Wilderness First Aid Road Map



PRIMARY ASSESSMENT START **SCENE SAFETY** Scene Survey (BSI) Body Substance Isolation **SCENE SAFETY** 1. I'm number one. 2. What happened to you?
3. Get nothing on me. 4. Are there any more? 5. Dead or alive? **ESTABLISH** ASSESSM Relationship & Consent LIFE THREATS **ESTABLISH A RELATIONSHIP/CONSENT** RIMARY (A) Airway (B) Breathing (C) Circulation LIFE THREATS (C) Chest (A) Abdomen (R) Renal (P) Pelvis (E) (T) Thigh **(S) S**kin EXTERNAL TAKE A DEEP BREATH (D) Disability (E) Environment OR INJURY? ASSESSMENT SECONDARY ASSESSMENT **MEDICAL TRAUMA HEAD-TO-TOE EXAM** Look, Ask, Feel ECONDARY Patient History Head-To-Toe-Exam **PATIENT HISTORY** (S) Signs/Symptoms (O) Onset Head-To-Toe-Exam (P) Provokes **Patient History** (Q) Quality (R) Region (S) Severity Documentation Documentation (T) Time (A) Allergies (M) Medications (P) Pertinent Medical History (L) Last in/Out **(E)** Events leading up to the incident **MAKE A PLAN DOCUMENTATION** (S) Subjective (O) Objective (A) Assessment (P) Plan Non-Urgent Urgent Emergency **Evacuation Decision** (MOI) Mechanism of Injury Stay & Play **Treat & Retreat** Enlist & Assist (HPI) History of Present Illness



SOAP Note

FIRST AID	Rescuer Name	Date
BASICS	Patient Name	Time
S	105	
SUBJECTIVE I have a	a <u>AGE</u> year old <u>SEX</u>	_ whose chief complaint is:
OR IECTIVE Deticate	DOING WHAT WHE	
OBJECTIVE Patient	was found Doing What, When	RE
		• ONSET
		O ONSET
		P PROVOKES
		QUALITY
		R RADIATES
E EVENTS		S SEVERITY
		T TIME
ADDITIONAL NOTE	S	FRONT BACK
ASSESSMENT		
		Δ
PLAN		



HEAD-TO-TOE EXAM

Use the principles of look, ask, feel to thoroughly examine the patient from head to toe. Here's what to look for.

HEAD



SKULL Check the skull, cheekbones, and forehead for instability and deformity.



EARS
Check the ears for fluid, bruising, or problems hearing. Any of these could indicate serious head trauma or damage to the inner ear.



NOSE Check the nose for instability and deformity.



JAW
Ask the patient to clench their jaw and ask if there is any pain.



MOUTH
Ask the patient to open their mouth.
Check for anything irregular or anything that could compromise the airway.

CHEST/SHOULDERS



SHOULDERS
Squeeze front and back of the patient's shoulder. Check for pain, tenderness, or deformity. Repeat on other shoulder.



COLLARBONES
Check collarbones
one at a time by
walking your fingers
from one shoulder
across the collarbone
to the other shoulder.
Pay attention for any
pain or deformity.



RIBS
Squeeze patient's ribs
and ask them to take
a deep breath. Note
any pain or deformity.



Place patient's hand over their sternum, and place your hand on theirs. Ask the patient to take a deep break as you apply pressure. Note any pain or deformity.

ARMS



ARM BONES
Thoroughly feel
down patient's arms,
pushing with oppositional force (one hand
on each side of their
arm, with your hands
pushing in opposite
directions). Note any
pain or deformity.



FINGER STRENGTH Ask the patient to squeeze your fingers with both hands at the same time. Pay attention to any difference in strength, which could indicate a lack of motion on one side due to an injury.



PULSE
Feel for the patient's radial pulse on both wrists at the same time. Pay attention to any difference in pulse strength (e.g. weak or faint pulse on one side, strong pulse on the other). Differences can indicate a circulatory problem.



