



# Officer CPR/FA

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## Overview

Course meets the standard set forth by the State of California P.O.S.T. and the California Title 22 First Aid, CPR Training for Public Safety Personnel to train, evaluate and test, Law Enforcement Personnel in the techniques, applications and skills of CPR and First Aid.

## Objectives

Upon successful completion of the course participants will have the knowledge and skill to successfully preform the following competencies:

- CPR – Adult/Child Infant
- BVM Ventilation -
- AED – Adult/ Child Infant
- Dressing & Bandaging
- Splinting
- Chest Seal
- Wound Packing
- Tourniquet deployment/application
- Naloxone Administration
- Epinephrine Administration

## Activities

- Perform pathogen transfer.
- Perform primary and secondary survey with vital signs.
- Perform Title 22 required skills.
- Perform airway management with c-spine precautions.
- Correctly perform CPR for adult/child/infant.
- Correctly demonstrate Heimlich maneuver for adult/child/infant.
- Perform bleeding control techniques.
- Preform Epinephrine administration
- Preform Narcan administration
- Participants will be called to evaluate and perform first aid to injured victims in various scenarios.
- Groups of two to three participants will be called upon to perform a scenario, treatment for a traumatic injury to a victim. The participants must diagnose and prioritize injuries for proper treatment. The scenario lasts 15 to 20 minutes with a classroom debrief at the end of the scenario.

## Materials

First Aid Supplies:

- ❖ BVM
- ❖ Airway Adjuncts
- ❖ AED
- ❖ Gloves
- ❖ Roller Gauze
- ❖ Gauze Pads
- ❖ Chest Seals
- ❖ Tourniquet
- ❖ Hemostatic Dressing
- ❖ Epi Trainers
- ❖ Narcan Trainers
- ❖ Splint
- ❖ Cloth tape

## Other Resources

AHA Healthcare Provider Course

- ❖ AHC HCP Books
- ❖ AHA HCP Tests
- ❖ AHA HCP Skills Sheets

First Aid Course

- ❖ First Aid Skill Sheets



## Motivation

Law enforcement responders (LERs) are often the first to arrive on the scene of any emergency. There is an expectation that an LER will be able to mitigate many of the problems that he may be faced with, including rendering care to a sick or injured patient. A significant threat to law enforcement personnel is the chance of getting injured during the performance of the job. The LER should also be able to render self-care and buddy care when needed. Recent high-profile events highlight the need for well-trained and well-equipped LERs who are able to provide life-saving interventions during a time of crisis.

## Teaching Methods

Lecture  
Discussion  
Hands on Skill Demonstrations

## Evaluation

Participant scenarios to demonstrate specific skill following skill procedure sheets

CPR – Adult/Child Infant  
BVM Ventilation -  
AED – Adult/ Child Infant  
Dressing & Bandaging  
Splinting  
Chest Seal  
Wound Packing  
Tourniquet deployment/application  
Naloxone Administration  
Epinephrine Administration

## Participant Testing

AHA CPR for Health Care Provider Written Exam

## Course Content

### I. Basic First Aid



**A. Equipment**

**1. Minimum equipment**

- a. PPE (gloves, mask, safety glasses)
- b. Pocket Mask
- c. AED
- d. IFAK

**2. First Aid Kit contents**

**a. Main Compartment:**

**1. Airway Kit:**

- i. Adult BVM/Mask
- ii. NPA #26, #30
- iii. OPA #70, #90
- iv. Lube Jelly

**2. Bleeding Kit:**

- i. Gauze Roll (small)
- ii. Triangle Bandage
- iii. Sterile 4x4
- iv. Sterile 10x30
- v. ABD Pads
- vi. SWAT-T Tourniquet
- vii. CAT Tourniquet
- viii. QuickClot
- ix. Sterile Flush

**3. Trauma Sheers**

**4. Gloves**

**5. Hot/Cold Packs**

**6. SAM Splint**

**7. Clear/Cloth Tape**

**8. Bulb Syringe**

**9. Ace Bandage**

**10. Band-Aid Kit**

**11. Gauze Roll**

**12. Coban**

**b. Lid:**

**1. Burn Sheet**

**2. Simple Mask**

**3. Hand Sanitizer**

**Student Learning Outcome:**

Once oriented to First Aid Kit participants will be able to identify components of the first aid kit and their use.

