

**2017**  
**Outdoor Emergency Care**  
**Cycle A**  
**Refresher Instructor Guide**



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**Refresher Instructor Guide**

Welcome to the *2017 Outdoor Emergency Care Cycle A Refresher Instructor Guide!* This guide is designed to provide information for instructors, instructors of record (IOR), instructor trainers, and the other members of the OEC team responsible for quality delivery of the OEC Cycle A Refresher in 2017.

For four years now, the Refresher Committee has offered a hybrid refresher program in addition to the traditional refresher. Last year, more than 14,000 OEC technicians, just over 50 percent of all OEC technicians, participated in the 2016 Cycle C OEC hybrid refresher program. That program included an online didactic component, the refresher workbook component, and a skill component. In most cases, the annual refresher material was covered in a more convenient and timely manner, saving the OEC provider both time and money in travel and other associated costs. Additionally, a refresher in the traditional format was provided.

Based on suggestions from last year's Refresher Evaluation Forms, a number of changes have been incorporated into the 2017 OEC Refresher. Some of them include:

- The refresher workbook has been reformatted to a different style resource.
- Redundant information between the refresher workbook and the online portion of the hybrid refresher has been greatly reduced.
- The font size/style has been changed to make text easier to read.
- Knowledge and skills objectives have been separated to make it easier for IORs and others to determine what needs to be done.
- A separate **skills** check-off sheet is located in the back of the refresher workbook.
- Additional resources for the traditional refresher (PowerPoints) are being provided.

We listened to your feedback and sincerely hope that you like the new format. Please let us know what you think of the changes.

As you may be aware, last year the new NSP IT system was rolled out. With the new system came a number of changes that were very important for all instructors, IORs, and instructor trainers to be aware of regarding course registration and student enrollment. A quick reminder is included here of those changes as you begin to register for the 2017 Cycle A OEC refresher:

1. There will be only one course offering when registering a course for the 2017 OEC Cycle A refresher. It will not matter which type of refresher you are offering as an IOR; when you **register** your class, there will only be one option to choose.
2. After a course is registered each student must be contacted by the IOR with the course number and they will be required to go online and **enroll** in the course at the NSP website. This process is the new norm for all NSP training courses.
3. Prior to the start of the refresher the IOR will be able to print out an attendee list to ensure that everyone has enrolled. Anyone that has not enrolled must do so prior to the course being closed.
4. The course completion will be done by the IOR electronically by closing out the course online. The directions for how to complete this step are published on the NSP website. All attendees meeting all of the refresher requirements will receive credit after the IOR closing and instructor trainer approval of the course closure. The IT and the IOR should communicate about any discrepancies between the course roster and actual attendance so course edits can be made by the IOR at the time of course closure. Check your member profile education classes to ensure you have received credit.

For those patrols not ready to transition to a distance learning/hybrid refresher, the traditional format refresher, as outlined in the *2017 OEC Cycle A Refresher Workbook*, is available. IORs that use the traditional format refresher should note that the directions for completing a traditional format refresher are included in the *2017 OEC Cycle A Instructor Guide*.

**No matter which format is chosen for a refresher, all objectives outlined in the Instructor Guide and Refresher Workbook must be covered/included in the annual refresher.**

A significant portion of an OEC instructor's responsibility is to support local patrols and members during their OEC refreshers. As an OEC instructor, the information we provide to OEC technicians must be correct and meet the requirements of the *Outdoor Emergency Care Fifth Edition (OEC 5th ed.)*. Each OEC instructor must be committed to the program as the "standard of training" while balancing the different ways OEC technicians learn. **The "standard of training" is what each OEC technician needs to be able to discuss and demonstrate.**

OEC instructors must be enthusiastic, have a great imagination, be sincere to the needs of the program and the students/participants, be knowledgeable of the *OEC 5th ed.*, and, above all, practice their teaching and OEC skills.

Understanding the language in the *2017 Cycle A OEC Refresher Instructor Guide* will help the instructor best meet the standards of the refresher. Each requirement is written as though looking through the student's eyes. "List," "describe," "identify," and "demonstrate" are key verbs that OEC technicians going through the refresher must complete. It is up to the OEC instructor to engage students so that they meet these requirements. Hence, the method an instructor chooses to deliver the training or skill or information should be interactive, energetic, and fully engage the OEC technician in the activity. The OEC instructor will also notice that certain key verbs relate to knowledge-based objectives, while others relate to skills-based objectives. Please note that there are several combined objectives that still require satisfactory skill demonstration prior to being accepted as complete. Key verbs such as "perform" and "demonstrate" will become the focal point of the hands-on portion of the refresher. Posters and other information available on the NSP OEC Instructor Resources pages on the NSP website ([www.nsp.org](http://www.nsp.org)) will help support the hands-on portion of the refresher as review material.

This year, Cycle A will include the usual cycle-specific topics.

**Remember, each refresher consists of two components and the refresher workbook. They include the didactic portion and the skills portion.**

**If using the hybrid model, the didactic objectives will be completed using the online portion. The refresher workbook must be completed as the transition and review of materials needed for the skills portion of the refresher. When using the traditional refresher model, all didactic objectives must be covered utilizing other methodologies and support materials (e.g., lecture, small group discussions, etc.) and supported by the transition and review of materials needed for the skills portion of the refresher located in the refresher workbook. The "Sample Refresher" section identifies how to meet both of these models.**

Every year your OEC Refresher Committee gets additional questions regarding the use of the refresher workbook and the online portion of the refresher, specifically, "Why do we need to do both?" The answer is very simple; the online portion of the refresher is no different than the lecture or mini-presentation or poster section of a traditional refresher. It only covers the basic information that is knowledge-based information. It does not replace the refresher workbook. The workbook supports the online portion and the traditional portion. There are very few assessment questions in the online portion of the refresher and those questions are designed in many cases to be more thoughtful and less rote answer.

The workbook is the tool that takes you into the *OEC 5th ed.* and asks questions about objectives so that you can start the refresher process.

Another question that comes up is, "Why don't we elaborate in more detail on the knowledge based objectives for those that are running a traditional refresher?" The answer is that the objectives that need to be covered are provided for in the checklist. There are many ways to conduct a traditional refresher, but everyone needs to cover those fundamental objectives. By providing the objectives that need to be reviewed in the sample refresher, the Refresher Committee is giving you the green light to cover that information in the best way to meet your needs. Being familiar with the *OEC 5th ed.* textbook, and how it is set up, may help limit the information that you would cover. Reviewing the online portion may give you some additional information on how to cover the non-skills portion of the refresher. Also, the objectives are listed on the posters, which will help at each station, and they can be moved around and reprinted to meet individual needs. In addition, on the "OEC Instructor Resources" webpage there will be an outline provided of the information from each module of the online program that can be used as a teaching outline for OEC instructors teaching a traditional refresher.

## National Ski Patrol Path to the Online Learning Management System Overview – 2017

DIRECTIONS TO VIEW THE ONLINE MODULES FOR THE HYBRID REFRESHER:

1. Sign in to the NSP website with your regular NSP user name and password.
2. Select Member Resources, then the Online Learning photo.
3. Click the banner that says "CLICK HERE..."
4. You will be taken to the NSP home page for the Path learning management system.
5. Select the Courses tab at the top to access the full range of available courses.
6. Select the 2017 Refresher A course. You will see the course chapters or modules listed.
7. After you select the chapter or module, you will be prompted to begin the presentation, which will open in a new window.
8. Once you complete the presentation, you will have the option to return to the course, stay on the current chapter or module, or go to the next chapter or module.
9. From the National Ski Patrol main page, select your name near the top right to access your account information.

#### A FEW HELPFUL INSTRUCTIONS:

1. Access to the Path learning management system is available only through the NSP website after signing in. There is no direct access to the Path learning management website.
2. Path learning management system support questions should be addressed to [support@blueskyelearn.com](mailto:support@blueskyelearn.com) or (888) 705-6002, option 1, during the hours of 8 a.m. to 8 p.m. ET, Monday–Friday. For callers residing outside the United States, the number is (858) 201-4136.
3. Course enrollment only occurs through the NSP website and must occur for course credit to be recorded. All courses that are available in the Path learning management system can be viewed and completed by any member. Course completions on the Path learning management system are not linked to the NSP course enrollment.

# 2017 OEC Refresher Key Topics

## **RESCUE BASICS** (Chapter 3)

## **ANATOMY AND PHYSIOLOGY** (Chapter 6)

- Respiratory system;
- Cardiovascular system; and
- Integumentary system.

## **PATIENT ASSESSMENT** (Chapter 7)

## **CRITICAL INTERVENTIONS** (Chapters 9 and 10)

- Airway management
- Shock

## **MEDICAL EMERGENCIES** (Chapters 11, 13, and 15)

- Respiratory emergencies;
- Cardiovascular emergencies; and
- Altered mental status.

## **TRAUMA** (Chapters 18, 19, and 20)

- Soft-tissue injuries;
- Burns;
- Musculoskeletal injuries – upper extremities; and
- Head and spine injuries – Spinal alignment from a standing position, pediatric (not a standing backboard) (Chapter 21)

## **ENVIRONMENTAL CONDITIONS** (Chapter 25)

- Cold-related emergencies

## **SPECIAL POPULATIONS** (Chapter 31)

- Geriatrics

## **CASE REVIEWS**

# Preparing for and completing the 2017 refresher

## PROGRAM PROCESS

OEC technicians must complete an OEC refresher each year. This program offers OEC technicians an opportunity to update, renew, and demonstrate their competency in specific OEC skills and knowledge. The OEC Refresher Program is a traditional program. During each refresher cycle, every OEC technician reviews required material and demonstrates proficiency in specified skills.

Every required skill must be demonstrated during the annual refresher as outlined in the Skills Checklist in the OEC refresher workbook or OEC refresher instructor guide. The Knowledge Objectives Checklist for traditional refresher IORs is located in this instructor guide and on the NSP OEC Instructor Resources webpage. With every refresher, OEC technicians have the opportunity to hone and improve their clinical skills.