SENSATION
Ask the patient to close their eyes or look away, and tap their finger. Ask the patient to identify what finger you're tapping. Repeat on the other side. If the patient isn't able to identify what you're doing, they may have a problem with their sensations.

HEAD-TO-TOE EXAM

ABDOMEN



BELLY Roll your hands across the patient's abdomen in each of the four quadrants of the belly (see above). Feel for any rigidness or deformity and ask if there is any pain/tenderness.

PELVIS



HIPS, PART 1 Apply downward pressure on the patient's hip bones.



HIPS, PART 1 Press inward on the patient's hip bones.

LEGS



Thoroughly feel down patient's legs with one hand on each side. Squeeze your hands toward each other to apply oppositional force.



Hold kneecap and wiggle it.



FOOT CIRCULATION Feel for warmth on the patient's feet. A serious lack of warmth could indicate a problem with the patient's circulation.



SENSATION Ask the patient to close their eyes and look away. Tap or squeeze the patient's foot with your hand (this can be on the bottom or side) and ask them to identify what you are doing. Repeat on the other side. If the patient isn't able to identify what you're doing, they may have a problem with their sensations.



FOOT FLEXION Place you hands on the top of the patient's feet,and ask them to pull their toes towards their head. Apply resistance, and make note of any differences in strength between the sides.

LEGS



FOOT EXTENSION Place your hands on the bottom of the patient's feet and ask them to push their feet away from their head against your hands (like pressing on the gas pedal). Apply resistance, and make note of any differences in strength between the sides.

BACK



SPINE Run your fingers down the spine from the base of the skull all the way to the pelvis and tailbone. Make note of any deformity or pain.



FLANKS/ **KIDNEY AREA** Press your hand against the flanks of the patient's back and make note of any deformity or pain.



First Aid Kit List

These are the items we recommend you include in a standard small first aid kit for essentially any trip. For longer trips or those with big groups, you'll obviously want to scale up.



TRAUMA

- ☐ Ace Bandage
- ☐ Roller Gauze
- ☐ 4" x 4" Gauze Pad
- ☐ Wound Closure Kit
 - Steri Strips
 - Tincture of Benzoin
 - Tegaderm/2nd Skin
- ☐ Athletic Tape
- ☐ SAM Splint (or similar)
- ☐ Triangular Bandages



PERSONAL PROTECTION

- ☐ Medical Examination Gloves
- □ Pocket Breathing Barrier



MEDICATIONS

- ☐ Acetaminophen (e.g. Tylenol)
- ☐ Diphenhydramine (e.g. Benadryl)
- ☐ Aspirin
- ☐ Loperamide (e.g. Diamode)
- ☐ Bismuth Subsalicylate (e.g. Pepto Bismol)
- ☐ Ibuprofen (e.g. Advil)



ESSENTIALS

- ☐ Moleskin
- ☐ Band-Aids
- ☐ Sunscreen
- ☐ Tampon
- ☐ Burn Gel
- $\ \square$ Butterfly Bandage
- ☐ Hydrocortisone Cream
- ☐ Bacitracin
- ☐ After Bite
- ☐ Povidone-Iodine Wipe
- ☐ Alcohol Prep Pads
- ☐ Antiseptic Towelette



TOOLS

- □ Tweezers
- □ Pencil
- □ Pen
- ☐ SOAP Note
- ☐ Patient Assessment Checklist
- ☐ Safety Pins
- ☐ Trauma Shears
- ☐ Irrigation Syringe



Scene Safety, Establishing a Relationship, and Life Threats (ABCDE) Practice

PATIENT INSTRUCTIONS

WHAT AM I DOING HERE?

Thanks so much for agreeing to help your friend with the Wilderness First Aid Basics training. These real-life, in-person scenarios are very important to helping your friend learn and retain the material he or she has been studying, so you're doing a great service by agreeing to help. And lucky you—you get the most fun part!