**B. EMS Components**

**1. 9-1-1 Access**



2. Interaction with EMS personnel (active-shooter covered under TacMed section)
3. Local EMS system (including trauma systems)

**C. Ethical and Legal Issues**

1. Protection for officers and victim
2. Responsibility to act
3. Consent
  - a. Expressed
  - b. Implied

**D. Department Policy and Procedures**

1. Documentation
2. Guidelines

**E. Scene Safety**

1. Scene precautions/safety
  - a. General
  - b. Chemical, biological, radiological, nuclear
2. Law Enforcement Actions – suspects and inmates
  - a. Crowd
  - b. Lockdown
3. Security
  - a. Weapons
  - b. Back-up officers
4. BSI
  - a. PPE
    - i. Glove
    - ii. Gown
    - iii. Eye Protection
    - iv. Mask (N95/P100)
  - b. Disposal
5. Blood borne Pathogens
  - a. Exposure pathways
  - b. Reporting
6. Decontamination
  - a. Removal of PPE
  - b. Cleaning of contaminated equipment

**Student Learning Outcome:**

Completion of these sections participants will be able to identify Roles of EMS, Legal Ethical Issues, Department Policies and Procedures and Scene Safety



## **II. CPR – Adult**

### **A. Chain of survival**

#### **1. Out of Hospital**

- a. Immediate recognition CA and activation of EMS**
- b. Early CPR**
- c. Rapid Defibrillation with AED**
- d. Advanced life support**
- e. Post-cardiac care**

#### **2. In Hospital**

- a. Prevention and treatment of pre-arrest conditions**
- b. Immediate recognition / activation of emergency response**
- c. Early CPR**
- d. Rapid Defibrillation**
- e. Post-cardiac care**

### **B. Assess for responsiveness**

- 1. Shake/shout**
- 2. Special considerations**

### **C. Primary Assessment**

#### **1. Airway**

- a. Clearing**
- b. Jaw Thrust/head tilt chin lift**
- c. Protecting Open Airway**
- d. Recovery Position – left lateral recumbent**

#### **2. Breathing**

- a. Ventilations**
- b. Opening airway**
- c. Checking for breathing**

#### **3. Rescue Breathing**

- a. Rate and Depth and Time**
- b. Mouth-to-barrier device**
- c. Face shield**
- d. Mask**
- e. Mouth to mouth**
- f. Mouth-to-nose**
- g. Bag Valve mask**

#### **4. COPD (covered in more depth in Basic Illness section)**

#### **5. Asthma (covered in more depth in Basic Illness section)**



**D. Circulation**

1. Where to check for pulse
  - a. Carotid
  - b. Femoral
2. Chest Compressions
  - a. Rate
  - b. Depth
3. One person CPR
4. Two person CPR
5. Recovery position
6. Managing Shock
  - a. Signs and symptoms
  - b. Treatment
  - c. Basic bleeding control

**E. Airway obstruction**

1. Choking
  - a. Conscious
    - I. Abdominal Thrust
  - b. Unconscious
    - I. CPR
2. Foreign Body Obstruction
3. Partial vs. complete airway obstruction
  - a. Coughing
  - b. Abdominal thrusts

**III. CPR – Child**

**A. Pediatric Chain of survival**

1. Prevention
2. High quality bystander CPR
3. Rapid activation of EMS
4. Advanced life support
5. Post-cardiac care

**B. Assess for responsiveness**

1. Shake/shout
2. Special considerations

**C. Primary Assessment**

1. Airway
  - a. Clearing
  - b. Jaw Thrust/head tilt chin lift
  - c. Protecting Open Airway
  - d. Recovery Position – left lateral recumbent
2. Breathing
  - a. Ventilations
  - b. Opening airway
  - c. Checking for breathing
3. Rescue Breathing
  - a. Rate, Depth and Time



- b. Mouth-to-barrier device
        - c. Face shield
        - d. Mask
        - e. Mouth to mouth
        - f. Mouth-to-nose
        - g. Bag Valve mask
    - 4. Asthma (covered in more depth in Basic Illness section)
  - D. Circulation
    - 1. Where to check for pulse
      - a. Carotid
      - b. Femoral
    - 2. Chest Compressions
      - a. One person CPR
      - b. Two person CPR
      - c. Recovery position
      - d. Managing Shock
        - i. Signs and symptoms
        - ii. Treatment
  - E. Airway obstruction
    - 1. Choking
      - a. Conscious
        - I. Abdominal Thrust
      - b. Unconscious
        - I. CPR
    - 2. Foreign Body Obstruction
    - 3. Partial vs. complete airway obstruction
      - a. Coughing
      - b. Abdominal thrusts

