

**2024 KMI  
FIRST AID CONTEST**



**LEXINGTON, KY  
MAY 6<sup>TH</sup> 2024**

ROB

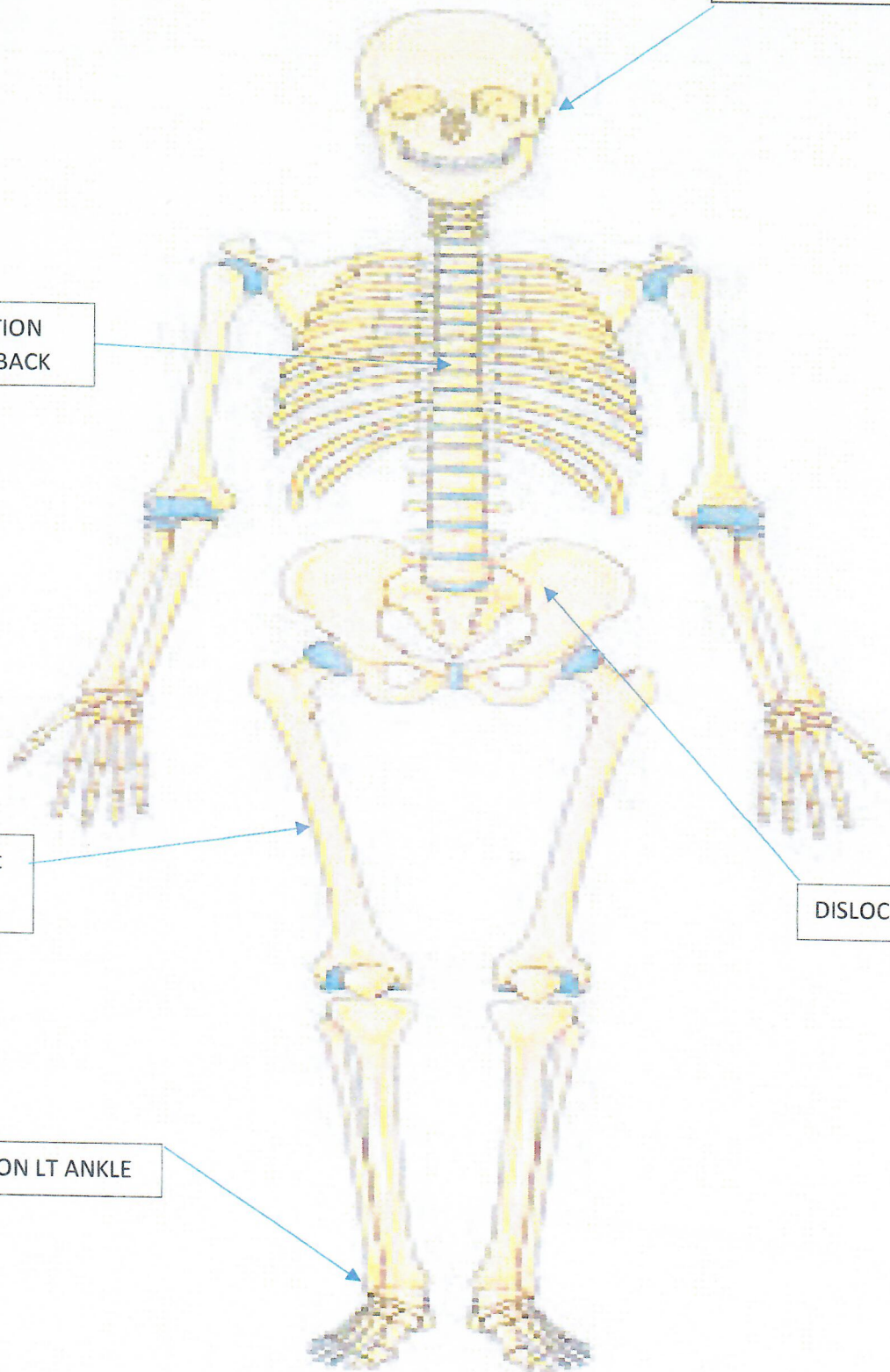
ABRAISON LEFT EAR

9" LACERATION  
MIDDLE OF BACK

6" Laceration rt  
Thigh

DISLOCATION LT HIP

DISLOCATION LT ANKLE





## 2024 KMI STATEMENT

Rob and bob were working on belt rollers when for no reason the belt started. When it started it began to pull Rob down the belt line then the belt stopped and rob became untangled from the belt line. After checking on him Bob went to call for help, when talking to people outside, he said that rob looked like he may have had multiple injuries. He also stated that first aid providers were there and have started checking on him. Bob was not clear when talking to the people outside he seemed very unstable the first aid providers have called out and said they have another emergency and will have to leave. But a note will left on what they have done. But we do know that they have treated Bob for shock.

## INITIAL ASSESSMENT

PROCEDURES	CRITICAL SKILLS	
1. SCENE SIZE UP	<input type="checkbox"/> <input type="checkbox"/>	<b>**A.</b> Observe area to ensure safety <b>**B.</b> Call for help
2. MECHANISM OF INJURY	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>**A.</b> Determine causes of injury, if possible <b>**B.</b> Triage: Immediate, Delayed, Minor or Deceased. <b>**C.</b> Ask patient (if conscious) what happened
3. INITIAL ASSESSMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>**A.</b> Verbalize general impression of the patient(s) <b>**B.</b> Determine responsiveness/level of consciousness (AVPU) Alert, Verbal, Painful, Unresponsive <b>**C.</b> Determine chief complaint/apparent life threat
4. ASSESS AIRWAY AND BREATHING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>A.</b> Correctly execute head-tilt/chin-lift or jaw thrust maneuver, depending on the presence of cervical spine (neck) injuries <b>B.</b> Look for absence of breathing (no chest rise and fall) or gasping, which are not considered adequate (within 10 seconds) <b>C.</b> If present, treat sucking chest wound
5. ASSESS FOR CIRCULATION	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>A.</b> Check for presence of a carotid pulse (5-10 seconds) <b>B.</b> If present, control life threatening bleeding <b>C.</b> Start treatment for all other life-threatening injuries/conditions (Rule-2).