You'll be playing a patient in need of medical assistance in a remote, wilderness setting. Your job is to follow the instructions on the next page as best you can and act your part convincingly.

KEY TIPS

- **Keep the "Patient Instructions" secret.** Only you should read and know what it says on the next page.
- **Don't volunteer too much information.** Your rescuer is learning to follow a set of specific instructions and procedures designed to help them elicit all relevant facts in a real situation. If your secret instructions mention a fact about your condition that the rescuer doesn't ask about or uncover, don't tell them until the scenario's done.
- Do tell your rescuer about physical signs they'd be able to see in a real emergency. If your instructions specify a visible, physical sign or symptom that your rescuer would notice in real life, do tell them about that as appropriate. If the sign or symptom is something they'd notice but only after doing a particular kind of check or exam, your instructions will say this. Only tell them what they find as they properly look for it.
- **Have fun.** Don't hesitate to get into your part. Imagine how you'd be feeling if you really were suffering from this condition. Feel free to show emotions. The more realistic you can make the scenario, the better the practice will be.

SCENARIO PACKET 1

PATIENT INSTRUCTIONS

THE SCENE

Note: Your rescuer also has this information

You are hiking in the Wind River Range in Wyoming. It is the middle of summer, and temperatures outside are warm. Your rescuer and two friends come around a corner and see you sitting on the side of the trail, and you don't look great. Your skin is pale and sweaty, you're anxious, and you're having a hard time catching your breath. You're overdressed for the occasion (long pants, long-sleeve shirt, big boots, heavy pack). The rescuer decides to stop and see if they can help.

CONFIDENTIAL

Start in a seated, hunched over position with your hands on your head, and appear to be out of breath. You are alert and oriented to your situation (meaning you know what's going on), but slightly distracted. It takes you a couple of seconds to answer any of the rescuer's questions, but you are able to do so. After spending some time with the rescuer, you start to feel better. You're no longer out of breath, and you think you can keep walking.

- Patient Description (reply if the rescuer asks you what happened): "I've been backpacking by myself and am trying to keep moving fast. It's really hot today and I was cramping up, so I decided to sit down. I really don't feel good."
- Patient Consent: When the rescuer asks if they can help you, allow them to do so.



Scene Safety, Establishing a Relationship, and Life Threats (ABCDE) Practice

RESCUER INSTRUCTIONS

THE SCENE

Note: Your patient also has this information

You and two other friends are backpacking in the Wind River Range in Wyoming. It is the middle of summer, and temperatures outside are much warmer than you were expecting. This is your group's first day out on the trail this season, and it has been quite physically demanding so far. You and your friends joke that it would have been a good idea to train a bit more before the trip, but you're all having fun and taking your time. You come around a corner and see a person sitting on the side of the trail, and (s)he doesn't look great. His/her skin is pale and sweaty, (s)he's anxious, and (s)he's having a hard time catching his/her breath. You also notice that (s)he seems to be overdressed for the occasion (long pants, long-sleeve shirt, big boots, heavy pack). You decide to stop and see if you can help.

INSTRUCTIONS

Use these clues, your Patient Assessment Map, and what you've learned so far in the class to respond as if you were in a real wilderness medical situation. For this first scenario, make sure to:

- Survey the scene
- Use BSI (or pretend to, but out loud)
- Establish a relationship with your patient (if needed)
- Check for life threats with a primary assessment (ABCDE).

TIPS FOR THIS SCENE

- Remember that in this scenario, this patient is a stranger. When establishing a relationship with them, it will be necessary for you to introduce yourself and ask for consent.
- Once you have successfully gone through scene safety, establishing a relationship, and life threats, your scenario is finished.

ENDING YOUR SCENARIO

Once you have completed the scenario, talk about it with your patient and get their feed-back. Did you uncover all the clues and information in the Patient Instructions? Then check the RESOURCES for a list of scenario answer keys. Compare what you did during your scenario, with what our experts would do, and see how you measured up.