**IV. CPR – Infant**

- A. Pediatric Chain of survival
  - 1. Prevention
  - 2. High quality bystander CPR
  - 3. Rapid activation of EMS
  - 4. Advanced life support
  - 5. Post-cardiac care
- B. Assess for responsiveness
  - 1. Shake/shout
  - 2. Special considerations
- C. Primary Assessment
  - 1. Airway
    - a. Clearing
    - b. Jaw Thrust/head tilt chin lift
    - c. Protecting Open Airway
    - d. Recovery Position – left lateral recumbent
  - 2. Breathing
    - a. Ventilations
    - b. Opening airway
    - c. Checking for breathing
  - 3. Rescue Breathing



- a. Rate, Depth Time
  - b. Mouth-to-barrier device
  - c. Face shield
  - d. Mask
  - e. Mouth to mouth
  - f. Mouth-to-nose
  - g. Bag Valve mask
4. Asthma (covered in more depth in Basic Illness section)
- D. Circulation**
- 1. Where to check for pulse
    - a. Carotid
    - b. Femoral
  - 2. Chest Compressions
    - a. One person CPR
    - b. Two person CPR
    - c. Recovery position
    - d. Managing Shock
      - i. Signs and symptoms
      - ii. Treatment
    - e. Basic bleeding control
- E. Airway obstruction (Adults, Children, Infants)**
- 1. Choking
    - a. Conscious
      - I. Abdominal Thrust
    - b. Unconscious
      - I. CPR
  - 2. Foreign Body Obstruction
  - 3. Partial vs. complete airway obstruction
    - a. Coughing
    - b. Abdominal thrusts

**V. Automated External Defibrillation**

- A. Initial Assessment**
  - 1. Scene Safety
  - 2. ABC's
  - 3. CPR for one minute
- B. Basic AED Operation Introduction**
  - 1. Turn Device On
  - 2. Prepare chest
  - 3. Attach Electrodes (Adult, child, infant)
  - 4. Begin Heart Analysis
  - 5. Clear patient and Delivery of Shock
  - 6. Re-Assessment by Device
  - 7. Re-Evaluate Patient
  - 8. Recovery position
  - 9. Special considerations/trouble-shooting
  - 10. Precautions with children under 1 year old
- C. Environment**
  - 1. Hazards
  - 2. Control



### 3. Safety

**Student Learning Outcome:**

Completion of these sections participants will be able to explain and perform Adult, Child, Infant CPR Chain of Survival, Assessment of Responsiveness, Primary Assessment (ABC's), Airway Obstruction and AED usage.

## **VI. Basic Illness and Injury**

### **A. Warning Signs**

1. Medical
2. Breathing: Shortness of breath
3. Pain: Severe Pressure, or discomfort in chest
4. Severe Abdominal Pain
5. Altered Level of Responsiveness

### **B. Mechanism of Injury**

1. Head, Neck, and Back
2. Swollen, Painful, deformed limb

### **C. Body Systems**

1. Circulatory System
2. Respiratory System
3. Musculoskeletal System
4. Nervous System
5. Skin

### **D. Physical Assessment – secondary assessment**

1. Head
2. Neck
3. Chest
4. Abdomen
5. Back
6. Legs and Feet
7. Arms

### **E. Patient History**

1. Symptoms
2. Allergies
3. Medications
4. Past Medical History
5. Last Oral Intake
6. Events Leading up to Problem

### **F. Basic Vitals**

1. Pulse
2. Breathing

### **G. Emotional Impact of Providing First Aid**

1. Debriefing
2. Peer-Counseling
3. Critical Incident Stress

**Student Learning Outcome:**

Completion of these sections participants will be able to explain and perform assessment and treatment for Basic Illness and Injury.

## **VII. Recognition and Treatment**



- A. Soft tissue injuries
  - 1. Punctures
  - 2. Abrasions
  - 3. Avulsions
  - 4. Bruises
  - 5. Treatment
- B. Eye injuries
  - 1. Traumatic, (including objects in eye)
  - 2. Heat
  - 3. Chemical
  - 4. Treatment
- C. Dental emergency
  - 1. Airway
  - 2. Transport of lost tooth
  - 3. Controlling bleeding

(Basic bleeding control is covered in CPR under CPR and Advanced Bleeding control is covered in Tac-Med)
- D. Nose bleeds
  - 1. Airway issues
  - 2. Don't pack
- E. Chest injuries
  - 1. Open
    - a. Application of chest seals – covered in Tac-Med section
  - 2. Closed
  - 3. Treatment
- F. Abdominal injuries
  - 1. Open
  - 2. Closed
  - 3. Treatment
- G. Internal bleeding
  - 1. Signs and symptoms
  - 2. Field precautions
- H. Spinal injuries (head, neck, back)
  - 1. Signs and symptoms
  - 2. Field precautions (immobilization)
- I. Sprains, strains, broken bones
  - 1. Splinting
  - 2. Treatment
- J. Burns
  - 1. Officer/scene safety
  - 2. Types
    - a. thermal
    - b. chemical
    - c. electrical
    - d. radiation
  - 3. Treatment

**Student Learning Outcome:**

Completion of these sections participants will be able to explain and perform assessment, recognition and treatment for common injuries.