*Verification of OEC technician competency in fundamental knowledge, skills, and scenario management is the basis of the OEC Refresher Program.*

OEC technician certification is maintained by completing three consecutive annual refreshers. All NSP members must complete each of the refreshers (Cycles A, B, and C) to maintain their OEC certification. The only NSP members exempt from this requirement are mountain hosts, registered candidate patrollers enrolled in an OEC course, members who complete a full OEC course after May 31 of the current year, and members registered as physician partners.

The OEC Refresher Program does not provide a means for a person with previous emergency care or medical training to challenge the OEC course. Additionally, the annual refresher covers a third of the OEC Program curriculum requirements and does not meet the requirements for certification under the full OEC Program.

An inactive NSP member returning to active status must hold a current OEC technician card, complete any missed cycle(s) that occurred during the inactive period, and pay dues for any missed seasons(s). If the OEC technician card expired during the inactive registration period, the member may need to retake an OEC course. Please refer to the *National Ski Patrol Policies and Procedures* for guidelines on registering as an NSP member and other OEC technician refresher requirements. The current Policies and Procedures document can be found on the [www.nsp.org](http://www.nsp.org) website under "Member Resources". Sign in to the NSP website, then select "Member Resources", then "Governance" from the top bar on the "Member Landing" page. The P&P is near the bottom of the page.

## THE REFRESHER

For each refresher, OEC technicians must **complete ALL** of the following components:

- **the didactic, or information, portion (either online or in person at a refresher event);**
- **the *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A*, and**
- **the skills component at a refresher event.**

In order to receive credit for this refresher cycle, OEC technicians must successfully complete either the **TRADITIONAL** or the **HYBRID** refresher types:

- **The "traditional" refresher format** consists of two steps:
  - 1) The OEC technician reviews and completes the assignments, skills, and case presentation in the *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A*; and,
  - 2) They complete a **knowledge and skill-based refresher event**, where they will demonstrate their OEC skills and discuss the knowledge-based objective requirements and the cases they have reviewed. Note: The *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A* must be reviewed by the IOR or their designee for completeness prior to completion of the refresher.
- **The "hybrid" refresher format** consists of three steps:
  - 1) The OEC technician reviews and completes the assignments, skills, and cases in this *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A*. Note: The *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A* must be reviewed by the IOR or their designee for completeness prior to completion of the refresher.

- 2) Complete the online refresher exercise that reviews the knowledge-based portion of the refresher.
- 3) Complete a skill-based refresher event, where they will demonstrate their OEC skills and discuss the cases they have reviewed.

In the 2017 Cycle A refresher, there are a number of injured/ill person assessments to be completed. **All OEC technicians must complete at least one "primary assessment" and one "secondary assessment" during that specific skill sign-off.** Other skill objectives that are identified as **"assess a specific part of the body" or "chief complaint (CC)" may have the assessments shortened**, but should include determining scene safety, permission to treat, traditional precautions associated with the CC, followed by assessment of the CC and treatment for shock.

#### **INSTRUCTIONS FOR COMPLETING THE REFRESHER** (to be sent to attendees)

- 1) **Review/complete the material.**
  - a. *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A* – must be completed;
  - b. *Outdoor Emergency Care Fifth Edition* is the reference source.
- 2) **Update your NSP record.**
  - a. Sign in to the NSP website and check your personal profile where it says "Hi, Name" near the top right to ensure that your information is correct, or call the national office at 303-988-1111.
  - b. **Enroll** in the OEC Refresher A course online through the Course Schedule.
- 3) **Complete the online refresher course** (if using the hybrid format).
  - a. Access the online course by checking with the Instructor of Record (IOR) where you are attending the refresher and get a course number.
  - b. Follow the directions carefully and completely, and have your *Outdoor Emergency Care Fifth Edition* ready.
  - c. Print your certificate and take it with you to the refresher event. If your IOR will accept an electronic version, you may save your certificate as a PDF and email it to your IOR. If you do not have a certificate, you may not be allowed into the refresher.
- 4) **Gather materials for the refresher event.**
  - a. Bring the completed *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A*, AND the printed completion certificate from the online portion (hybrid only).
  - b. Bring your current OEC, CPR, and NSP member cards. Your OEC card should have a blank space in the Cycle A section.
  - c. A fully stocked aid belt, vest, or pack, and any additional items required at the refresher you will attend.
  - d. Weather-appropriate clothing for both indoor and outdoor refresher activities.
- 5) **Practice the skills that are identified in the *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A*.**
  - a. Check the objectives list on page 21 for the skills you will be reviewing and demonstrating. There are two changes to this list that are updated on the NSP website and in this instructor guide.
  - b. By being proficient at *Outdoor Emergency Care Fifth Edition* skills, you will feel more comfortable during the skill and scenario stations.
- 6) **Attend the skills refresher.**
  - a. Check with your local patrol to ensure that you are completing the appropriate refresher format requirements (traditional vs. hybrid).
  - b. If you complete a refresher with another patrol, contact their IOR before you attend to ensure that you are preparing for the appropriate refresher format (traditional vs. hybrid). Also, be sure that your host IOR signs the Visitors' Completion Form on page 22 in the refresher workbook.

#### **OTHER PROGRAM REQUIREMENTS**

- **CPR for active NSP members:** Active NSP members must ensure that they maintain a current professional-rescuer level CPR certification and demonstrate their CPR skills annually to an agency-approved certified CPR instructor, regardless of the requirements of the certifying agency or the expiration date on their card. This requirement is not meant to be part of the annual OEC refresher. For a complete list of the NSP-approved CPR certifying agencies, please see the *National Ski Patrol Policies and Procedures*.
- **Local patrol training**, such as local patrol requirements, area needs, lift evacuation, CPR, AED, and other on-hill/on-trail training, is arranged through your home patrol and is NOT officially part of the OEC refresher process. The NSP is not responsible for the content, instruction, or scheduling of this training, so it is important to communicate with your local patrol regarding these requirements.

#### **HOW TO FIND THE REFRESHER WORKBOOK ANSWERS**

The Refresher Committee's task was to create a refresher workbook that would enhance the overall refresher experience. There are six modules, each directed at different subject matter. You will find it helpful and necessary to use your *Outdoor Emergency Care Fifth Edition* when completing the workbook. Use your *Outdoor Emergency Care Fifth Edition* and *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A* together to review the topics and chapters as indicated by the title of each workbook module, and answer the questions and complete each exercise.

The title of each module refers to a portion of the chapter(s) you will be reviewing in a particular module. The title and concluding objectives are shown in **bold** print. Consider this example: "**Critical Interventions: Airway Management, Shock**" (workbook module title); and **10-9. Describe and demonstrate the management of shock**. The first number refers to the chapter the answer can be found in, Chapter 10 in this instance. The second number (9 in this example) tells you that this is the ninth topic to be discussed in the chapter. From there, find the objective in the book, review it, and hopefully the answer will present itself. Please note that some objectives have been combined to shorten the list.

For those OEC technicians that use an electronic version of the *Outdoor Emergency Care Fifth Edition* textbook, we have included keyword searches in **bold and italics**.

Remember, completing the workbook is an important part of your refresher, and a requirement. The workbook must be brought to the OEC refresher and reviewed by the IOR for completeness.

### **INSTRUCTOR RESOURCES**

Up-to-date instructor resources, including the answer key for the refresher workbook, any corrections to the refresher workbook, posters, and other materials may be found after signing in to the NSP website then selecting "Member Resources" then "Instructor Resources" then "OEC Instructors."

### **THINGS TO KEEP IN MIND WHEN TEACHING TO THE ADULT LEARNER**

When teaching, instructors should embrace a variety of methods to engage their students and bring their subjects to life. Learning is not only more fun, but also more deeply engrained when it is done actively and involves the whole person. In fact, if a person sees, hears, and physically participates in a learning activity, they are 80 percent more likely to remember what they learned than if they used only one or these types of learning.

The following list provides a variety of terms that instructors and students can use in their concluding objectives to make learning more memorable. These verbs are to be used in the concluding objectives established by the instructor. Concluding objectives state what the OEC technician will do in order to meet that objective, and they provide guidance for instructors as they select an instruction method that supports the outcome.

**CONSIDER:** To think about carefully; to examine and think about in order to understand.

**DEMONSTRATE:** Through physical actions reveal, make obvious, or exhibit a skill. Make clear by showing examples.

**DESCRIBE:** To create a mental picture through detailed description.

**DISCUSS:** To discuss, consider, and argue the pros and cons of; to support with reasoning and evidence.

**EXPLAIN:** To make clear and understandable through meaning; to give explanation.

**IDENTIFY/NAME:** Be able to recognize, list, or classify items.

**INTEGRATE:** To put together, include, incorporate, and assimilate several components together.

**LIST:** Provide a series of words, names, or items of relevance to a related topic.

**PARTICIPATE:** Being actively involved, taking part in, joining in, sharing, and adding to a discussion or comments.

**PERFORM:** To carry out or execute an action; an exhibition of a skill.

**PRACTICE:** To carry out, perform, or apply a skill in a classroom setting; to do repeatedly to learn or become proficient.

**REVIEW:** To look at, look over, or re-examine.

(Suggested  
Timeline)

## 2017 Cycle A Refresher Planning Checklist

8 weeks  
before

\_\_\_\_\_ date

- Review, address, and act upon 2016 Patroller Refresher Evaluations.
- Determine the date, time, and location of the following:
  - Choose the refresher format: *Hybrid* (online and skills refresher) or *Traditional Refresher*.
  - Refresher planning meeting: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_
  - Annual OEC refresher for instructors: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_
  - OEC refresher: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_
- Notify all patrol members of the date, time, and location of the OEC refresher; provide preparatory instructions and a list of items members must bring to the refresher.
- Register the refresher at [www.nsp.org](http://www.nsp.org) and send the region OEC administrator a notice to get name of assigned instructor trainer (IT).
- Notify OEC instructors, assigned IT, OEC region administrator, or other OEC supervisory staff of the date, time, and location of the following:
  - Refresher planning meeting.
  - OEC refresher for instructors and OEC refresher.
  - How to access the online refresher, if it's being used.
- Ensure that all OEC instructors are current.

