

TEAM BRIEFING NOTES

2014 Ontario Medical First Response Competition –AMFR/PRO Scenario O

While providing first aid services at the International Games you are called to respond to an outdoor location for a report of a "man down". Additional details are unknown.

Your team grabs the necessary equipment and sets out. You follow the directions given, which include walking outside for some time down some winding paths to a secluded area somewhere behind the residence buildings.

JUDGE BRIEFING NOTES

2014 Ontario Medical First Response Competition –AMFR/PRO Scenario O

The O Scenario is out doors and has two casualties. One is from Canada and the other is asibling from Costa Rica visiting as a team coach for the International games. The Canadian casualty has secured some heroin for their recreational use but did not realize its strength. The responders will arrive to find one patient unresponsive and in respiratory arrest and the second Vital Signs Absent (VSA). The unresponsive casualty will regain consciousness part way through the scenario and provide incident history and information to the teams.

In the last minute of the scenario the teams will be told EMS has arrived and will be asked to provide a report

INJURIES

Casualty #1

- No physical injuries visible other than a needle puncture in one of the veins in the ante cubital space (where the armbends at the elbow)
- Patient slumped against an object (tree, residence building, whatever is convenient for the scenario set up) with vomit running from their mouth down their shirt.
- Will need to be "switched" to the manikin once they establish that the patient is in respiratory arrest and then switched back when they awoken (**10 minutes in to the scenario**)
- Will provide history information and information about patient #2 once awake

Casualty #2

- Found supine on the ground with vomit in mouth and incontinent of urine.
- Vital Signs Absent for the entire scenario
- Will have three shocks and then no shocks for the remainder of the scenario
- Syringe with Needle is still sticking out of patient's arm

CASUALTY PROMPTS

Casualty #1

- Slumped against an object with vomit on their shirt, neck and chin.
- Initially unresponsive and not breathing.
- Casualty will remain in place while team switches to the manikin (once the team lays them on the ground) so they are in place when the judge directs that they wake up (**10 minutes in to scenario**)

If asked (once awake):

Casualty states:

Name

Use casualty's real name

Date of birth

Use casualty's real day and month of birth, and state year of birth is 1980

Symptoms

Patient is drowsy and is slow to answer questions.

Allergies:

Sulpha Drugs

JUDGE BRIEFING NOTES

2014 Ontario Medical First Response Competition –AMFR/PRO Scenario O

Meds: None Past Med History: Hep C, Ankle fracture approximately 1 year ago

Last Meal: Breakfast or Lunch (as appropriate to the time of day)

What happened: You and your sibling were shooting up some heroin. Don't remember what happened after that. If the responders ask this patient; will provide medical information about sibling (see casualty 2 section)

Level of consciousness: Unresponsive at the start, once awake alert until the end

Level of awareness: once awake, oriented

10 minutes in to the scenario this casualty wakes up and remains this way until the scenario ends.

Casualty #2

- Casualty is unresponsive for the duration of the scenario and may be a manikin
- If human actor is used for the initial part of the scenario responders will be told to switch to the manikin to start resuscitation and the actor may then move away.
- Information below may be obtained by asking the casualty's brother once he is awake.

If asked:

Casualty states:

Name Use casualty's real name

Date of birth Use casualty's real day and month of birth, and state year of birth is 1981

Allergies: Biaxin Meds: None

Past Med History: None Last Meal: Breakfast or Lunch as appropriate to the time of day.

What happened: Was using some Heroin with sibling. Sibling does not recall what happens after they shot up but will state that this patient had more of it.

Level of consciousness: Unresponsive for Scenario Level of awareness: N/A - Unresponsive

JUDGES' PROMPTS

- If asked, judge informs team that hazards are as found
- If responder states they are calling 911 judge will ask them what they wish to say and acknowledge that 911 has been called. Team may call for both patients at once or separately, but 911 must be called for both patients to obtain the marks.
- After three minutes, points for Casualty 1 and 2 Scene Survey & Primary Survey may not be earned.
- At the 15 minute point, the paramedic arrives and will ask for a report. Competitors may continue to provide treatment and earn points until the 15 minute point. If no paramedic actor is available the **judge will inform the competitors that the paramedic has arrived and prompt the responders for their report** to the paramedic.