SOAP Note

FIRST AID	Rescuer Name <u>Sarah Morris</u>	Date <u>1/26/2016</u>
BASICS	Patient Name Cody Porter	Time <u>11:00am</u>
SUBJECTIVE I have a	27 year old male whose chief compl	laint is:
Pain and tenderness in the right wrist. Pa	atient was hiking and stood on top of a boulder to take a photo when he lo	ost his footing and tumbled down about 20 feet over dirt and loose rock
Patient reports a mild headache from hit	tting his head, but denies a loss of responsiveness and appears reliable. So	ome tenderness upon palpation of the lower right flank.
ORIECTIVE Dationt w	as found _Sitting against a boulder holding his right wrist on a slope n	near Knoh Hill, about a mile away from the Rive Lake trailhead. Patient
exam revealed a laceration on left side of	f forehead, bruising and deformity to the right wrist, and bruising on the right	ignt flank. No other injuries found.
SIGNS & SYMPTOMS	<u> </u>	
A	• ONSET	
M	P PROVOKES	
P	Q QUALITY	
L	R RADIATES	
E	S SEVERITY	
ADDITIONAL NOTES		
		FRONT BACK
ASSESSMENT		
MSSESSMEN I		
	Yw	I w w w lw
PLAN		



Secondary Assessment Practice

PATIENT INSTRUCTIONS

Thanks so much for agreeing to help your friend with the Wilderness First Aid Basics training. These real-life, in-person scenarios are very important to helping your friend learn and retain the material he or she has been studying, so you're doing a great service by agreeing to help. And lucky you—you get the most fun part!

You'll be playing a patient in need of medical assistance in a remote, wilderness setting. Your job is to follow the instructions on the next page as best you can and act your part convincingly.

KEY TIPS

- **Keep the "Patient Instructions" secret.** Only you should read and know what it says on the next page.
- Don't volunteer too much information. Your rescuer is learning to follow a set of specific instructions and procedures designed to help them elicit all relevant facts in a real situation. If your secret instructions mention a fact about your condition that the rescuer doesn't ask about or uncover, don't tell them until the scenario's done.
- Do tell your rescuer about physical signs they'd be able to see in a real emergency. If your instructions specify a visible, physical sign or symptom that your rescuer would notice in real life, do tell them about that as appropriate. If the sign or symptom is something they'd notice but only after doing a particular kind of check or exam, your instructions will say this. Only tell them what they find as they properly look for it.
- **Have fun.** Don't hesitate to get into your part. Imagine how you'd be feeling if you really were suffering from this condition. Feel free to show emotions. The more realistic you can make the scenario, the better the practice will be.

SCENARIO PACKET 2

PATIENT INSTRUCTIONS

THE SCENE

Note: Your rescuer also has this information

You and your friend were on a long day hike in Grand Staircase-Escalante National Monument, in the Southeast corner of Utah. Escalante is known for its wild and scenic desert beauty, and hosts a number of canyons, sandstone rock formations, and picturesque vistas. The terrain here is rugged, and the desert can be unforgiving. After a long day on the trail, you and your friend are pretty tired, but in great spirits. You come upon a steep, technical part of the trail, about a mile away from the trailhead. You rush the descent, and slip. You tumble down about 6 feet, and land on your hands and knees. You sit down and call out to your friend, who asks you to stay put. Your makes their way down to you to see if you're hurt.

CONFIDENTIAL

Start out in a comfortable seated position. You are alert and oriented to your situation, and are able to respond to the rescuer's questions without difficulty.