7 weeks  
before

\_\_\_\_\_ date

### Refresher Planning Meeting (refer to planning tool that follows)

- Identify and implement a plan for quality management of this refresher.
- Determine station format, logistics, and flow (see sample refresher schedules) by considering the following areas:
  - Number of patrollers expected to attend: \_\_\_\_\_
  - Number of stations needed: \_\_\_\_\_
  - Number of "patients" required: adult \_\_\_\_\_ pediatric \_\_\_\_\_
  - Number of instructors and facilitators needed: \_\_\_\_\_
  - Instructor assignments (notify all participants of assignments, *including* specific station performance objectives).
- Formalize instructor assignments, share refresher schedule/outline course information with assigned IT.
- Determine equipment supply needs, i.e., medical/first aid, audiovisual, chart paper and easels, tape, markers and pens, station signs, poster board, index cards, trash receptacles, and refreshments.
- Delegate administrative responsibilities:
  - Identify responsible person(s): \_\_\_\_\_
  - Have the IOR print a roster prior to the start of the refresher to review and make additions and deletions of those in attendance.
  - Ensure access to [www.nsp.org](http://www.nsp.org) with electronic support for attendees that did not enroll.
- Determine and obtain logistical support in the following areas:
  - Communications, including radios.
  - You are encouraged to have an OEC instructor lead each station or activity. Stations can be supplemented by specialty instructors who are knowledgeable about the material covered in the *OEC 5th ed.* standard of training. This is an opportunity to develop new instructors and involve local members of EMS, hospital staff; and administrative support.

6 weeks  
before

\_\_\_\_\_ date

5 weeks  
before

\_\_\_\_\_ date

4 weeks  
before

\_\_\_\_\_ date

3 Weeks  
before

(Suggested  
Timeline  
Continued)

## 2017 Cycle A Refresher Planning Checklist

3 Weeks  
Before

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### **During the Interim**

- Remind patrollers of items they must bring, e.g., current NSP membership and OEC cards, CPR card, a stocked belt or vest, and the completed refresher workbook. Also apprise patrollers of local needs, dress requirements, and necessary lunch arrangements.
- Confirm the source and delivery of equipment, supplies, and refreshments for both the annual OEC refresher for instructors and the OEC refresher.
- Confirm the instructors' commitment to teach, their understanding of assigned performance objectives, use of six-pack format, and the need to present their entire assignment at the annual OEC instructor refresher.
- Confirm the commitment of extra personnel.
- Ensure that the refresher facility is prepared (heat, cleanliness, restrooms, furniture, etc.). If you are not using a ski patrol facility, ensure that proper releases are secured with the facility owners.

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### **Annual OEC refresher for instructors (this is not a refresher planning meeting)**

- Verify all refresher knowledge and skill requirements for participating instructors; all instructors must personally complete all refresher objectives and skill requirements.
- Teach or present assigned objectives to fellow instructors.
- Critique and fine-tune presentations with help from the assigned IT.

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### **OEC Refresher**

- Collect the patroller evaluation forms.
- Collect the national or division release forms prior to starting the refresher.

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### **Post Refresher**

- Hold post-refresher meeting with instructor of record, assigned IT, and patrol representative to review the overall refresher.
  - Review the patroller evaluation forms. Make notes for improvements at the 2017 refresher.
  - Forward IT QA form only to [refresher@nspserve.org](mailto:refresher@nspserve.org) and to others as requested/required.
  - Be sure everyone that attended registered themselves online.
  - Complete the online *OEC Refresher Close a Course* process under Course Tools and submit as requested/required within your division.
  - Prior to course closure, download or print a final roster and make additions and deletions and forward to the IT of record. After closing the course, confirm that the IT of record has approved the course closure with the national office. Do not delay submission of records for those requiring additional training.
  - Please make a special effort to complete your documentation in a timely manner.
  - Register a separate course if necessary for remediated OEC technicians.
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**Questions about the 2017 OEC refresher?**

**Contact: [education@nsp.org](mailto:education@nsp.org) or call the NSP Office at 303-988-1111, ext. 2660**

**A special note to the OEC instructor trainer who is assigned to perform QA at an annual OEC refresher**

**It is the responsibility of the OEC IT to engage the instructor of record (IOR) as often as necessary to ensure that the OEC refresher meets all of the objectives of the annual OEC refresher cycle as outlined by the OEC Refresher Committee.**

The IT has the critical responsibility of supporting the IOR and reviewing all of the steps necessary to complete the OEC refresher. Along with reviewing each individual objective to ensure compliance with the program, the IT has the responsibility to make sure that all notifications are made in a timely fashion and that the course is closed within the recommended two-week timeframe after the completion of the course.

The IT should also help to identify instructors who need further development in the delivery of materials using the NSP Instructor Development platform. Instructor reviews need to be documented, and are usually conducted at the request of the region OEC administrator. Please remember that all instructors must be reviewed by an IT for competence at least once every three years as part of the recertification process.

Further, the IT has the responsibility to ensure that any non-OEC instructor who is used to support the OEC refresher is clearly using only *Outdoor Emergency Care Fifth Edition* material during the training exercise. These instructors must be experts in the topic they are covering. Allowing a patroller to review material is not acceptable.

For locations that are using the "hybrid refresher" format, the intention is for the online portion and the workbook to be completed prior to attendance at the skills portion of the refresher. It is the responsibility of the IT to verify that attendees at the skills portion of the refresher have successfully completed the online portion before attending the skills portion; Certificates of Completion or other form of proof of completion (electronic certificate, printed form, etc.) will be requested from the IOR. The IT and IOR must be reasonable in what they ask from a technician that says they have completed the online portion but could not print the certificate. It is reasonable for an IOR and IT to accept someone logging into the online portion and witnessing that all modules of the program have been completed. If there are OEC technicians attempting to attend the skills portion of a hybrid refresher who have not been through or completed the online portion, the IOR and IT must determine if the online portion can be completed by the end of the day. If the technician cannot complete by the end of the day, consideration should be given for that individual to attend a different refresher. An IT and IOR can agree on a different plan, but the IOR and IT have responsibility for ensuring records are turned in promptly. Additionally, ITs should verify that **skills objectives** included in the refresher workbook have been completed.

Instructor trainers should ensure that all evaluations are collected, OEC technician cards are signed for the attendees, and that all attendees are enrolled and listed on the course roster. The IT should ensure that the IOR has a complete list of all attendees from the class enrollment that reflects all attendees at the class. A computer may need to be accessible the day of the event in order to ensure everyone has access and is enrolled in the refresher.

Any OEC technician who has attended an annual refresher, but who does not meet the skills objectives, must successfully complete remedial training and be re-evaluated before they are given credit for course completion. This may or may not be done on the same day as the OEC annual refresher. Further, it is the responsibility of the IOR and IT to ensure that any additional training and completion of the refresher is reviewed and documented.

In the *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A*, there is a copy of the "Skills Checklist;" unfortunately there were several changes (Section 2 and Section 5) in the checklist that did not make it to the copy that went to press. The corrected version of the "2017 OEC Skills Checklist" can be found on the Member Resources page under "Education Resources/OEC" or in this instructor guide. The updated "2017 Skills Checklist," in a singular printed form, is available on the "OEC Instructor Resources" page so you can print just the checklist and not all the other pages. The checklist can now be taken out of the book or printed separately and used as a tool to ensure that all objectives are met during the refresher. The knowledge-based objectives have been accounted for with the completion of the workbook and the online portion of the refresher and are not included in the checklist. It is the responsibility of the IOR and IT to ensure that all other skills objectives have been completed. If a traditional refresher is being offered, all objectives in the Skills Checklist must be covered to meet the requirements of Cycle A, as well as the Knowledge Objectives Checklist in this instructor guide.

ITs are not exempt from the requirements of attending a full OEC refresher and completing the *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A* and meeting all of the requirements of the "2017 Objective and Skills Checklist." An IT must be knowledgeable of all the materials prior to teaching any portion of an OEC refresher if they have not attended a refresher first.

An OEC instructor who has not been refreshed prior to teaching in a refresher must attend a refresher other than the one in which they are teaching. The IOR and IT who are using a subject matter instructor or an OEC instructor who has not attended an OEC refresher prior to teaching at the refresher must be confident that the instructors they use are professionals in their field or are OEC instructors who are updated and reviewed on any topics which they are teaching at the refresher.

Quality assurance is the primary responsibility of the IT. He or she must document all findings on the QA form included in the *Outdoor Emergency Care Refresher Instructor Guide 2017 Cycle A* and send it to the appropriate individuals outlined on the form. **Note:** Be aware ... the numbering on the various modules does not necessarily align; however, all material is covered.

# Complete SAMPLE REFRESHER CYCLE A 2017

The following traditional and hybrid sample refreshers are to help understand what each station should specifically cover. For the traditional refresher, the topics that need to be covered are outlined in the **2017 OEC Refresher Cycle A Knowledge Objectives Checklist** and the **2017 OEC Refresher Cycle A Skills Objectives Checklist** found on pages 28-30 of this instructor guide. The knowledge objectives have reference page numbers and are supported by the Instructor Lesson Guide that can be found on the NSP website after signing in, then selecting “Member Resources” then “Instructor Resources” then OEC Instructors. This new feature will help IORs of traditional refreshers stay focused on the objectives and mirrors the information that is provided with the online portion of the hybrid program. This is a reference and minimum information that needs to be covered to meet all of the knowledge-based objectives in the checklist.

The timeline for completion of the didactic information is dependent on the method of instruction, but should take no longer than three hours to complete throughout the day. The knowledge-based objectives can be all covered at one time at the beginning of the day, or can be broken up into smaller sections and covered with the associated skills stations or a combination of both.