JUDGE BRIEFING NOTES

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- At the 15 minute point of the scenario, competitors will be told to stop.
- Once the scenario has finished, they will be provided time to complete documentation (15 minutes)
- At the end of the documentation period, documentation will be scored

Casualty 1 Vital Signs

1 st set (and until pt wakes)	Respirations absent Pulse 50 weak and regular Skin pale, cold, wet BP 96/60
1 st set after pt wakes	Respirations 12 slow and shallow Pulse 64 strong and regular Skin pale, cool, damp BP 104/72
3 rd set and subsequent sets	Respirations 12 slow and shallow Pulse 70 strong and regular Skin pale, cool, damp BP 112/72

Casualty 2 Vital Signs

All sets Vital Signs Absent for Entire Scenario

PROPS

- Environment
 - Outdoors in a secluded area
- Props
 - Syringes with fake needles - one to be left on the ground next to patient #1 and one to be sticking out of the arm of patient #2
 - Belt wrapped around the arm of patient #2 (undone) as a tourniquet
 - Burned and spoon on ground next to patients with a lighter near by
 - Artificial vomitus
 - Use watery oatmeal

SIMULATOR BRIEFING NOTES

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In the last minute of the scenario the teams will be told EMS has arrived and will be asked to provide a report

INJURIES

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Patient slumped against an object (tree, residence building, whatever is convenient for the scenario set up) with vomit running from their mouth down their shirt.

Will need to be "switched" to the manikin once they establish that the patient is in respiratory arrest and then switched back when they awaken (**10 minutes** in to the scenario)

Will provide history information and information about patient #2 once awake

Casualty #2

Found supine on the ground with vomit in mouth and incontinent of urine.

Vital Signs Absent for the entire scenario

Will have three shocks and then no shocks for the remainder of the scenario

Syringe with Needle is still sticking out of patient's arm

CASUALTY PROMPTS

Casualty #1

Slumped against an object with vomit on their shirt, neck and chin.

Initially unresponsive and not breathing.

Casualty will remain in place while team switches to the manikin (once the team lays them on the ground) so they are in place when the judge directs that they wake up (**10 minutes in** to scenario)

PROPS

Environment

Outdoors in a secluded area

SIMULATOR BRIEFING NOTES

2014 Ontario Medical First Response Competition –AMFR/PRO Scenario O

Props

Syringes with fake needles - one to be left on the ground next to patient #1 and one to be sticking out of the arm of patient #2

Belt wrapped around the arm of patient #2 (undone) as a tourniquet

Burned and spoon on ground next to patients with a lighter near by

Artificial vomitus

Use watery oatmeal

CONFIDENTIAL

CASUALTY BRIEFING NOTES

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At the end of the scenario EMS (First Response) will arrive and the teams will have to work with the paramedic to continue the resuscitation.

Casualty #1

- No physical injuries visible other than a needle puncture in one of the veins in the ante cubital space (where the arm bends at the elbow)
- Patient slumped against an object (tree, residence building, whatever is convenient for the scenario set up) with vomit running from their mouth down their shirt.
- Will need to be "switched" to the manikin once they establish that the patient is in respiratory arrest and then switched back when they awaken (**10 minutes in to the scenario**)
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Casualty #2

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CASUALTY PROMPTS

Casualty #1

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If asked (once awake):

Casualty states:

Name Use casualty's real name

Date of birth Use casualty's real day and month of birth, and state year of birth is 1980

Symptoms Patient is drowsy and is slow to answer questions.

Allergies: Sulpha Drugs Meds: None

CASUALTY BRIEFING NOTES

2014 Ontario Medical First Response Competition –AMFR/PRO Scenario O

Past Med History: Hep C, Ankle fracture approximately 1 year ago

Last Meal: Breakfast or Lunch (as appropriate to the time of day)

What happened: You and your sibling were shooting up some heroin. Don't remember what happened after that. If the responders ask thispatient will provide medical information about sibling (found incasualty 2 section)

Level of consciousness: Unresponsive at the start, once awake alert until the end

Level of awareness: once awake, oriented

10 minutes in to the scenario this casualty wakes up and remains this way until the scenario ends.

Casualty #2

- Casualty is unresponsive for the duration of the scenario and may be a manikin
- If human actor is used for the initial part of the scenario responders will be told to switch to the manikin to start resuscitation and the actor may then move away.
- Information below may be obtained by asking the casualty's brother once he is awake.

If asked:

Casualty states:

Name Use casualty's real name

Date of birth Use casualty's real day and month of birth, and state year of birth is 1981

Allergies: Biaxin

Meds: None Past Med History: None

Last Meal: Breakfast or Lunch as appropriate to the time of day.