**VIII. Advanced Life Support**



- A. Cardiac emergency
  - 1. Recognition
  - 2. Treatment
- B. Respiratory emergency
  - 1. Recognition
  - 2. Existing illness
  - 3. COPD and Asthma
  - 4. Treatment
    - a. position of comfort
    - b. assist with medication inhaler (if allowed by LEMSA/Dept. Policy)
    - c. calm patient
    - d. O2 (if allowed by LEMSA/Dept. Policy)
- C. Drowning
  - 1. Officer/scene safety
  - 2. Recognition
  - 3. Treatment
- D. Seizure
  - 1. Types
    - a. Febrile
    - b. Grand Mal
    - c. Epileptic
    - d. Focal
  - 2. Treatment
- E. Stroke
  - 1. Recognition
    - a. Facial Droop
    - b. Arm Drift
    - c. Slurred Speech
    - d. Time
  - 2. Treatment
- F. Altered mental status
  - 1. Causes
    - a. Medical
    - b. Trauma
    - c. Overdose
  - 2. Recognizing
  - 3. Treatment protocols
- G. Abdominal pain
  - 1. Causes
    - a. Medical
    - b. Trauma
  - 2. Treatment
- H. Allergic reactions & Anaphylaxis
  - 1. Reaction vs Shock
  - 2. Treatment
  - 3. Assist with Administration of Epi with Auto-injector (if allowed by LEMSA/Dept. Policy)
- I. Diabetic emergencies
  - 1. Insulin Shock vs. Diabetic Coma
  - 2. Treatment
  - 3. Administration of oral glucose (if allowed by LEMSA/Dept. Policy)
- J. Alcohol or drug-related emergency
  - 1. Opiate overdose



2. Assist with Administration of Naloxone treatment (if allowed by LEMSA/Dept. Policy)
- K. Psychological emergencies
  1. Recognition
    - a. Signs and symptoms
  2. Officer safety
  3. Resources
- L. Poisons
  1. Officer/scene safety
  2. Route of exposure
    - a. Inhalation
    - b. Ingestion
    - c. Injection
    - d. Absorption
  3. Poison Control
    - a. 1-800-222-1222
- M. Environmental emergencies
  1. Heat-related emergencies
  2. Cold-related emergencies
  3. Treatment
- N. Child-birth
  1. Deliver vs Transport
  2. Stages of delivery
    - a. Contractions
    - b. Crowning
    - c. Delivery
  3. Complications
    - a. Breach
    - b. Appendage
    - c. Prolapsed cord
- O. Bites and stings
  1. Recognition of:
    - a. Animal
    - b. Human
    - c. Insect
    - d. Treatment
  2. Assist with Administration of EPI with auto injector (if allowed by LEMSA/Dept. Policy)
  3. Notification of EMS
- P. Impaled objects
  1. Treatment
- Q. Avulsion vs Amputation
  1. Definition
  2. Treatment

**Student Learning Outcome:**

Completion of these sections participants will be able to explain and perform assessment, recognition, treatment and need for advanced life support.

**IX. Tactical Medicine – Active Shooter**

- A. Integration with EMS
  1. Communication
  2. ICS



- 3. Rescue Taskforce
  - B. Care under fire
    - 1. Good tactics = good medicine
    - 2. Procedures appropriate at that time
  - C. Tactical casualty care
    - 1. Self-care
    - 2. Buddy care
    - 3. Advanced bleeding control
      - a. Direct Pressure
      - b. Tourniquet
        - i. Hemostatic dressing/pressure dressing
          - 1. EMSA approved: Quick Clot
          - 2. When/how to use
        - ii. Wound packing
    - 4. Application of chest seal
      - a. When to apply
      - b. Procedures
  - D. Emergency Moves
    - 1. Positioning
    - 2. Moves
      - a. Single-person
      - b. Two-person (fore/aft, side-to-side, shoulder/belt)
    - 3. Lifts/drags/Carries
    - 4. Using a litter
- X. Basic triage
- A. Incident Command System
  - B. START Triage System (Simple Triage And Rapid Treatment)

**Student Learning Outcome:**

Completion of these sections participants will be able to explain and perform assessment, treatment and care in tactical environments such as an active shooter or terrorist situation.