbs but can't move feet Circulation is the same in all extremities
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn 2 Gaining Competence 3 Fully Competent

What do you need to improve? How will you improve?

Spinal Injuries

Scenario 2 (approx. 7 min/learner)

Work in groups of three.

Read the scenario out loud

An electrician fell 4 m (13 ft) to the ground while changing lights from a mobile work platform (scissor lift). When you arrive, she is lying supine on the ground.

Practise the skill

OFA Attendant	Patient
Primary Survey <input type="checkbox"/> Use PPE	
<input type="checkbox"/> Scene Assessment (hazards, MOI, number injured)	No hazards 1 person injured Spinal motion restriction required
<input type="checkbox"/> Manually stabilize head and neck if required	
<input type="checkbox"/> If possible, train helper to take over manual stabilization	
<input type="checkbox"/> LOC (AVPU)	Alert on approach Patient complains of pain in neck and upper back
<input type="checkbox"/> Workplace emergency response plan	
<input type="checkbox"/> Airway (if speaking, open)	Talking clearly
<input type="checkbox"/> Breathing (look, listen, feel)	Chest rises and falls normally
<input type="checkbox"/> Circulation (signs of shock, RBS)	Skin is normal, warm and dry Patient complains of pain on left side of neck and left posterior thoracic area No other injuries found
<input type="checkbox"/> Support both sides of pelvis using rolled blankets or similar (no pressure to top of pelvis)	
<input type="checkbox"/> Blanket	
<input type="checkbox"/> Transport decision	Rapid transport

OFA Attendant	Patient
Secondary Survey <input type="checkbox"/> Record name, date, time, findings	
<input type="checkbox"/> Vital signs: <ul style="list-style-type: none"> • Breathing (rate and quality) • LOC (AVPU) • Heart rate and quality • Skin (colour, temperature, condition) 	Time Breathing 20/min, regular and effective Patient is alert Heart rate is 88/min and regular Skin is warm and normal colour
<input type="checkbox"/> Medical history: <ul style="list-style-type: none"> • Where does it hurt? What happened? • Allergies (medical device?) • Medications • Past medical history 	Patient's own
<input type="checkbox"/> Head-to-toe exam (injuries)	Sharp pain left neck & upper back Aggravated by movement Pain does not radiate Nothing relieves the pain Arm and leg also sore and tender Started after fall, not getting worse No numbness or tingling in hands or feet Good circulation
<input type="checkbox"/> Reassess ABCs every 5 min	
<input type="checkbox"/> Reassess vitals every 10 min	

Self-Assessment

Rate your learning progression

- 1 Beginning to Learn
 2 Gaining Competence
 3 Fully Competent

What do you need to improve? How will you improve?