- Your description of what happened "We were hiking and talking, and I guess I rushed that last section of the trail. My foot slipped and I fell from up there."
- **Description of fall and possible injuries** "When I fell I tumbled a bit. It's hard to say if anything is really hurt, I'm pretty shaken up. My hands and knees are skinned up from landing on them, and I'm pretty sure I hit my left hip during the fall. I know I did not hit my head or back."
- Patient Consent You agree to let your friend help you and take a closer look at what's wrong.
- **Head to Toe Exam** The rescuer will ask to do a thorough head-to-toe exam to see what is hurt. Upon inspection, let them know that your hands and knees are scratched up (like road rash), but that it feels like surface pain. You are confident that you can use your hands and knees. When the rescuer touches your left hip, tell the rescuer that it hurts quite a bit (on a scale of 1–10, about a 5 or 6), and your mobility is limited but you think you can use it. Deny pain anywhere else.
- **Patient History** The rescuer will ask you a series of questions related to what happened, and some medical history.
 - Signs and Symptoms (of injuries) Road rash on both hands and knees, deep pain in left hip, but it seems to be getting better.
 - Allergies Allergic to bees, but you haven't been around any
 - **Medications** Carry an Epi-Pen emergency injector for bee allergy, but not on any other medications or substances.
 - Past Pertinent Medical History None.
 - Last In's & Out's Bathroom as found (meaning just say what's true for you for real). Water & food: You have been regularly eating throughout the day and do not feel hungry. You drank about 2.5 liters today, but you're almost out of water.
 - Events leading up to accident: You were hiking and slipped.



Secondary Assessment Practice

RESCUER INSTRUCTIONS

THE SCENE

Note: Your patient also has this information

You and your friend were on a long day hike in Grand Staircase-Escalante National Monument, in the Southeast corner of Utah. Escalante is known for its wild and scenic desert beauty, and hosts a number of canyons, sandstone rock formations, and picturesque vistas. The terrain here is rugged, and the desert can be unforgiving. After a long day on the trail, you and your friend are pretty tired, but in great spirits. You come upon a steep, technical part of the trail, about a mile away from the trailhead. Your friend rushes the descent, and slips. You watch him/her tumble down about 6 feet, and land on his/her hands and knees. (S)he sits down and calls out to you, and you ask your friend to stay put. You carefully make your way down to your friend to see if (s)he is hurt.

INSTRUCTIONS

Use these clues, your Patient Assessment Map, and what you've learned so far in the class to respond as if you were in a real wilderness medical situation. For this scenario, make sure to:

- Survey the scene
- Use BSI (or pretend to, but out loud)
- Establish a relationship with your patient (if needed)
- Check for life threats with a primary assessment (ABCDE).
- Perform a head-to-toe exam and gather a Patient History (SAMPLE)
- Document your findings in a SOAP note

TIPS FOR THIS SCENE

- You and your patient already know each other, and you watched your friend fall. Once you reach your patient (remember to go through Scene Safety first; it helps to say the steps out loud), first make sure that (s)he is aware of what happened. Then ask if they feel like anything is hurt.
- Gain consent, and go through Life Threats.
- If you are able to establish that there is nothing life threatening, proceed with your secondary assessment.
- THINK: Is this a medical, or traumatic emergency? This will determine the order in which you go through your secondary assessment.

ENDING YOUR SCENARIO

Once you have completed the scenario, talk about it with your patient and get their feedback. Did you uncover all the clues and information in the Patient Instructions? Then check the RESOURCES for a list of scenario answer keys. Compare what you did during your scenario, with what our experts would do, and see how you measured up.

EXTRA PRACTICE

Take this opportunity to practice rolling a patient to check their spine for injuries. After you finish the scenario, ask your patient to lie down and practice rolling them a few times.



Final Scenario

PATIENT INSTRUCTIONS

Thanks so much for agreeing to help your friend with the Wilderness First Aid Basics training. These real-life, in-person scenarios are very important to helping your friend learn and retain the material he or she has been studying, so you're doing a great service by agreeing to help. And lucky you—you get the most fun part!

You'll be playing a patient in need of medical assistance in a remote, wilderness setting. Your job is to follow the instructions on the next page as best you can and act your part convincingly.

