

## CATEGORY F

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### SUBJECT:

### CASUALTY SIMULATION

### OBJECTIVE(S)

To familiarize the candidate with the basic techniques of casualty simulation in an effort to bring an element of realism to first aid training.

### PREREQUISITES

None.

### INSTRUCTORS/EVALUATORS

- Persons certified as casualty simulators by E.M.O or D.N.D.
- Certified and qualified St. John Ambulance members.

### REFERENCES AND MATERIALS

- Requests for information on courses or qualified instructors on Casualty Simulation must be made to Emergency Health Services or Emergency Preparedness Canada. Availability of instructors, courses and material varies across Canada and within each province.
- Internet.

### CONTENT

The course outlined below is not intended to qualify candidates for official certification by any official government agency. When available, these formal courses are usually limited according to age and by numbers required.

The syllabus outline provided has been divided into six periods of theoretical instruction with a minimum of seven hours of practical instruction. A limit of seven candidates to one Instructor/Evaluator is recommended.

#### *Period 1:*

- knowledge of materials and their usage

#### *Period 2:*

- flesh colouring to match skin tones
- bruising (light and heavy)
- Shock, going from *light shock*, as in fainting, to *medium shock*, as with fracture, to *deep shock*, as with internal bleeding or severe loss of blood, to *cyanosis*, as in the case of blood not circulating or failure of breathing

*Period 3:*

- making bumps (swelling) and pads, in preparation for breaks in skin, cuts and lacerations with plasticine and colour matching to skin tone

*Period 4:*

- introduction of a foreign object (glass, metal and bone))

*Period 5:*

- burns (first, second, and third)

*Period 6:*

- practice and test/evaluation

**DURATION**

As required.

**CERTIFICATION**

Certified Instructors may act as Evaluators for this certificate, if no other casualty simulator is available. Evaluation must cover all skills listed in the content.

**CATEGORY F - COMMUNITY SERVICES**

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**CERTIFICATION OF SUCCESSFUL COMPLETION OF PROFICIENCY SUBJECT**

**CASUALTY SIMULATION**

Instructors/Evaluators should carefully consider the age, ability and accessibility to resource materials of each candidate.

The candidate has completed the above content and meets the requirements to the satisfaction of the Instructor/Evaluator.

Name of Instructor/Evaluator: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_ Tel #: \_\_\_\_\_

Instructor qualifications: \_\_\_\_\_

I certify that

\_\_\_\_\_ of \_\_\_\_\_  
(candidate's name) (Division #)

meets the criteria of this proficiency subject, as laid out on the previous page(s).

\_\_\_\_\_  
Instructor/Evaluator (signature) Date

\_\_\_\_\_  
Divisional Superintendent (signature) Date