**IMMEDIATE:** Rapid Patient Assessment treating all life threats Load and Go. If the treatment interrupts the rapid trauma assessment, the assessment will be completed at the end of the treatment.

**DELAYED:** Detailed Patient Assessment treating all injuries and conditions and prepare for transport.

**MINOR:** (Can walk) Detailed Patient Assessment treating all injuries and conditions and prepare for transport. After all IMMEDIATE and DELAYED patient(s) have been treated and transported.

**DECEASED:** Cover



# PATIENT ASSESSMENT

## PROCEDURES

## CRITICAL SKILLS

1. HEAD	<input type="checkbox"/>        	<b>**A.</b>  <b>**B.</b>  <b>**C.</b> <b>**D.</b> Check head for BP-DOC: Bleeding, Pain, Deformities, Open wounds, Crepitus <b>**E.</b> Check and touch the scalp <b>**F.</b> Check the face <b>**G.</b> Check the ears for bleeding or clear fluids Check the eyes for any discoloration, unequal pupils, reaction to light, foreign objects and bleeding Check the nose for any bleeding or drainage Check the mouth for loose or broken teeth, foreign objects, swelling or injury of tongue, unusual breath odor and discoloration												
2. NECK	<input type="checkbox"/> <input type="checkbox"/>	<b>**A.</b> Check the neck Inspect for <b>**B.</b> medical ID												
3. CHEST	<input type="checkbox"/> <input type="checkbox"/>	<b>**A.</b> Check chest area <b>**B.</b> Feel chest for equal breathing movement on both sides <b>**C.</b> Feel chest for inward movement in the rib areas during inhalations												
4. ABDOMEN	<input type="checkbox"/>	<b>**A.</b> Check abdomen (stomach)												
5. PELVIS	<input type="checkbox"/>	<b>**A.</b> Check pelvis Inspect pelvis for injury by touch <b>**B.</b> (Visually inspect and verbally state inspection of crotch and buttocks areas)												
6. LEGS	<table border="1"> <tr> <td>L</td> <td>R</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	L	R	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>**A. B. C.</b>  <b>**D.</b> Check each leg Inspect legs for injury by touch Unresponsive: Check legs for paralysis (pinch inner side of leg on calf) <b>**E.</b> Responsive: Check legs for motion; places hand on bottom foot and states "Can you push against my hand?" Check for medical ID bracelet
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7. ARMS	<table border="1"> <tr> <td>L</td> <td>R</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	L	R	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>**A.</b> Check each arm <b>B.</b> Inspect arms for injury by touch <b>C.</b> Unresponsive: Check arms for paralysis (pinch inner side of wrist) <b>**D.</b> Responsive: Check arms for motion (in a conscious patient; team places fingers in each hand of patient and states "Can you squeeze my fingers?" <b>**E.</b> Check for medical ID bracelet
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<input type="checkbox"/>	<input type="checkbox"/>													
8. BACK SURFACES	<input type="checkbox"/>	<b>**A.</b> Check back												