KEY TIPS

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- Don't volunteer too much information. Your rescuer is learning to follow a set of specific instructions and procedures designed to help them elicit all relevant facts in a real situation. If your secret instructions mention a fact about your condition that the rescuer doesn't ask about or uncover, don't tell them until the scenario's done.
- Do tell your rescuer about physical signs they'd be able to see in a real emergency. If your instructions specify a visible, physical sign or symptom that your rescuer would notice in real life, do tell them about that as appropriate. If the sign or symptom is something they'd notice but only after doing a particular kind of check or exam, your instructions will say this. Only tell them what they find as they properly look for it.
- **Have fun.** Don't hesitate to get into your part. Imagine how you'd be feeling if you really were suffering from this condition. Feel free to show emotions. The more realistic you can make the scenario, the better the practice will be.

THE SCENE

Note: Your rescuer also has this information

Your rescuer was leaving camp after a weekend backpacking trip in the High Sierras of California. It is spring, and there is still plenty of snow on the ground. The weather has been sunny, but cold—especially at night. After about two hours of hiking, your rescuer comes to a large boulder field that is partially covered in snow and about 4 miles away from their trailhead. They take their time moving through the terrain, and hear a voice calling for help. They look in the direction the sound is coming from, and notice a person (YOU!) lying between two boulders. They go over to see if they can help.

SCENARIO PACKET 3

PATIENT INSTRUCTIONS

CONFIDENTIAL

Start out lying on your side clutching your right wrist and acting like you are obviously in pain. You were by yourself and out for the day on a trail run. You came up to the boulder field and slowed your pace to a walk. You took a wrong step, lost your balance, and fell. To brace your fall, you put your hands out, and your right wrist was caught between two boulders. You only brought a light trail running pack with some food, water, a headlamp, and one extra layer. You are in the shade, and are starting to feel really cold. You are alert and oriented to your situation, and able to respond to the rescuer's questions without difficulty.

- **Patient Consent** Agree to let the rescuer help you. All information they ask (unless otherwise noted below) can be true about you (e.g. name, age, etc.).
- Life Threats
 - **Circulation** When the rescuer does a blood sweep and gets to your left knee, let them know that your knee is skinned up and bleeding.
 - Environment You are wearing clothing that is appropriate for running in cold temperatures, but not appropriate for sitting still in the shade for long periods of time. You feel "really cold" and would like to move to somewhere sunnier.

Patient Injuries

Your right wrist is visibly swollen and angulated. You describe the pain as "extremely painful, I think I may have broken my wrist."

- When your rescuer takes a look at your radial pulse (wrist), let them know that the pulse is noticeably weak in your injured wrist, but as found in your uninjured wrist.
- When your rescuer asks you to move your fingers on the right hand, you can't
- when your rescuer taps your fingers, you have a difficult time distinguishing what finger they're touching (your fingers feel numb and tingly).
- If your rescuer "reduces" your wrist injury (pulling traction in line), your hand feels much better and it provides some pain relief for your wrist.

Your left knee is bleeding from the fall, but doesn't hurt that much. A quick bandage will take care of the injury for now.

Patient History

- **Signs & Symptoms** Right wrist is angulated and swollen. You are in extreme pain (a 9 on a scale of 1-10).
- Allergies You are allergic to penicillin.
- Medications None.
- Past pertinent medical info None.
- Last in's & out's As found (tell your rescuer whatever's true for you)
- **Events** You were trail running and slipped in the boulder field. You put your hand out to catch you, but it got caught between two boulders for a moment. You heard a "popping" sound and now your wrist is in a lot of pain.



Final Scenario

RESCUER INSTRUCTIONS

THE SCENE

Note: Your patient also has this information

You are leaving camp after a weekend backpacking trip in the High Sierras of California. It is spring, and there is still plenty of snow on the ground. The weather has been sunny, but cold—especially at night. After about two hours of hiking, you come to a large boulder field that is partially covered in snow and about 4 miles away from your trailhead. You take your time moving through the terrain, and hear a voice calling for help. You look in the direction the sound is coming from, and notice a person lying between two boulders. You go over to see if you can help.