The **Refresher Planning Matrix, 2017 Cycle A** includes both the knowledge-based objectives and the skills objectives broken out into eight sections. These sections follow the format of how the *OEC 5th ed.* is written and can be used as a sample refresher format for anyone using the traditional refresher format.

Integrate into your refresher for all stations:

- Demonstrate how to ensure scene safety, including use of BSI; gloves, safety glasses, face shields, and outer clothing could all be added to stations.
- Demonstrate the management of shock in all scenarios and skills.

Posters are available for support for each station. Posters are located on the NSP website under "OEC Instructor Resources" and are editable to fit your needs. Simply use the posters as set up or move sections around and match them to the refresher set up at your location.

# Sample Traditional Refresher, no online portion: Refresher Cycle A 2017

## Station 1 OEC Basics:

**Knowledge Objectives:** Using mini presentation of guided discussion, review the components of a scene size-up and review the proper use of BSI. Discuss the procedure for selection and use of personal protective equipment.

**Skill objectives:** Demonstrate how to use personal protective equipment and how to do a scene size-up. Demonstrate how to safely put on and remove disposable medical gloves (latex free) and the use of personal protective equipment.

**Skill 1:** In a large bucket or tray, mix boxes of strawberry or cherry gelatin in warm water and stir together so that the gelatin covers all of the water. Have each technician don non-latex examination gloves and put their gloved hands in the mixture to only coat the surface. Ask each technician to remove the gloves without contaminating themselves or others (follow the workbook) and dispose of the gloves appropriately.

**Scenario 2:** In an adjacent area that is out of site lie a patient on the floor next to a bucket with greenish liquid marked Danger and a mop or other cleaning aid nearby. The patient is unconscious the bucket is facing away from the entering patroller. To the right of the patient there is a live electrical cord that has been damaged and wires are exposed. The injured person was shocked and not a victim of the product in the bucket.

Each OEC technician needs to assess the situation and determine scene safety prior to attempting to perform any assessment. The scene must be rendered safe and managed for electrical shock.

## Station 2 Patient Care - Anatomy and Physiology:

**Knowledge Objectives:** Using lecture or guided practice, games etc. review the anatomy and physiology of the respirator system. Review the anatomy and physiology of the cardiovascular system, including the: Blood; Heart and Blood vessels. Review the anatomy and physiology of the integumentary system, the four functions of the skin and review the layers of the skin.

Prior to starting the next skill, review the two parts of the overall assessment process including how to assess pain using the OPQRST mnemonic.

**Skill Objectives:** Demonstrate how to perform a primary assessment and manage the ABCDs. Demonstrate how to perform a secondary assessment and reassessment. Demonstrate how to assess pain using the OPQRST mnemonic.

**Scenario 1:** A 56 year old man or woman is found sitting in on the sidewalk complaining of shortness of breath, pain radiating down the left arm and significant neck and back pain. Each OEC technician must demonstrate how to perform a primary assessment and manage the ABCDs. OPQRST must be used to determine pain assessment for the illness. Pain should be changed for each different OEC technician. Treatment for shock should be included.

**Scenario 2:** A 23 year old was working at the resort and was trying to help load a patron on the chair when he grabbed the side rail. The safety bar bounced and crushed his fingers between the bar and the rail pulling him to the ground. This resulted in pain in his shoulder, hand swelling and tenderness, no distal movement of fingers and some bruising to his face, chest and legs. The OEC technician must complete a secondary assessment and find injuries to each of these locations. The OEC technician must use OPQRST to determine pain assessment for the illness. Pain should be changed for each different OEC technician. Treatment for shock should be included.

## Station 3: Critical Interventions:

**Knowledge Objectives:** Using a small group discussion review shock including:

- The definition of shock;
- The four types of shock; and
- The three stages of shock.

Using a lecture or a game, review the nine causes of altered mental status using the mnemonic AEIOU-TIPS and review how to assess a patient with altered mental status.

**Skill Objectives:** Demonstrate how to prevent and manage shock in different types of patients. Demonstrate the treatment of a patient with altered mental status (e.g. stroke, hypoglycemia).

**Scenario 1:** An athletic looking 45 year old male is found sleeping when the chair gets to the top of the lift. The chair goes around the bull wheel and stops and the man begins to wake up. Upon arrival he is disoriented, does not recognize where he currently is located and has drool running down one side of his face. He seems to be slumping to the same side and is having difficulty trying to raise the safety restraining device with one arm. In a group of not more than three OEC technicians an assessment and treatment of this individual must be completed. The assessment should include the use of any assessment tools and treatment including shock.

**Scenario 2:** An overweight worker had been at the resort all morning and did not eat breakfast. He is found stumbling around and mumbling to himself and not knowing why he is carrying tools outside of the maintenance garage. In a group of not more than three OEC technicians an assessment and treatment must be completed for the worker. His history indicates that he has a family history of diabetes, he is overweight on blood pressure medication and his doctor has warned him about diabetes and increased risk of stroke and heart conditions.

**Scenario 3:** A racer completes his final run for the day and has not eaten all day long. He walks onto the deck and collapses and begins to violently shake; he is striking equipment with sharp edges on the deck. The episode continues for several minutes before you arrive. When the team of no more than three OEC technicians arrive, the person is still groggy, does not understand what happened and feels embarrassed due to the wet area around his genitals and begins to have another episode after staring at a bright light. Perform the proper treatment and assessment as a team.

#### **Station 4:**

**Knowledge objectives: Part 1:** Using props, review the anatomy and physiology of the respiratory system. With questions and answers, or small group discussions, review the following terms: diffusion; dyspnea; and respiration.

Using a chart, review the normal breathing rate for individuals in the following age groups: a. infant, b. child, c. adult.

Using a mini lecture, review the signs and symptoms of the following respiratory emergencies: asthma; COPD; spontaneous pneumothorax; pulmonary embolism; and hyperventilation.

Using a model and student, lead a discussion and review how to clear a patient's airway using the following methods: gravity, finger sweep, and suction. Also review the use of a rigid and flexible suction. Review the use of an oropharyngeal airway and nasopharyngeal airway.

**Part 2:** Using props or video demonstrations review the anatomy and physiology of the cardiovascular system, including the: blood; heart; and blood vessels.

Using a mini presentation or a question and answer session, review the common cause of cardiac arrest in pediatric patients. Review the following: acute myocardial infarction; atherosclerosis; cardiovascular disease; coronary artery disease; pericardial tamponade; and pulmonary embolism. Also review three common cardiac medications.

**Skills Objective:** Demonstrate the selection and insertion of an OPA and NPA. Demonstrate how to assess a patient who is having difficulty breathing. Demonstrate the appropriate treatment of a patient in respiratory distress, including demonstration of O2 setup, delivery devices, selection, and proper use. Demonstrate the proper care of a patient with a cardiovascular emergency, including demonstration of O2 setup, delivery device selection, and proper use.

**Skill 1:** With a manikin, each OEC technician will need to select the proper size and insert an OPA and NPA using SIC or SLIC.

**Scenario 1:** A runner has stopped on the edge of the trail and is sitting with his hands on his knees and has his shoulders arched forward and is struggling for breath. The runner has been having difficulty breathing with the allergens in the air for the past couple of days and says his chest feels full of fluid. Each OEC technician must assess the patient and treat with oxygen by setting up the O2 tank and selecting the appropriate delivery method. Treat for shock.

**Scenario 2:** A 58 year old man has stopped breathing and is in need of immediate intervention. The OEC technician witnessed the collapse outside the patrol room and brought the O2 kit and bag valve mask with them to the scene. In a

team of two assess the situation, set up the oxygen tank and the appropriate delivery device (BVM) treat for shock. The victim is wearing a medical alert tag stating he has a history of heart disease.

#### **Station 5:**

**Knowledge objectives: Part 1:** Using a small group presentation or discussion, review three types of closed soft-tissue injuries. Review the four types of burns. Review the signs and symptoms for each type of burn. Review the clinical significance of a voice change in the setting of a thermal burn. Review how to assess burn severity using the "Rule of Nines" system. Review a dressing and a bandage specific to burns.

**Part 2:** Using a small group discussion and demonstrations or videos, review the two classifications of fractures. Review the signs and symptoms of sprains, strains, dislocations, and fractures. Review specific injuries involving the arm, including the joints. Explain the general management of a patient with a musculoskeletal injury.

**Part 3:** Review common traumatic injuries involving the head, neck, and back using the most current information regarding the specific guidelines for use of spinal immobilization as listed in the 2017 Refresher Workbook. Review the specific guidelines for when a standing takedown might be appropriate to use.

**Skills objectives:** Demonstrate three methods for controlling external bleeding. Demonstrate the proper procedure for applying each of the following (every technician must perform each skill): Dressing; Bandage; Compression dressing; and Tourniquet.

Demonstrate the management of a burn patient. Demonstrate how to maintain proper ***spinal alignment while placing a pediatric patient onto a backboard from a standing position.***

**Scenario 1:** Each OEC technician must perform the following skills: apply a dressing and a bandage. A male was skiing along the edge of the trail and struck a branch causing a large laceration over his upper arm. The male continued to ski to the bottom and went directly to the aid room.

**Scenario 2:** Each OEC technician must apply a pressure dressing. A male was struck in the back of the leg by a runaway snowboard and cut deeply into the lower leg muscle. Bleeding is very strong and dressings and bandage has slowed the bleeding but it will start soon again if not maintaining continuous pressure. Apply a pressure dressing. BSI and shock treatment are required.

**Scenario 3:** A worker was lifting a piston on the groomer when the piston pin released and the worker's forearm was severed and is bleeding profusely. Dressings and bandages are not stopping the bleeding at all and the blood loss is significant. A tourniquet must be applied (use a pipe or balloon to tighten the tourniquet and not a person. A hand-made tourniquet is preferred, but manufactured tourniquets can be used.