## DRESSINGS AND BANDAGING - OPEN WOUNDS (ABRATION)

PROCEDURES	CRITICAL SKILLS	
1. EMERGENCY CARE FOR AN OPEN WOUND	<input type="checkbox"/> *A. Control bleeding <input type="checkbox"/> *B. Prevent further contamination <input type="checkbox"/> *C. Bandage dressing in place after bleeding has been controlled <input type="checkbox"/> *D. Keep patient lying still	
2. APPLY DRESSING	<input type="checkbox"/> A. Use sterile dressing <input type="checkbox"/> B. Cover entire wound <input type="checkbox"/> C. Control bleeding <input type="checkbox"/> D. Do not remove dressing	
3. APPLY BANDAGE	<input type="checkbox"/> A. Do not bandage too tightly. <input type="checkbox"/> B. Do not bandage too loosely. <input type="checkbox"/> C. Cover all edges of dressing. <input type="checkbox"/> D. Do not cover tips of fingers and toes unless they are injured. <input type="checkbox"/> E. Bandage from the bottom of the limb to the top (distal to proximal) if applicable.	

## DRESSINGS AND BANDAGING - OPEN WOUNDS (6" & 9" LACERATION)

PROCEDURES	6"	9"	CRITICAL SKILLS
1. EMERGENCY CARE FOR AN OPEN WOUND	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Control bleeding *B. Prevent further contamination *C. Bandage dressing in place after bleeding has been controlled *D. Keep patient lying still
2. APPLY DRESSING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Use sterile dressing B. Cover entire wound C. Control bleeding D. Do not remove dressing
3. APPLY BANDAGE	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Do not bandage too tightly. B. Do not bandage too loosely. C. Cover all edges of dressing. D. Do not cover tips of fingers and toes unless they are injured. E. Bandage from the bottom of the limb to the top (distal to proximal) if applicable.



## TWO-RESCUER CPR WITH AED (NO SPINAL INJURY - MANIKIN ONLY)

PROCEDURES	CRITICAL SKILLS
1. RESCUER ESTABLISH UNRESPONSIVENESS	<input type="checkbox"/> A. Tap or gently shake shoulders <input type="checkbox"/> **B. "Are you OK?" <input type="checkbox"/> C. Determine unconsciousness without compromising cervical spine (neck) injury <input type="checkbox"/> **D. "Call for help" <input type="checkbox"/> **E. "Get AED" ( <u>Note</u> : If AED is used, follow local protocol)
2. RESCUER MONITOR PATIENT FOR BREATHING	<input type="checkbox"/> A. Look for absence of breathing (no chest rise and fall) or gasping breaths, which are not considered adequate (within 10 seconds)
3. RESCUER CHECK FOR CAROTID PULSE	<input type="checkbox"/> A. Correctly locate the carotid pulse - on the side of the rescuer, locate the patient's windpipe with your index and middle fingers and slide your fingers in the groove between the windpipe and the muscle in the neck <input type="checkbox"/> B. Check for presence of carotid pulse for 5 to 10 Seconds <input type="checkbox"/> **C. Absence of pulse <input type="checkbox"/> D. Immediately starts CPR if no pulse
4. RESCUER POSITION FOR COMPRESSIONS	<input type="checkbox"/> A. Locate the compression point on the breastbone between the nipples <input type="checkbox"/> B. Place the heel of one hand on the compression point and the other hand on top of the first so hands are parallel. <input type="checkbox"/> C. Do not intentionally rest fingers on the chest. Keep heel of your hand on chest during and between compressions.
5. RESCUER DELIVER CARDIAC COMPRESSION	<input type="checkbox"/> A. Give 30 compressions <input type="checkbox"/> B. Compressions are at the rate of 100 to 120 per minute <input type="checkbox"/> C. Down stroke for compression must be on or through compression line <input type="checkbox"/> D. Return to baseline on upstroke of compression
6. RESCUER ESTABLISH AIRWAY	<input type="checkbox"/> A. Kneel at the patient's side near the head <input type="checkbox"/> B. Correctly execute head-tilt/chin-lift maneuver



