A. Required Minimum Content for POST-certified First Aid/CPR/AED Refresher Course # 21797 (sample expanded course outline)

I. Role of the public safety first aid provider

A. Personal safety
   1. Scene size-up

B. Body substance isolation, including removing gloves
   1. Dust Masks
   2. N-95 Masks
   3. Proper Glove Removal Activity

C. Integration with EMS personnel to include active shooter incidents
   1. High Profile/Traffic Areas within Griffith Park
      A. Hollywood Sign
      B. Mulholland Trail
      C. Griffith Observatory

D. Mass Casualty Responsibilities
   1. Trauma Triage System

E. Minimum personal equipment and first aid kits
   1. Review of contents of:
      A. First Aid Kit Contents
      B. Emergency Medical Kit Contents
      C. Equipment Restock and Break-away Seals

II. Heart Attack and sudden cardiac arrest to include:

   1. Sudden cardiac arrest and early defibrillation
      A. Anatomy
      B. AED Locations
   2. Chain of Survival
A. Radio Broadcast to 1500 (Park Ranger Dispatch)

B. Ingress and Egress Considerations

III. CPR and AED for adults, children, and infants, following current AHA Guidelines

A. Basic airway management
   1. Anatomy

B. Rescue breathing
   1. Mouth-to-Mouth
   2. Mouth-to-Mask
   3. Bag-valve-mask (BVM)

C. Chest compressions and CPR/AED
   1. Basic AED operation
   2. Using the AED
   3. Troubleshooting and other considerations

D. Single rescuer CPR/AED on adult, child and infant
   1. Controlling Environment
   2. Compression Rate and Depth
   3. Full Chest Recoil
   4. Body Mechanics

E. Two rescuer CPR/AED on adult, child and infant
   1. Positional Considerations/Logistics
   2. Roles and Responsibilities
   3. Switching to 15:2 Ratio if Child/Infant

F. Recovery position
   1. Illustrate
   2. Students perform recovery position on another student

IV. Management of foreign body airway obstruction on adults, children, and infants
A. Conscious patients
   1. Encourage
   2. Universal Choking Sign/Consent to Help
   3. Special Considerations: Pregnant/Obese Patients

B. Unconscious patients
   1. Refer back to CPR Procedure
   2. No blind “finger sweeps”

V. Recognition and identification of adult and pediatric patients for both medical and traumatic emergencies

A. Performing a primary assessment
   1. Scene Safety/Body Substance Isolation/Personal Protective Equipment
   2. Airway
   3. Breathing
   4. Circulation
   5. Manage Life Threats

B. Performing a secondary assessment
   1. Onset?
   2. Provocation?
   3. Quality?
   4. Radiating?
   5. Severity?
   6. Time?
   7. Focused Trauma Assessment

C. Obtaining a patient history
   1. Medical History
   2. Allergies (environmental and medication)
3. Medications Taken

VI. Medical emergencies

A. Pain, severe pressure or discomfort in chest
   1. Signs and Symptoms for Men and Women
   2. Aspirin

B. Breathing difficulties, including asthma and COPD
   1. Assisted administration of prescribed inhaler
   2. Rescue Breathing

C. Allergic reaction and anaphylaxis
   1. Assisted administration of prescribed epinephrine auto-injector

D. Altered mental status
   1. Causes of Altered Level of Consciousness
      A. A-E-I-O-U T-I-P-S Acronym
   2. Last Time Seen Normal

E. Stroke
   1. Facial Droop
   2. Slurred Speech
   3. Arm Drift
   4. Grip Strength
   5. Transient Ischemic Attacks (TIAs)
   6. Time Component

F. Diabetic emergencies
   1. Administration of oral glucose

G. Seizures
   1. Febrile
2. Generalized
   A. Aura
   B. Loss of Consciousness
   C. Tonic-clonic
   D. Postictal

3. Focal

H. Alcohol and drug emergencies
   1. Assisted naloxone administration and accessing EMS

I. Severe abdominal pain
   1. Anatomy

J. Obstetrical emergencies
   1. 3 States of Labor
   2. Prolapsed Cord
   3. Nuccal Cord
   4. Limb Presentation
   5. Shoulder Dystocia
   6. Post Partum Hemorrhage