**Scenario 4:** A kitchen worker was splattered with grease on their arms and face. Blisters have instantly appeared on the hands and the face has small red spots in multiple locations. After putting out the fire, assess and treat the worker for burns applying dressings and bandages and separating the fingers. Hot oil and water does not mix well so the worker needs to be removed (scene safety), BSI needs to be in place and treatment for shock. Each OEC technician must treat this patient.

**Scenario 5:** An 8-year-old gets off the lift and is struck by the chair in the middle of the back. She feels extreme pain and although standing, says she cannot move. The chair spun her around as it passed. The girl is complaining of tenderness along the spine, cannot feel her feet although she knows she is standing, she cannot walk, and upon palpation you find stepping off of the spinal alignment. As a team, the OEC technicians must assess and conduct an immobilization from the standing position. The chair hit hard enough to knock the helmet off the child.

**Skill 1:** Each OEC technician must lead at least one skill station and participate in all others. In groups of up to five people each of the following skills must be assessed and treated.

- A closed fracture of the wrist with deformity over the bones of the wrist.
- A forearm closed fracture with deformity over both the radius and ulna with no distal compromise.
- An elbow injury with the elbow swollen and hanging straight down by the side of the body. The elbow cannot be bent.
- A shoulder injury where the deformity is to the top and outside of the shoulder socket with the shoulder away from the body as shown in the refresher workbook use of a blanket roll.

- An open humerus fracture as shown in the workbook where the bone is protruding out the posterior side of the arm and the arm is hanging straight down.

**Station 6 Environmental Emergencies and Station 7 Special Populations:**

**Knowledge Objectives: Part 1:** Using mini presentations, demonstration and lecture, review how the body regulates temperature. Review how layering clothing can help preserve body heat. Review the signs and symptoms of cold exposure. Review the signs and symptoms of frostbite. Review afterdrop and explain how to prevent it.

**Part 2:** Using lecture and props, review physiological changes that occur with aging. Review effective methods for communicating with geriatric patients. Describe the effects of the following illnesses and diseases on geriatric patients: cardiovascular and respiratory disease; neurological diseases; gastrointestinal diseases; and altered mental status. Review four trauma considerations that are unique to geriatric patients. Review the general management of geriatric patients.

**Skills Objective:** Demonstrate the assessment and emergency care of a patient with frostbite.

**Scenario 1:** A skier was lost overnight in the woods surrounding the resort and the temperature was 20 degrees. The weather was wet and had changed quickly overnight when the temperature dropped. The next morning the skier was found with no gloves on and the skin was ashen gray on the hands and face. Their feet were numb in the boots and felt like they were one block of ice. Each OEC technician must complete an assessment of the hands, feet and face and determine the proper treatment including use of BSI and treatment for shock.

**Station 8 Case Review:** Open discussion with the group.

**Case 1:**

It's a beautiful evening, and patrons are gathering around your area's nightly bonfire. Families and teens alike are enjoying the warmth of the fire. Folks are roasting marshmallows and making s'mores. Two teens begin horsing around, pushing and shoving each other. Their roughhousing gets a little too physical, they push each other too hard, and they both fall down. Tim falls backward and lands flat on his back, flinging his arms over his head, the back of his right hand lands on the fire. Bill falls to the side, and strikes his right wrist on the edge of his snowboard. They both get up quickly and run into the nearby aid room. Bill suffered a two inch laceration to his wrist; it is bleeding freely. Tim suffered first and second degree burns to the back of his hand. You and a fellow patroller are in the aid room. Each of you assume care of one of the patients.

For each patient, what is your first step?

Tim: Patient #1

Bill: Patient #2

What care do you render?

Tim: Patient #1

Bill: Patient #2

**Case 2:**

It's a busy weekend at Mt. Darby and the terrain park is especially crowded. Jimmy is a very experienced rider. All of the kids are watching him as he hits every rail, jump and terrain feature and beautifully executes every maneuver he attempts. He hits the last table top and does a 360, but miscalculates his landing. He falls forward onto his outstretched arm. You arrive on the scene. What do you do first?

What safety concerns do you have? Unsecured scene presents a hazard for patient and all rescuers and bystanders. Someone else may be injured by unsecured scene.

Your assessment reveals a wrist deformity. What is your treatment plan?

The following is a generic timeline to accomplish a traditional refresher.

**7:00 – 8:00: Sign-in.**

- Pre-assign OEC technicians into five evenly divided teams to facilitate the start of station visits and eliminate unbalanced rotations. These teams will remain together throughout the refresher, and move from station to station.
- Distribute to each participant a copy of the Complete Sample Knowledge and Refresher Skills Checklist (or locally developed participation tracking tool) and a copy of the Cycle A 2017 Refresher Evaluation Form to be completed and turned in at the end of the refresher. Ensure that all participants have signed an activity release form prior to starting the refresher.

**8:00 – 8:30:** Welcome, announcements, overview of refresher goals, and *OEC 5th ed.* objectives.

**8:30 – 8:45:** Five pre-assigned teams of OEC technicians move to the designated individual station location (see table below). For large patrols/groups, stations may need to be replicated to maintain the optimal size of no greater than 12 OEC technicians per team. The preferred ratio of instructors to participants should be no greater than 1:6.

**8:45 – 12:30:** Station rotations. All stations are 75 minutes in length, which includes five minutes to rotate to the next station. Start with teams as assigned. Providing adequate attention to the refresher material will require timely launch of each station's activities, with an orderly and rapid rotation between stations during the five minutes allotted in the schedule. See a detailed description of each station's activities following the table of station assignments.

**12:30 – 1:15:** Lunch (bag lunch or box lunch provided onsite).

**1:15 – 3:45:** Continue station rotations.

**3:45 – 4:00:** Refresher group wrap-up.

**4:00 – 4:15:** Complete and collect participant refresher evaluations.

**4:15 – 4:45:** Assist station takedown and cleanup.

75 minutes includes 70 minutes of performance and 5 minutes of rotation.

<b>Station 1, 2 - 75 min.</b>	<b>Station 3 – 75 min.</b>	<b>Station 4 – 75 min.</b>	<b>Station 5 – 75 min.</b>	<b>Station 6, 7, 8 – 75 minutes</b>
Review knowledge-based objectives (35 minutes)	Review knowledge-based objectives. (30 minutes)	Review knowledge-based objectives. (35 minutes)	Review knowledge-based objectives. (25 minutes)	Review knowledge based objectives and case review 50 minutes
Stations 1: Skill 1 (10 minutes total time) Scenario 2 (10 minutes total time)	Scenario 1 (15 minutes)	Skill 1 (10 minutes)	Scenario 1- 4 (15 minutes)	Scenario 1 (20 minutes)
Stations 2: Scenario 1 (10 minutes)	Scenario 2 (15 minutes)	Scenario 1,2 (30 minutes)	Scenario 5 (15 minutes)	
Station 2: Scenario 2 (10 minutes)	Scenario 3 (15 minutes)		Skill 1 (20 minutes)	

For the hands-on only refresher, the stations would be the same as above, but only include the hands-on skills. Due to the many different ways to handle evaluation of the skills process, there is no set timeline.

Scenarios and skills can be set up as rotations or individual teams sent to different locations and when skills or scenarios are complete they can return to the starting location to be reassigned to another station. This method gets those that are quick at reviewing stations out of the refresher a little faster than others that need remedial training.

## Sample Refresher: Cycle A 201 Hybrid Model (must include online portion)

### Station 1 OEC Basics:

**Skill objectives:** Demonstrate how to use personal protective equipment and how to do a scene size-up. Demonstrate how to safely put on and remove disposable medical gloves (latex free) and the use of personal protective equipment.

**Skill 1:** In a large bucket or tray mix boxes of strawberry or cherry gelatin in warm water and stir together so that the gelatin covers all of the water. Have each technician don non-latex examination gloves and put their gloved hands in the mixture to only coat the surface. Ask each technician to remove the gloves without contaminating themselves or others (follow the workbook) and dispose of the gloves appropriately.

**Scenario 2:** In an adjacent area that is out of site lie a patient on the floor next to a bucket with greenish liquid marked Danger and a mop or other cleaning aid nearby. The patient is unconscious the bucket is facing away from the entering patroller. To the right of the patient there is a live electrical cord that has been damaged and wires are exposed. The injured person was shocked and not a victim of the product in the bucket.

Each OEC technician needs to assess the situation and determine scene safety prior to attempting to perform any assessment. The scene must be rendered safe and managed for electrical shock.

### Station 2 Patient Care- Anatomy and Physiology:

**Skill Objectives:** Demonstrate how to perform a primary assessment and manage the ABCDs. Demonstrate how to perform a secondary assessment and reassessment. Demonstrate how to assess pain using the OPQRST mnemonic.

**Scenario 1:** A 56 year old man or woman is found sitting in on the sidewalk complaining of shortness of breath, pain radiating down the left arm and significant neck and back pain. Each OEC technician must demonstrate how to perform a primary assessment and manage the ABCDs. OPQRST must be used to determine pain assessment for the illness. Pain should be changed for each different OEC technician. Treatment for shock should be included.

**Scenario 2:** A 23 year old was working at the resort and was trying to help load a patron on the chair when he grabbed the side rail. The safety bar bounced and crushed his fingers between the bar and the rail pulling him to the ground. This resulted in pain in his shoulder, hand swelling and tenderness, no distal movement of fingers and some bruising to his face, chest and legs. The OEC technician must complete a secondary assessment and find injuries to each of these locations. The OEC technician must use OPQRST to determine pain assessment for the illness. Pain should be changed for each different OEC technician. Treatment for shock should be included.

### Station 3: Critical Interventions:

**Skill Objectives:** Demonstrate how to prevent and manage shock in different types of patients. Demonstrate the treatment of a patient with altered mental status (e.g. stroke, hypoglycemia).