7. RESCUER VENTILATIONS BETWEEN COMPRESSIONS	<input type="checkbox"/> A. Place barrier device (pocket mask/shield with one way valve) on manikin Give 2 breaths 1 second each <input type="checkbox"/> B. Each breath - minimum of .8 (through .7-liter line on new manikins) <input type="checkbox"/> C. Complete breaths and return to compressions in less than 10 seconds (This will be measured from the end of last down stroke to the start of the first down stroke of the next cycle.) <input type="checkbox"/> D.
8. CONTINUE CPR FOR TIME STATED IN PROBLEM	<input type="checkbox"/> A. Provide 5 cycles of 30 chest compressions and 2 rescue breaths <input type="checkbox"/> B. To check for pulse, stop chest compressions for no more than 10 seconds after the first set of CPR <input type="checkbox"/> C. Rescuer at patient's head maintains airway and checks for adequate breathing or coughing <input type="checkbox"/> D. The rescuer at the patient's head shall feel for a carotid pulse <input type="checkbox"/> E. If no signs of circulation are detected, continue chest compressions and breaths and check for signs of circulation after each set <input type="checkbox"/> F. A maximum of 10 seconds will be allowed to complete ventilations and required pulse checks between sets (this will be measured from the end of the last down stroke to the start of the first down stroke of the next cycle) <input type="checkbox"/>
9. RESCUER APPLIES THE AED (DURING THE FIFTH CYCLE OF COMPRESSIONS)	<input type="checkbox"/> A. Rescuer continues compressions while other rescuer turns (simulated) on AED and applies pads. RESCUERS SWITCH <input type="checkbox"/> B. rescuer clears victim, allowing AED to analyze. (Judges shall provide an envelope indicating a shockable or non-shockable rhythm) <input type="checkbox"/> C. If AED indicates a shockable rhythm, rescuer clears victim again and delivers shock. *verbalize shock given
10. RESUME HIGH QUALITY CPR	<input type="checkbox"/> A. Rescuer gives 30 compressions immediately after shock delivery (2 cycles). <input type="checkbox"/> B. Other rescuer successfully delivers 2 breaths.
11. CHANGING RESCUERS	<input type="checkbox"/> A.  Change of rescuers shall be made in 5 seconds or less and will be completed as outlined in the problem. Team must switch every 5 cycles in less than 5 seconds
12. CHECK FOR RETURN OF PULSE	<input type="checkbox"/> A. After providing required CPR (outlined in problem), check for return of pulse (within 10 seconds) <input type="checkbox"/> **B. 'Ask judge for presence of a pulse.'



## SPLINTING (SOFT) LOWER EXTREMITY FRACTURES AND DISLOCATIONS (ANKLE AND FOOT)

PROCEDURES	CRITICAL SKILLS	
1. CARE FOR FRACTURE	<input type="checkbox"/> **A. Assess for distal circulation, sensation, and motor function <input type="checkbox"/> B. Do not attempt to reduce dislocations (if applies)	
2. IMMOBILIZING FRACTURE	<input type="checkbox"/> A. Support affected limb and limit movement <input type="checkbox"/> B. Place three cravats (triangular bandage) under ankle/foot <input type="checkbox"/> C. Place pillow length wise under ankle/foot, on top of cravats (pillow should extend 6 inches beyond foot) <input type="checkbox"/> D. Lower limb, adjust cravats to tie <input type="checkbox"/> E. Tie cravats distal to proximal <input type="checkbox"/> F. Elevate with blanket or pillow <input type="checkbox"/> **G. Reassess distal circulation, sensation, and motor function	