What happened: Was using some Heroin with sibling. Sibling does not recall what happens after they shot up but will state that this patient had more of it.

Level of consciousness: Unresponsive for Scenario Level of awareness: N/A - Unresponsive for Scenario

PROPS

- Environment
 - Outdoors in a secluded area
- Props
 - Syringes with fake needles - one to be left on the ground next to patient #1 and one to be sticking out of the arm of patient #2
 - Belt wrapped around the arm of patient #2 (undone) as a tourniquet
 - Burned and spoon on ground next to patients with a lighter near by
 - Artificial vomitus
 - Use watery oatmeal

2014
Ontario Medical First Response
Competition

Site “O”
PRO

Team: _____

Judge: _____

Total Score: _____

PRO O

GENERAL

Scoring Note Scene survey and primary survey points may only be awarded within the first 3 minutes. may no longer be awarded if the team has scored points in a subsequent section Each judge at a site will have a copy of this sheet and any judge may award the points for these items - items do not need to be done in order.		A - Action S - Statement	Performed/ Stated	Not Performed/ Not Stated
Scene Survey	Assess hazards <small>Moves syringe to a safe location out of the way of responders.</small>	A/S	2	0
	Call 911 for EMS and report that there are two patients.	S	2	0
	Identify to casualties as a first aid team and offer to help. <small>Consent given</small>	A	2	0
	Attempts to Locate bystanders for information and assistance <small>None</small>	A/S	2	0
	Determine the number of casualties <small>Two</small>	A/S	2	0
Other	Gloves are worn by all team members each time physical contact is made with a casualty	A	2	0
	Gloves changed before physical contact with different casualty	A	2	0
SUBTOTAL				

PRO O

CASUALTY 1

Scoring Note Scene survey and primary survey points may only be awarded within the first 3 minutes. may no longer be awarded if the team has scored points in a subsequent section Each judge at a site will have a copy of this sheet and any judge may award the points for these items - items do not need to be done in order.		A - Action S - Statement	Performed/ Stated	Not Performed/ Not Stated
Primary Survey	Assess responsiveness Unresponsive	S	10	0
	Assess airway Clear	S		
	Assess breathing Absent	A/S		
	Assess pulse Present, strong, regular	A/S		
	Assess skin condition pale, cool, wet	S		
	Determine mechanism of injury Syringe in close proximity to patient - probable drug overdose	S		
	Perform rapid body survey No other injuries found	A		
Ventilation	Performs Head Tilt while creating a seal with BVM mask Jaw thrust is also acceptable provided adequate air entry is achieved	A/S	2	0
	Squeezes BVM with enough air to make the chest rise One or two person BVM is acceptable provided adequate air entry is achieved with the manikin	A/S	2	0
	Correctly sizes and inserts an airway If manikin cannot accept airway, process may be verbalized - OPA or NPA are acceptable	A/S	2	0
	Ensures Bag Valve Mask is connected to Oxygen source and running	A/S	2	0
	When patient awakes removes airway and discontinues ventilation	A/S	2	0
History	Ask casualty to describe how they are feeling Patient states he feels "good"	S	10	0
	Ask casualty if they have any allergies Sulpha drugs	S		
	Ask casualty if they take any medications None	S		
	Ask casualty about their past medical history Hepatitis C, ankle fracture last year	S		
	Ask casualty about the time of their last oral intake Appropriate meal (breakfast or lunch) within past few hours	S		
	Ask casualty what happened Injected heroin with his brother - cannot remember what happened after that	S		
	Ask casualty how much heroin they injected "A shot"	S		
	Ask casualty what they took Casualty responds "H" but will say heroin if prompted for more	S		
	Ask casualty time Heroin was taken Cannot remember	S		
Vital Signs 1	Assess level of awareness Unresponsive	A/S	10	0
	Assess respirations Absent	A/S		

PRO O

CASUALTY 1

	Assess pulse 50 weak and regular	A/S		
	Assess circulation/skin condition pale, cold, wet	A/S		
	Assess blood pressure 96/60	A/S		
Head-to-toe Assessment	Palpate and inspect head	A	14	0
	Inspect eyes Pupils pin point	A		
	Inspect nose	A		
	Open and inspect mouth	A		
	Palpate and inspect jaw	A		
	Inspect ears	A		
	Palpate and inspect neck	A		
	Palpate and inspect collarbones	A	12	0
	Palpate and inspect shoulders	A		
	Palpate chest and rib cage	A		
	Palpate and inspect abdomen	A		
	Palpate back	A		
	Assess pelvic stability	A		
	Palpate and inspect left leg	A		
	Palpate and inspect right leg	A		
	Palpate and inspect left foot	A		
	Check left foot circulation, sensation, motor function	A		
	Palpate and inspect right foot	A		
	Check right foot circulation, sensation, motor function	A		
	Palpate and inspect left arm Small "track" marks on arm and fresh injection site	A	12	0
	Palpate and inspect right arm	A		
	Palpate and inspect left hand	A		
	Check left hand circulation, sensation, motor function	A		