**Scenario 1:** An athletic looking 45 year old male is found sleeping when the chair gets to the top of the lift. The chair goes around the bull wheel and stops and the man begins to wake up. Upon arrival he is disoriented, does not recognize where he currently is located and has drool running down one side of his face. He seems to be slumping to the same side and is having difficulty trying to raise the safety restraining device with one arm. In a group of not more than three OEC technicians an assessment and treatment of this individual must be completed. The assessment should include the use of any assessment tools and treatment including shock.

**Scenario 2:** An overweight worker had been at the resort all morning and did not eat breakfast. He is found stumbling around and mumbling to himself and not knowing why he is carrying tools outside of the maintenance garage. In a group of not more than three OEC technicians an assessment and treatment must be completed for the worker. His history indicates that he has a family history of diabetes, he is overweight on blood pressure medication and his doctor has warned him about diabetes and increased risk of stroke and heart conditions.

**Scenario 3:** A racer completes his final run for the day and has not eaten all day long. He walks onto the deck and collapses and begins to violently shake, he is striking equipment with sharp edges on the deck. The episode continues for

several minutes before you arrive. When the team of no more than three OEC technicians arrive, the person is still groggy, does not understand what happened and feels embarrassed due to the wet area around his genitals and begins to have another episode after staring at a bright light. Perform the proper treatment and assessment as a team.

#### **Station 4:**

**Skills Objective:** Demonstrate the selection and insertion of an OPA and NPA. Demonstrate how to assess a patient who is having difficulty breathing. Demonstrate the appropriate treatment of a patient in respiratory distress, including demonstration of O2 setup, delivery devices, selection, and proper use. Demonstrate the proper care of a patient with a cardiovascular emergency, including demonstration of O2 setup, delivery device selection, and proper use.

**Skill 1:** With a manikin, each OEC technician will need to select the proper size and insert an OPA and NPA using SIC or SLIC.

**Scenario 1:** A runner has stopped on the edge of the trail and is sitting with his hands on his knees and has his shoulders arched forward and is struggling for breath. The runner has been having difficulty breathing with the allergens in the air for the past couple of days and says his chest feels full of fluid. Each OEC technician must assess the patient and treat with oxygen by setting up the O2 tank and selecting the appropriate delivery method. Treat for shock.

**Scenario 2:** A 58 year old man has stopped breathing and is in need of immediate intervention. The OEC technician witnessed the collapse outside the patrol room and brought the O2 kit and bag valve mask with them to the scene. In a team of two assess the situation, set up the oxygen tank and the appropriate delivery device (BVM) treat for shock. The victim is wearing a medical alert tag stating he has a history of heart disease.

#### **Station 5:**

**Skills objectives:** Demonstrate three methods for controlling external bleeding. Demonstrate the proper procedure for applying each of the following (every technician must perform each skill): Dressing; Bandage; Compression dressing; and Tourniquet.

Demonstrate the management of a burn patient. Demonstrate how to maintain proper ***spinal alignment while placing a pediatric patient onto a backboard from a standing position.***

**Scenario 1:** Each OEC technician must perform the following skills: apply a dressing and a bandage. A male was skiing along the edge of the trail and struck a branch causing a large laceration over his upper arm. The male continued to ski to the bottom and went directly to the aid room.

**Scenario 2:** Each OEC technician must apply a pressure dressing. A male was struck in the back of the leg by a runaway snowboard and cut deeply into the lower leg muscle. Bleeding is very strong and dressings and bandage has slowed the bleeding but it will start soon again if not maintaining continuous pressure. Apply a pressure dressing. BSI and shock treatment are required.

**Scenario 3:** A worker was lifting a piston on the groomer when the piston pin released and the workers forearm was severed and is bleeding profusely. Dressings and bandages are not stopping the bleeding at all and the blood loss is significant. A tourniquet must be applied (use a pipe or balloon to tighten the tourniquet and not a person. A hand-made tourniquet is preferred, but manufactured tourniquets can be used.

**Scenario 4:** A kitchen worker was splattered with grease on their arms and face. Blisters have instantly appeared on the hands and the face has small red spots in multiple locations. After putting out the fire, assess and treat the worker for burns applying dressings and bandages and separating the fingers. Hot oil and water does not mix well so the worker needs to be removed (scene safety), BSI needs to be in place and treatment for shock. Each OEC technician must treat this patient.

**Scenario 5:** An 8 year old gets off the lift and is struck by the chair in the middle of the back. She feels extreme pain and although standing, says she cannot move. The chair spun her around as it passed. The girl is complaining of tenderness along the spine, cannot feel her feet although she knows she is standing, she cannot walk, and upon palpation you find stepping off of the spinal alignment. As a team, the OEC technicians must assess and conduct an immobilization from the standing position. The chair hit hard enough to knock the helmet off the child.

**Skill 1:** Each OEC technician must lead at least one skill station and participate in all others. In groups of up to five people each of the following skills must be assessed and treated.

- A closed fracture of the wrist with deformity over the bones of the wrist.
- A forearm closed fracture with deformity over both the radius and ulna with no distal compromise.
- An elbow injury with the elbow swollen and hanging straight down by the side of the body. The elbow cannot be bent.
- A shoulder injury where the deformity is to the top and outside of the shoulder socket with the shoulder away from the body as shown in the refresher workbook use of a blanket roll.
- An open humerus fracture as shown in the workbook where the bone is protruding out the posterior side of the arm and the arm is hanging straight down.

**Station 6 Environmental Emergencies and Station 7 Special Populations and Station 8 Case Review:**

**Skills Objective:** Demonstrate the assessment and emergency care of a patient with frostbite.

**Scenario 1:** A skier was lost overnight in the woods surrounding the resort and the temperature was 20 degrees. The weather was wet and had changed quickly overnight when the temperature dropped. The next morning the skier was found with no gloves on and the skin was ashen gray on the hands and face. Their feet were numb in the boots and felt like they were one block of ice. Each OEC technician must complete an assessment of the hands, feet and face and determine the proper treatment including use of BSI and treatment for shock.

**Station 8 Case Review:** Open discussion with the group.

**Case 1:**

It's a beautiful evening, and patrons are gathering around your area's nightly bonfire. Families and teens alike are enjoying the warmth of the fire. Folks are roasting marshmallows and making s'mores. Two teens begin horsing around, pushing and shoving each other. Their roughhousing gets a little too physical, they push each other too hard, and they both fall down. Tim falls backward and lands flat on his back, flinging his arms over his head, the back of his right hand lands on the fire. Bill falls to the side, and strikes his right wrist on the edge of his snowboard. They both get up quickly and run into the nearby aid room. Bill suffered a two inch laceration to his wrist; it is bleeding freely. Tim suffered first and second degree burns to the back of his hand. You and a fellow patroller are in the aid room. Each of you assume care of one of the patients.

For each patient, what is your first step?

Tim: Patient #1

Bill: Patient #2

What care do you render?

Tim: Patient #1

Bill: Patient #2

**Case 2:**

It's a busy weekend at Mt. Darby and the terrain park is especially crowded. Jimmy is a very experienced rider. All of the kids are watching him as he hits every rail, jump and terrain feature and beautifully executes every maneuver he attempts. He hits the last table top and does a 360, but miscalculates his landing. He falls forward onto his outstretched arm. You arrive on the scene. What do you do first?

What safety concerns do you have? Unsecured scene presents a hazard for patient and all rescuers and bystanders. Someone else may be injured by unsecured scene.

Your assessment reveals a wrist deformity. What is your treatment plan?

# Refresher Planning Matrix: 2017 Cycle A

(To be completed by the IOR when developing the OEC refresher and made available to the IT for evaluation purposes.)

IOR \_\_\_\_\_ Refresher location \_\_\_\_\_

Patrol/Group participating \_\_\_\_\_ Refresher Date \_\_\_\_\_

Refresher Topics (Chapter Reference)	Objective(s)	Skill Guide (SG) or OEC Skill Number (OECS)	Station Reference Number	General Ideas (Evaluation Notes)
<b>Section 1: OEC Basics</b>	<i>Informational Objectives are in italics</i>			
Rescue Basics (Ch. 3)	<p><i>Review the components of a scene size-up.</i></p> <p>Demonstrate how to do a scene size-up. Review BSI. Demonstrate the use of personal protective equipment.</p>	OECS 3-1: "Removing contaminated gloves."	(All)	
<b>Section 2: Patient Care – Anatomy and Physiology</b>				
Respiratory System (Ch. 6 basics Ch. 13 in-depth)	<p><i>Review the anatomy and physiology of the respiratory system.</i></p>			
Cardiovascular System (Ch. 6 basics Ch. 15 in-depth)	<p><i>Review the anatomy and physiology of the cardiovascular system, including the:</i></p> <ul style="list-style-type: none"> <li>• <i>Blood;</i></li> <li>• <i>Heart; and</i></li> <li>• <i>Blood vessels.</i></li> </ul>			
Integumentary System (Ch. 6 basics Ch. 18 in-depth)	<p><i>Review the anatomy and physiology of the integumentary system.</i></p> <p><i>Review the four functions of the skin.</i></p> <p><i>Review the layers of the skin.</i></p>			
Patient Assessment (Ch. 7)	<p><i>Review the two parts of the overall assessment process.</i></p> <p>Demonstrate how to perform a primary assessment and manage the ABCDs.</p> <p>Demonstrate how to perform a secondary assessment and reassessment.</p> <p>Demonstrate how to assess pain using the OPQRST mnemonic.</p>	<p>OECS 7-2—7-7</p> <p>SG Patient Assessment (p.252)</p> <p>SG Patient Assessment - Trauma Patient (p. 253)</p> <p>SG Patient Assessment -</p>		