## SPLINTING (RIGID OR SOFT) PELVIC GIRDLE, THIGH, KNEE AND LOWER LEG

PROCEDURES	CRITICAL SKILLS	
1. DETERMINE NEED FOR SPLINTING	<input type="checkbox"/> **A. Assess for: <ul style="list-style-type: none"> <li>▪ Pain</li> <li>▪ Swelling</li> <li>▪ Deformity</li> </ul> <input type="checkbox"/> B. Determine if splinting is warranted	
2. APPLY MANUAL STABILIZATION	<input type="checkbox"/> A. Support affected limb and limit movement <ul style="list-style-type: none"> <li>▪ Do not attempt to reduce dislocations</li> </ul>	
3. SELECT APPROPRIATE SPLINT	<input type="checkbox"/> A. Select appropriate splinting method depending on position of extremity and materials available <input type="checkbox"/> B. Select appropriate padding material	
4. PREPARE FOR SPLINTING	<input type="checkbox"/> A. Remove or cut away clothing as needed <input type="checkbox"/> **B. Assess distal circulation, sensation, and motor function <input type="checkbox"/> C. Cover any open wounds with sterile dressing and bandage <input type="checkbox"/> D. Measure splint <input type="checkbox"/> E. Pad around splint for patient comfort	

5. SPLINT	<input type="checkbox"/> A. Maintain support while splinting <u>Living Splint:</u> <input type="checkbox"/> A. Immobilize the site of the injury <input type="checkbox"/> B. Carefully place a pillow or folded blanket between the patients knees/legs <input type="checkbox"/> C. Bind the legs together with wide straps or cravats <input type="checkbox"/> D. Carefully place patient on long spine board <input type="checkbox"/> E. Secure the patient to the long spine board (if primary splint) <input type="checkbox"/> **F. Reassess distal circulation, sensation, and motor function <u>Padded</u> <u>Board Splint:</u> <input type="checkbox"/> A. Splint with two long padded splinting boards (one should be long enough to extend from the patient's armpit to beyond the foot. The other should extend from the groin to beyond the foot.) (Lower leg requires boards to extend from knee to below the foot.) <input type="checkbox"/> B. Cushion with padding in the armpit and groin and all voids created at the ankle and knee <input type="checkbox"/> C. Secure the splinting boards with straps and cravats <input type="checkbox"/> D. Carefully place the patient on long spine board <input type="checkbox"/> E. Secure the patient to the long spine board (if primary splint) <input type="checkbox"/> **F. Reassess distal circulation, sensation, and motor function <u>Other Splints:</u> <input type="checkbox"/> A. Immobilize the site of the injury <input type="checkbox"/> B. Pad as needed <input type="checkbox"/> C. Secure to splint distal to proximal <input type="checkbox"/> D. Carefully place patient on long spine board <input type="checkbox"/> E. Secure the patient to the long spine board (if primary splint) <input type="checkbox"/> **F. Reassess distal circulation, sensation, and motor function
6. REASSESS	<input type="checkbox"/> **A. Assess patient response and level of comfort