PRO O

CASUALTY 1

	Palpate and inspect right hand	A		
	Check right hand circulation, sensation, motor function	A		
Vital Signs 2 - If still unconscious use same values as Vital Signs #1	Assess level of awareness Oriented to person, place, and date but not time	A/S	10	0
	Assess respirations 12 slow and shallow	A/S		
	Assess pulse 64 strong and regular	A/S		
	Assess skin condition pale, cool, damp	A/S		
	Assess blood pressure 104/72	A/S		
Vital Signs 3	Assess level of awareness Oriented to person, place, but not time/date	A/S	10	0
	Assess respirations 12 slow and shallow	A/S		
	Assess pulse 70 weak and regular	A/S		
	Assess skin condition Pale, cool, damp	A/S		
	Assess blood pressure 112/72	A/S		
Handover to EMS	Identify first aid team to EMS upon arrival	S	1	0
	Report casualty name and age to EMS	S	1	0
	Report name of drug, amount taken and route of entry	S	2	0
	Report all physical findings Syringe found next to patient, injection site on arm	S	2	0
	Describe the treatment BVM Ventilation, airway	S	1	0
	Describe the response to treatment Woke up after several minutes of BVM ventilation.	S	1	0
	Report the past medical history Ankle fracture last year	S	1	0
	Report all vital signs taken	S	1	0
SUBTOTAL				

PRO O

CASUALTY 2

Scoring Note Scene survey and primary survey points may only be awarded within the first 3 minutes. may no longer be awarded if the team has scored points in a subsequent section Each judge at a site will have a copy of this sheet and any judge may award the points for these items - items do not need to be done in order.		A - Action S - Statement	Performed/ Stated	Not Performed/ Not Stated
Primary Survey	Assess responsiveness <small>Unresponsive</small>	S		
	Opens the airway <small>Clear</small>	S		
	Assess breathing <small>Absent</small>	A/S		
	Assess pulse <small>Absent</small>	A/S		
	Assess skin condition <small>pale, cool, wet</small>	S	10	0
	Determine mechanism of injury <small>Syringe in patient's arm - probable drug overdose</small>	S	2	0
	Perform rapid body survey <small>No other injuries found</small>	A	2	0
Needle Treatment	Syringe identified as a hazard	A	2	0
	Syringe secured in place with tape, roller gauze, or other appropriate bandaging technique <small>(if effectively secured and made safe marks may be given)</small> OR			
	Syringed removed and safely stored and site dressed <small>As no sharps containers are supplied safely stored shall mean placed in a safe location out of the way</small>	A	2	0
CPR and AED	CPR Initiated immediately upon realizing casualty is VSA	S	2	0
	AED Turned on <small>Trainer must be turned on with pads disconnected - may instruct to unplug if necessary to prevent analysis</small>	A	2	0
	AED Pads placed without interruption of CPR and connected to AED <small>Compressor may shift hands if necessary or very briefly pause but should not stop CPR</small>	A/S	2	0
	Ensures Bag Valve Mask is connected to Oxygen source and running	A/S	2	0
	Correctly sizes and inserts an Oral airway <small>If manikin cannot accept airway process may be verbalized - may be done any time prior to second analysis</small>	A/S	2	0
	Casualty is cleared for Analysis (Analysis #1) <small>Shock Advised</small>	A/S	2	0
	Casualty is cleared for shock - watches casualty while shock delivered (#1)	A/S	2	0
	Responders immediately resume compressions without a pulse check	A	2	0
	Casualty is cleared for Analysis (Analysis #2) <small>Shock Advised</small>	A/s	2	0
	Casualty is cleared for shock - watches casualty while shock delivered (#2)	A/S	2	0
Responders immediately resume compressions without a pulse check	A	2	0	