		Medical Patient (p. 255)		
<b>Section 3: Critical Interventions</b>				
Shock (Ch. 10)	<p><i>Review shock, including:</i></p> <ul style="list-style-type: none"> <li>• <i>The definition of shock;</i></li> <li>• <i>The four types of shock; and</i></li> <li>• <i>The three stages of shock.</i></li> </ul> <p>Demonstrate how to prevent and manage shock in different types of patients.</p>	<p>OECS 10-1</p> <p>SG Shock Management (p. 351)</p> <p>Do at each station as indicated.</p>		
Altered Mental Status (Ch. 11)	<p><i>Review the nine causes of altered mental status using the mnemonic AEIOU-TIPS.</i></p> <p><i>Review how to assess a patient with altered mental status.</i></p> <p>Demonstrate the treatment of a patient with altered mental status (e.g. stroke, hypoglycemia).</p>			
<b>Section 4: Medical Emergencies</b>				
Airway Management (Ch. 9)	<p><i>Review the anatomy and physiology of the respiratory system.</i></p> <p><i>Review the following terms:</i></p> <ul style="list-style-type: none"> <li>• <i>Diffusion;</i></li> <li>• <i>Dyspnea; and</i></li> <li>• <i>Respiration.</i></li> </ul> <p><i>Review the normal breathing rate for individuals in the following age groups: a. infant, b. child, c. adult.</i></p> <p><i>Review the signs and symptoms of the following respiratory emergencies:</i></p> <ul style="list-style-type: none"> <li>• <i>Asthma;</i></li> <li>• <i>COPD;</i></li> <li>• <i>Spontaneous pneumothorax;</i></li> <li>• <i>Pulmonary embolism; and</i></li> <li>• <i>Hyperventilation.</i></li> </ul> <p><i>Review how to clear a patient's airway using the following methods:</i></p> <ul style="list-style-type: none"> <li>• <i>Gravity;</i></li> <li>• <i>Finger sweep; and</i></li> <li>• <i>Suction.</i></li> </ul> <p><i>Review the use of a rigid and flexible suction catheter.</i></p> <p>Demonstrate the selection and insertion of an OPA and NPA</p>	<p>OECS 9-1</p>		

	<p>Demonstrate how to assess a patient who is having difficulty breathing.</p> <p>Demonstrate the appropriate treatment of a patient in respiratory distress, including demonstration of O2 setup, delivery device selection, and proper use.</p>			
<p>Cardiovascular Emergencies (Ch. 15)</p>	<p><i>Review the anatomy and physiology of the cardiovascular system, including the:</i></p> <ul style="list-style-type: none"> <li>• <i>Blood;</i></li> <li>• <i>Heart; and</i></li> <li>• <i>Blood vessels.</i></li> </ul> <p><i>Review the common cause of cardiac arrest in pediatric patients.</i></p> <p><i>Review the following:</i></p> <ul style="list-style-type: none"> <li>• <i>Acute myocardial infarction;</i></li> <li>• <i>Atherosclerosis;</i></li> <li>• <i>Cardiovascular disease;</i></li> <li>• <i>Coronary artery disease;</i></li> <li>• <i>Pericardial tamponade; and</i></li> <li>• <i>Pulmonary embolism.</i></li> </ul> <p><i>Review three common cardiac medications.</i></p> <p>Demonstrate the proper care of a patient with a cardiovascular emergency, including demonstration of O2 setup, delivery device selection, and proper use.</p>			
<p><b>Section 5: Trauma</b></p>				
<p>Soft-Tissue Injuries (Ch. 18)</p>	<p><i>Review three types of closed soft- tissue injuries.</i></p> <p>Demonstrate three methods for controlling external bleeding.</p> <p>Demonstrate the proper procedure for applying each of the following (every technician must perform each skill):</p> <ul style="list-style-type: none"> <li>• Dressing;</li> <li>• Bandage;</li> <li>• Compression dressing; and</li> <li>• Tourniquet.</li> </ul>	<p>OECS 18-1, 18-2, 18-3, 18-6 – 18-9</p> <p>SG Controlling Bleeding p.574</p>		
<p>Burns (Ch. 19)</p>	<p><i>Review the four types of burns.</i></p> <p><i>Review the signs and symptoms for each type of burn.</i></p> <p><i>Review the clinical significance of a voice change in the setting of a thermal burn.</i></p> <p><i>Review how to assess burn severity using the "Rule of Nines" system.</i></p> <p><i>Review a dressing and a bandage specific to burns.</i></p> <p>Demonstrate the management of a burn patient.</p>	<p>OECS 19-1</p>		

<p>Musculoskeletal Injuries (Ch. 20)</p>	<p><i>Review the two classifications of fractures.</i></p> <p><i>Review the signs and symptoms of sprains, strains, dislocations, and fractures.</i></p> <p><i>Review specific injuries involving the arm, including the joints.</i></p> <p><i>Explain the general management of a patient with a musculoskeletal injury.</i></p> <p>Demonstrate how to assess and treat upper extremity sprains, strains, dislocations and fractures. (Each technician must lead two splints.)</p>	<p>OECS 20-1, 20-2, 20-3, 20-4, 20-5, 20-6, 20-7. 20-8</p> <p>SG pgs. 686, 687, and 688</p>		
<p>Head and Spine Injuries (Ch. 21)</p>	<p><i>Review common traumatic injuries involving the head, neck, and back.</i></p> <p>Demonstrate how to maintain proper <b>spinal alignment while placing a pediatric patient onto a backboard from a standing position.</b></p>	<p>OECS 21-7</p> <p>SG "Immobilizing a Standing Patient" p.737</p>		
<p><b>Section 6: Environmental Conditions</b></p>				
<p>Cold-Related Emergencies (Ch. 25)</p>	<p><i>Review how the body regulates temperature.</i></p> <p><i>Review how layering clothing can help preserve body heat.</i></p> <p><i>Review the signs and symptoms of cold exposure.</i></p> <p><i>Review the signs and symptoms of frostbite.</i></p> <p><i>Review afterdrop and explain how to prevent it.</i></p> <p>Demonstrate the assessment and emergency care of a patient with frostbite.</p>			
<p><b>Section 7: Special Populations</b></p>				
<p>Geriatric Emergencies (Ch. 31)</p>	<p><i>Review physiological changes that occur with aging.</i></p> <p><i>Review effective methods for communicating with geriatric patients.</i></p> <p><i>Describe the effects of the following illnesses and diseases on geriatric patients:</i></p> <ul style="list-style-type: none"> <li>• <i>Cardiovascular and respiratory disease;</i></li> <li>• <i>Neurological diseases;</i></li> <li>• <i>Gastrointestinal diseases; and</i></li> <li>• <i>Altered mental status.</i></li> </ul> <p><i>Review four trauma considerations that are unique to geriatric patients.</i></p>			

	<i>Review the general management of geriatric patients.</i>			
<b>Section 8: Beyond OEC</b>				
Case Presentations Local Needs	Provide opportunities for participation in discussions of the case presentations.			

\*Complete "Skill Guides" with CPIs for all activities can be found at the end of each chapter in the *OEC 5th ed.*

# Station Planning Worksheet: 2017 Cycle A

Use in concert with the Refresher Station Planning Matrix. Duplicate as needed for each station

<p><b>Station:</b> _____</p> <p><b>Station Location:</b> _____</p> <p><b>Topic:</b> _____</p> <p><b>OEC 5th ed. Chapter Reference:</b> _____</p> <p><b>Station Cross Reference?</b> (Does any content of this station overlap with other stations?) If so, where?</p> <p><b>Objectives:</b> (From Refresher Station Planning Matrix).</p>	<p><b>Assigned Instructor(s):</b> _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>Station Resources:</b></p> <p><b>Station Materials:</b> (e.g., tables, chairs, A/V equipment, flipcharts, etc.)</p>
<p><b>Instructional Strategy:</b></p> <ul style="list-style-type: none"><li>___ <b>PG</b> - Group Presentation (not lecture)</li><li>___ <b>GD</b> - Group Discussion</li><li>___ <b>HP</b> - Hands-on-Skill</li><li>___ <b>HS</b> - Hands-on-Scenario</li><li>___ <b>GA</b> - Group Activity or Game</li><li>___ <b>OT</b> - Other (describe)</li></ul>	<p><b>Personnel and Patients:</b> (e.g. instructors, assistants, patients, bystanders, moulage, etc.)</p>
<p><b>Considerations for Integrated Topics:</b></p> <ol style="list-style-type: none"><li>1. Scene safety.</li><li>2. Body substance isolation.</li><li>3. Mechanism of injury/Nature of illness.</li></ol>	<p><b>Equipment Needed:</b> (e.g. backboard, splints, bandages, O2 and adjuncts, skis, snowboards.)</p>

Notes:

**2017 OEC Refresher Cycle A Knowledge Objectives Checklist**

	<b>Reference Page</b>	<b>Instructor Sign-Off</b>
Overall Objectives (to be covered in each station)		
Describe and demonstrate how to ensure scene safety, including use of BSI.	77	
Describe and demonstrate the management of shock.	347-348	
Section 1		
6-5. Identify and describe that fundamental anatomy and physiology (A and P) of the respiratory, cardiovascular, and integumentary systems.	174-175, 176-182 & 195	
13-1. Define the following terms: <ul style="list-style-type: none"> <li>• diffusion</li> <li>• dyspnea</li> <li>• respiration</li> </ul>	408 410 408-410	
13-2. List the major anatomical structures of the lower airway.	410-412	
13-3. Identify the primary muscle of respiration.	411	
13-4. List the accessory muscles of respiration.	411	
13-5. Describe the physiology of breathing.	411-412	
13-6. Compare and contrast normal and abnormal breathing.	412	
13-8. Identify the most common cause of airway obstruction.	413	
13-9. List the signs and symptoms of acute respiratory distress.	418	
13-10. List the signs and symptoms of the following respiratory emergencies: <ul style="list-style-type: none"> <li>• asthma</li> <li>• COPD</li> <li>• spontaneous pneumothorax</li> <li>• pulmonary embolism</li> <li>• hyperventilation</li> </ul>	414 413-414 416 415 414-415	
7-1. Describe the two parts of the overall assessment process	214	
9-3. Describe how to clear a patient's airway using the following methods: <ol style="list-style-type: none"> <li>a. Gravity</li> <li>b. Finger sweep (NO blind sweep, follow current ECC guidelines)</li> <li>c. Suction</li> </ol>	297 297-298 298-299	
9-6. List the indications of and uses for the following airway adjuncts... OPA and NPA	300-304	
Section 2		
10-1. Define shock.	330-331	
10-2. Describe the basic components of the cardiovascular system: <ol style="list-style-type: none"> <li>a. blood</li> <li>b. heart</li> <li>c. blood vessels</li> </ol>	332-334 332 332	
10-5. Compare and contrast the three stages of shock.	335-336	
10-6. List the four types of shock.	336-342	
11-2. List nine causes of altered mental status using the mnemonic AEIOU-TIPS.	360-363	
11-6. Describe how to assess a patient with altered mental status.	372-373	
15-5. List the signs and symptoms for the following cardiovascular disorders: <ul style="list-style-type: none"> <li>• acute myocardial infarction</li> <li>• aortic aneurysm</li> <li>• cardiogenic shock</li> <li>• congestive heart failure</li> <li>• pericardial tamponade</li> <li>• pulmonary embolism</li> </ul>	466-467 469-470 474-475 475 469/475 476	
Section 3		
3-1. Describe how the body regulates temperature.	58-59	
3-2. Describe the four mechanisms of heat exchange.	59-61	
3-5. Describe how layering clothing can help preserve body heat.	65-67	
25-2. List the signs and symptoms of cold exposure.	818	
25-3. List the signs and symptoms of frostbite.	818-819	