K. Signs and Symptoms of Psychological Emergencies
   1. 5150 Holds
   2. De-escalation Techniques

VII. Burns
   A. Identification and treatment
      1. First Degree Thermal
      2. Second Degree Thermal
      3. Third Degree Thermal
4. Chemical Burns

VIII. Facial injuries

A. Identification and treatment
   1. Nose
   2. Eyes
   3. Ears

IX. Environmental emergencies

A. Heat emergencies
   1. Heat Cramps
   2. Heat Exhaustion
   3. Heat Stroke

B. Cold emergencies
   1. Frost Nip
   2. Frost Bite

X. Bites and Stings

A. Insect Bites and stings
   1. Bees
   2. Snakes
   3. Spiders

B. Animal and human bites
   1. Irrigation
   2. Reporting Procedures

C. Assisted administration of epinephrine auto-injector and accessing EMS
   1. Prescribed Device
   2. Expiration Date
XI. Poisoning

A. Ingested poisoning
   1. Poison Control Number
   3. Intentional/Unintentional

B. Inhaled poisoning
   1. Carbon Monoxide

C. Exposure to chemical, biological, radiological or nuclear (CBRN) substances
   1. Decontamination Procedures
   2. Recognition of exposure/Emergency Response Guide (ERG)
   3. Scene safety

D. Poison control system
   1. Poison Control Hotline 1 800 222-1222

XII. Patient movement

A. Emergency movement of patients
   1. Emergent vs. Non-emergent

B. Lifts and carries which may include: using soft litters and manual extraction including fore/aft, side-by-side, shoulder/belt
   1. Proper Body Mechanics

XIII. Tactical and rescue first aid principles applied to violent circumstances

A. Principles of tactical casualty care
   1. Hot Zone
   2. Warm Zone
   3. Cold Zone

B. Determining treatment priorities
1. Trauma Triage System

XIV. Orientation to EMS system, including

A. 9-1-1 Access
   1. Radio communications through Park Ranger Dispatch

B. Interaction with EMS personnel
   1. Terminology
   2. Patient Handoff
   3. Accuracy, Brevity, Clarity

C. Identification of local EMS and trauma systems
   1. Los Angeles County Emergency Medical Services

XV. Trauma emergencies

A. Soft tissue injuries and wounds
   1. Occlusive Dressings
   2. Hemostatic Dressings
   3. Roll Gauze
   4. Sponges

B. Amputations and impaled objects
   1. Stabilize in place
   2. Packaging Amputations

C. Chest and abdominal injuries
   1. Review of basic treatment for chest wall injuries
   2. Application of chest seals

D. Head, neck or back injury
   1. Spinal Precautions
   2. Raccoon Eyes
3. Battle Signs

4. Cerebral Spinal Fluid

E. Spinal immobilization
   1. Cervical Spine Immobilization

F. Musculoskeletal trauma and splinting
   1. Joints and Long bones

G. Recognition of signs and symptoms of shock
   1. Basic treatment of shock
   2. Importance of maintaining normal body temperature

H. Internal bleeding
   1. Hollow Organs
   2. Solid Organs

I. Control of external bleeding, including direct pressure, tourniquet, hemostatic dressings, chest seals and dressings
   1. Training in the use of hemostatic dressing shall result in competency in the application of hemostatic dressing. Included in the training shall be the following topics and skills:
      A. Review of basic methods of bleeding control to include but not be limited to:
         1. direct pressure
         2. pressure bandages
         3. tourniquets
         4. hemostatic dressing
         5. wound packing
      B. EMSA-approved hemostatic dressings

XVI. Legal issues
   A. Authorized skills and liability limitations
1. Los Angeles County Public Safety First Responder Scope

2. Optional Skills

XVII. Safety protocols

A. Employee Injury
   1. Notify Supervisor
   2. Contact Park Ranger Dispatch for LAFD Response

B. Non-Employee Injury
   1. Offer Ambulance Services
   2. Complete Non-Employee Injury Report

XVIII. Demonstration assessment (in each topic area)

A. Demonstration Skill Assessment Stations
   1. Station 1
      A. Primary Assessment and CPR/AED
   2. Station 2
      A. Rescue Breathing
   3. Station 3
      A. Clearing an Obstructed Airway
   4. Station 4
      A. Bleeding Control and Bandaging While Using PPE