## MOUTH-TO-MASK RESUSCITATION

### PROCEDURES

### CRITICAL SKILLS

1. ESTABLISH UNRESPONSIVENESS	<input type="checkbox"/> A. Tap or gently shake shoulders <input type="checkbox"/> **B. "Are you OK?" <input type="checkbox"/> C. Determine unconsciousness without compromising C-spine injury <input type="checkbox"/> **D. "Call for help" <input type="checkbox"/> **E. "Get AED" ( <u>Note</u> : If AED is used, follow local protocol)
2. MONITOR PATIENT FOR BREATHING	<input type="checkbox"/> A. Look for absence of breathing (no chest rise and fall) or gasping, which are not considered adequate (within 10 seconds)
3. CHECK FOR CAROTID PULSE	<input type="checkbox"/> A. Correctly locate the carotid pulse (on the side of the rescuer) <input type="checkbox"/> B. Check for presence of carotid pulse for 5 to 10 second. <input type="checkbox"/> **C. Presence of pulse
4. ESTABLISH AIRWAY	<input type="checkbox"/> A. Correctly execute head tilt / chin lift or jaw thrust maneuver depending on the presence of cervical spine (neck) injuries
5. VENTILATE PATIENT	<input type="checkbox"/> A. Place barrier device (pocket mask/shield with one-way valve on manikin) <input type="checkbox"/> B. Ventilate patient 10 to 12 times per minute. Each ventilation will be provided at a minimum of .8 (through .7-liter line on new manikins)
6. CHECK FOR RETURN OF BREATHING AND PULSE	<input type="checkbox"/> A. After providing the required number of breaths (outlined in problem), check for return of breathing and carotid pulse within 10 seconds <input type="checkbox"/> **B. "Patient is breathing and has a pulse"

## IMMOBILIZATION - LONG SPINE BOARD (Backboard)

PROCEDURES		CRITICAL SKILLS
1. MOVE THE PATIENT ONTO THE LONG SPINE BOARD	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Rescuer One at the head must maintain in-line immobilization of the head and spine</p> <p>B. Rescuer One at the head directs the movement of the patient</p> <p>C. Other Rescuers control movement of the rest of body</p> <p>D. Rescuer Two position themselves on same side</p> <p>E. Upon command of Rescuer One at the head, roll patient onto side toward Rescuer Two.</p> <p>F. Quickly assess posterior body, if not already done</p> <p>G. Place long spine board next to the patient with top of board beyond top of head</p> <p>H. Place patient onto the board at command of the Rescuer at head while holding in-line immobilization using methods to limit spinal movement</p> <p>I. Slide patient into proper position using smooth coordinated moves keeping spine in alignment</p>
2. PAD VOIDS BETWEEN PATIENT AND LONG SPINE BOARD	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Select and use appropriate padding</p> <p>B. Place padding as needed under the head</p> <p>C. Place padding as needed under torso</p>
3. IMMOBILIZE BODY TO THE LONG SPINE BOARD	<input type="checkbox"/>	<p>A. Strap and secure body to board ensuring spinal immobilization, beginning at shoulder and working toward feet</p>
4. IMMOBILIZE HEAD TO THE LONG SPINE BOARD	<input type="checkbox"/> <input type="checkbox"/>	<p>A. Using head set or place rolled towels on each side of head</p> <p>B. Tape and/or strap head securely to board, ensuring cervical spine immobilization</p>
5. REASSESS	<input type="checkbox"/> <input type="checkbox"/>	<p>**A. Reassess distal circulation, sensation, and motor function</p> <p>**B. Assess patient response and level of comfort</p>



## SHOCK

## PROCEDURES

## CRITICAL SKILLS

CRITICAL SKILLS		
1. CHECK FOR SIGNS AND SYMPTOMS OF SHOCK	<input type="checkbox"/> <b>**A.</b> Check restlessness; anxiety; altered mental status; increased heart rate; normal to slightly low blood pressure; mildly increased breathing rate; pale (or bluish) skin (in victim with dark skin examine inside of mouth and nailbeds for bluish coloration). <b>**B.</b> Check for cool, moist skin; sluggish pupils; and nausea and vomiting. <b>**C.</b> Check for weakness	
2. TREATMENT	<input type="checkbox"/> A. Ensure the ABCs are properly supported. <input type="checkbox"/> B. Control external bleeding. <input type="checkbox"/> C. Keep the patient in a supine position. <b>**D.</b> Calm and reassure the patient, and maintain a normal body temperature. <input type="checkbox"/> E. Cover with blanket to prevent loss of body heat and place a blanket under the patient. (Do not try to place blanket under patient with possible spinal injuries) <input type="checkbox"/> F. Continue to monitor and support ABCs <input type="checkbox"/> G. Do not give the patient anything by mouth. Do not give any fluids or food and be alert for vomiting. <input type="checkbox"/> <b>**H.</b> Monitor the patient's ABCs at least every five minutes. <input type="checkbox"/> <b>**I.</b> Reassure and calm the patient	