PRO O

CASUALTY 2

	Casualty is cleared for Analysis (Analysis #3) <small>Shock Advised</small>	A/S	2	0
	Casualty is cleared for shock - watches casualty while shock delivered (#3)	A/S	2	0
	Responders immediately resume compressions without a pulse check	A	2	0
	Casualty is cleared for analysis (Analysis #4) <small>No Shock Advised</small>	A/S	2	0
	Responders immediately resume compressions without a pulse check	A	2	0
	Casualty is cleared for analysis (Analysis #5) <small>No Shock Advised</small>	A/S	2	0
	Responders immediately resume compressions without a pulse check	A	2	0
	Casualty is cleared for any and all subsequent analyses <small>No Shock Advised</small>	A	2	0
	Responders immediately resume compressions without a pulse check <small>For any and all analyses after #5</small>	A	2	0
History	Responders will not be able to ask this information of the patient however once Casualty #1 is awake they may ask for it from patient #1			
	Ask if casualty has any allergies <small>None</small>	S		
	Ask if casualty takes any medications <small>None</small>	S		
	Ask if casualty has past medical history <small>None</small>	S		
	Ask about the time of their last oral intake <small>Appropriate meal (breakfast or lunch) within past few hours</small>	S	8	0
	Ask what happened <small>Shooting up with his brother - cannot remember what happened after that</small>	S	2	0
	Ask how much heroin they injected <small>"A shot"</small>	S	2	0
	Ask what they took <small>Responds "H" but will say heroin if prompted for more</small>	S	2	0
	Ask what time Heroin was taken <small>Cannot remember</small>	S	2	0
Head-to-toe Assessment	Palpate and inspect head	A		
	Inspect eyes <small>Pupils pin point</small>	A		
	Inspect nose	A		
	Open and inspect mouth	A		
	Palpate and inspect jaw	A		
	Inspect ears	A		
	Palpate and inspect neck	A	14	0
	Palpate and inspect collarbones	A	12	0

PRO O

CASUALTY 2

	Palpate and inspect shoulders	A			
	Palpate chest and rib cage	A			
	Palpate and inspect abdomen	A			
	Palpate back	A			
	Assess pelvic stability	A			
	Palpate and inspect left leg	A	12	0	
	Palpate and inspect right leg	A			
	Palpate and inspect left foot	A			
	Check left foot circulation, sensation, motor function	A			
	Palpate and inspect right foot	A			
	Check right foot circulation, sensation, motor function	A			
	Palpate and inspect left arm <small>Small "track" marks on arm and fresh injection site</small>	A	12	0	
	Palpate and inspect right arm	A			
	Palpate and inspect left hand	A			
	Check left hand circulation, sensation, motor function	A			
	Palpate and inspect right hand	A			
	Check right hand circulation, sensation, motor function	A			
	Handover to EMS	Identify first aid team to EMS upon arrival	S	1	0
		Report casualty name and age to EMS	S	1	0
Report name of drug, amount taken and route of entry		S	2	0	
Report all physical findings <small>Syringe found next to patient, injection site on arm</small>		S	2	0	
Describe the treatment <small>Number of shocks and "no shock advised"</small>		S	1	0	
Report the past medical history <small>Ankle fracture last year</small>		S	1	0	
Responders continue to provide treatment without interruption <small>If CPR or AED is interrupted at any time during report no marks will be given for this item</small>		S	1	0	
SUBTOTAL					

O

DOCUMENTATION

Casualty 1	Incident date and time are filled out	A	2	0
	Casualty's first and last name and date of birth	A	2	0
	At least 1 team members' name and signature	A	2	0
	Incident history	A	2	0
	1st vital signs Time and Pulse and Respirations and Skin Condition and blood pressure	A	2	0
	2nd vital signs Time and Pulse and Respirations and Skin Condition and blood pressure	A	2	0
	Time casualty becomes alert	A	2	0
	Syringe found on scene	A	2	0
	Name of drug involved heroin or "H"	A	2	0
Casualty 2	Incident date and time are filled out	A	2	0
	Casualty's first and last name and date of birth	A	2	0
	At least 1 team members' name and signature	A	2	0
	Incident history	A	2	0
	1st vital signs Time and Pulse and Respirations and Skin Condition and blood pressure	A	2	0
	2nd vital signs Time and Pulse and Respirations and Skin Condition and blood pressure	A	2	0
	Number of shocks delivered	A	2	0
	Time of first shock delivered	A	2	0
	Arrest not witnessed (box checked) Type 1 diabetes	A	2	0
	Time CPR started recorded	A	2	0
	SUBTOTAL			