INSTRUCTIONS

Use these clues, your Patient Assessment Map, and what you've learned so far in the class to respond as if you were in a real wilderness medical situation. For this scenario, make sure to:

- Survey the scene
- Use BSI (or pretend to, but out loud)
- Establish a relationship with your patient (if needed).
- Check for life threats with a primary assessment (ABCDE)
- Perform a head-to-toe exam and gather a Patient History (SAMPLE)
- Document your findings in a SOAP note
- Make a plan
- Deliver any necessary treatment

TIPS FOR THIS SCENE

- You have never met this patient before. Establish a relationship with them before you try to help.
- Make sure to thoroughly go through life threats, and think about the environment this scenario takes place in.
- Use your SOAP note to help you stay on track during this patient assessment.
- For this scene, we recommend you pack a backpack with items you
 might bring on a weekend backpacking trip. These items may help
 you when it's time to take care of your patient's injuries.

ENDING YOUR SCENARIO

Once you have completed the scenario, talk about it with your patient and get their feedback. Did you uncover all the clues and information in the Patient Instructions? Then check the RESOURCES for a list of scenario answer keys. Compare what you did during your scenario, with what our experts would do, and see how you measured up.



Splinting Practice A

Upper extremities

RESCUER INSTRUCTIONS

THE SCENE

You and a friend were kayaking down the Snake River in Wyoming in a two-person inflatable kayak. You went through a rapid, and your friend was ejected from the boat. During the process, your friend hit his/her right forearm on a rock. Your friend was able to swim to shore safely, which is where you met them and went through a patient assessment. Your assessment was that your friend may have fractured his/her forearm, but luckily you found no other injuries. The patient is stable, but there is some obvious swelling, bruising, and some deformity to the right forearm, and your friend is in a great deal of pain. Luckily, you made it through the last of the rapids, so you decide to splint your friend's injured forearm and paddle to the take-out so your friend can seek medical attention.

INSTRUCTIONS

For this scenario, you will need to splint in order to protect the patient's right forearm. Use the gear you'd realistically have with you on an adventure (what kind of adventure and what the gear looks like is up to you, but be realistic). Do your best to follow the principles you just learned to splint the injury.

TIPS FOR THIS SCENE

- Remember for a fractured bone, immobilize the joints above and below.
- For fractures to the lower arm (radius, ulna, elbow, and wrist), immobilize the lower arm in a 90-degree angle at the elbow and pad the injured area well.
- Sling and swathe.

ENDING YOUR SCENARIO

Take a photo of your finished splint (or even better, several photos along the way), and upload them to the **Course Gallery**.





Splinting Practice B

Lower extremities

RESCUER INSTRUCTIONS

THE SCENE

You and a friend are on the last day of a multiday backpacking and climbing trip in New Hampshire's White Mountains. You are hiking out towards the trailhead, and need to cross a big boulder field. You are both wearing heavy packs, which makes balancing your way through these big boulders challenging. Your friend slips and rolls his/her left ankle. (S)he immediately yells out in pain, and you know this is more than just a rolled ankle. You go through a patient assessment, and find that his/her ankle is incredibly swollen, bruised, and (s)he can't bear any weight. You decide to splint the ankle and recruit help to get your friend to the trailhead.

INSTRUCTIONS

For this scenario you can recruit a friend or practice on yourself. Your goal is to splint in order to support and protect the left ankle. Use the gear you'd realistically have with you on an adventure (what kind of adventure and what the gear looks like is up to you, but be realistic). Do your best to follow the principles you just learned to splint the injury.

TIPS FOR THIS SCENE

- Remember that for an injured joint, you will need to immobilize the long bones above and below.
- For injuries to the ankle, immobilize the joint so that the foot is perpendicular to the leg (about 90 degree bend) in order to achieve a position of function.

ENDING YOUR SCENARIO

Take a photo of your finished splint (or even better, several photos along the way), and upload them to the **Course Gallery**.