25-5. List and explain the three categories of hypothermia related to severity.	820-821	
25-6. Define afterdrop and explain how to prevent it.	820	
Section 4		
18-1. List four functions of the skin.	539-540	
18-2. List the layers of the skin.	540	
18-3. List and describe three types of closed soft-tissue injuries.	542-543	
18-7. Compare and contrast a dressing and a bandage.	553-559	
19-1. List four types of burns.	581-584	
19-2. List the signs and symptoms for each type of burn.	581-584	
19-3. Compare and contrast the methods for classifying burns.	585-586	
19-4. Describe the clinical significance of a voice change in the setting of a thermal burn.	588	
19-5. Compare and contrast direct current and alternating current.	583	
19-6. Describe how to assess burn severity using the "Rule of Nines" system.	590	
Section 5		
20-1.5. Compare and contrast sprain and strain.	612	
20-1.6. Describe two classifications of fractures.	613	
20-1.7. List the signs and symptoms of sprains and fractures.	612-614	
20-1.8. Define the following terms: a. dislocation b. fracture c. sprains	602 610 602	
20-2.3. List specific injuries involving the upper extremity	622-628	
20-3.1. Explain the general management of a person with an MS injury	639-640	
21-3. Describe common traumatic injuries involving the head, neck, and back; including pediatric patients	702	
Section 6		
31-1. Describe six physiologic changes that occur with aging.	987	
31-2. Describe effective methods for communicating with geriatric patients.	1000-1001	
31-3. Describe the effects of the following illnesses and diseases on geriatric patients: • cardiovascular and respiratory disease • neurological diseases • gastrointestinal (GI) diseases • altered mental status	988 988 988 991	
31-4. Describe how the chronic use of medication can affect the results of an assessment of geriatric patients.	993-994	
31-5. List four trauma considerations that are unique to geriatric patients.	996-998	
31-6. Describe the general management of geriatric patients.	1003-1004	
Case Studies	Refresher Workbook	

**2017 OEC Refresher Cycle A Skills Checklist**

	Individual	Group	Instructor Sign Off
Overall Objectives (to be covered in each station)			
Describe and demonstrate how to ensure scene safety, including use of BSI.	x	x	
Describe and demonstrate the management of shock.	x	x	
<b>Section 1</b> Each OEC Technician must perform the following skills			
Describe and demonstrate how to ensure scene safety.	x		
Demonstrate how to safely put on and remove disposable medical gloves-latex free.	x		
Describe and demonstrate how to perform a primary assessment and manage the ABCD's.	x		
Describe and demonstrate how to perform a secondary assessment.	x		
Describe how to assess pain using the OPQRST mnemonic.	x		
<b>Section 2</b> Each OEC Technician must perform the following skills			
Describe and demonstrate three methods for controlling external bleeding.	x		
Demonstrate the proper procedure for applying each of the following:			
Dressing	x		
Bandage	x		
Compression dressing	x		
Tourniquet	x		
Describe and demonstrate the management of a burn patient	x		
Describe and demonstrate the assessment and emergency care of a patient with frostbite.	x		
<b>Section 3</b> Each OEC Technician must perform the following skills			
Demonstrate the proper methods for choosing the correct size and inserting them:			
airway			
Oropharyngeal airway	x		
Nasopharyngeal airway	x		
Describe and demonstrate how to properly set up an oxygen tank for use.	x		
Describe and demonstrate how to assess and treat a patient who is having difficulty breathing (respiratory distress).	x		
Describe and demonstrate the proper care of a patient with a cardiovascular emergency.	x		
<b>Section 4</b> Each OEC Technician must lead one and participate in all others			
Describe and demonstrate how to assess and care for each specific injury:			
Wrist		x	
Forearm		x	
Elbow		x	
Shoulder		x	
Open Humerus		x	
<b>Section 5</b> Each OEC Technician must lead one and participate in all others			
Describe and demonstrate the treatment of a patient with altered mental status.		x	
Demonstrate how to maintain proper spinal alignment while placing a pediatric patient onto a long spine board from a standing position.		x	
<b>Section 6</b> Group			
Case Reviews (one in module 5 and one in module 6)		x	

**NOTE:** In the *Outdoor Emergency Care Refresher Workbook 2017 OEC Cycle A*, there is a copy of the "Skills Checklist;" unfortunately there were a couple of changes in the checklist (Section 4) that did not make it to the copy that went to press. The corrected version of the "2017 OEC Objectives and Skills Checklist" can be found on the Member Resources page under "Education Resources/OEC." The updated "2017 Skills Checklist," in a

singular printed form, is available on the "OEC Instructor Resources" page so you can print just the checklist and not all the other pages. The copy shown above is the corrected copy.

# Case Presentations

## Case Review: One

It's a beautiful evening, and patrons are gathering around your area's nightly bonfire. Families and teens alike are enjoying the warmth of the fire. Folks are roasting marshmallows and making s'mores. Two teens begin horsing around, pushing and shoving each other. Their rough-housing gets a little too physical, they push each other too hard, and they both fall down. Tim falls backward, lands flat on his back, flinging his arms over his head, the back of his right hand lands on the fire. Bill falls to the side, and strikes his right wrist on the edge of his snowboard. They both get up quickly and run into the nearby aid room. Bill suffered a two inch laceration to his wrist; it is bleeding freely. Tim suffered first and second degree burns to the back of his hand. You and a fellow patroller are in the aid room. Each of you assume care of one of the patients.

For each patient, what is your first step?

Tim: Patient #1

Bill: Patient #2

_____	_____
_____	_____
_____	_____

What care do you render?

Tim: Patient #1

Bill: Patient #2

_____	_____
_____	_____
_____	_____

## Case Review: Two

It's a busy weekend at Mt. Darby and the terrain park is especially crowded. Jimmy is a very experienced rider. All of the kids are watching him as he hits every rail, jump and terrain feature and beautifully executes every maneuver he attempts. He hits the last table top and does a 360, but miscalculates his landing. He falls forward onto his outstretched arm. You arrive on the scene. What do you do first? What safety concerns do you have? Your assessment reveals a wrist deformity. What is your treatment plan?

## NATIONAL SKI PATROL SYSTEM EVENT/TRAINING RELEASE FORM

I agree I am voluntarily participating in this EVENT/TRAINING. I understand that the EVENT/TRAINING may involve extensive field work on first aid scenarios, skiing, and toboggan-handling, along with other activities which ski patrollers encounter in their duties of patrolling a ski area. I realize there are inherent risks in this type of activity, including changing weather conditions, changing snow surface conditions, ice, bare spots, rocks, stumps, trees, and the possibility of collisions with manmade and natural objects or other skiers, and such activity can be dangerous and can result in serious injury or death. I knowingly assume the risk of participation and understand I can withdraw from this EVENT/TRAINING at any time. I understand that by participating in this EVENT/TRAINING I may also encounter additional risks not inherent to a normal participant to the sport of skiing. I agree to personally assume all of these risks. I also agree that I will rely solely on my own judgment regarding my personal safety and ability with regard to the terrain, circumstances and conditions in which I may be placed upon and asked to demonstrate or perform to accomplish the tasks involved in EVENT/TRAINING, and that I will decline to perform any activities if I believe I am placing myself in an unsafe situation or subject to possible injury or death if I proceeded.

As a requirement of this EVENT/TRAINING, I acknowledge that I agree to waive any right I might have to file a lawsuit for any injury or death resulting from my participation in this EVENT/TRAINING and I hereby remise, release, and forever discharge the ski area hosting the event, the National Ski Patrol System, Incorporated and its members, both individually and jointly, and I agree that no one else may file a lawsuit in my name related to my participation in this EVENT/TRAINING. If any part of this Release shall be determined to be unenforceable, all other parts shall be given full force and effect.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Participant Name: (printed) \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### ADDENDUM TO RELEASE

The above Participant is less than 18 years of age; the undersigned parent or guardian hereby consents to the above Participant participating in the EVENT/TRAINING and signs this Release on behalf of the Participant.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name: (printed) \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Not part of Release and for record keeping purposes only. To be completed by instructor:

Date: \_\_\_\_\_ Event/Training: \_\_\_\_\_

Location: \_\_\_\_\_



**The following questions are for use by the assigned IT to evaluate the refresher. Please answer all applicable questions. (Attach any additional pages used for your answers and comments.)**

**1.** What type of planning meeting was held in preparation for this event? How far in advance of the refresher was the meeting? Did you attend? \_\_\_\_\_ In-person or electronically (telephone, Skype, etc.)?

**2.** Was an instructor refresher held in preparation for this refresher? Did you attend and/or monitor it? \_\_\_\_\_ If yes, did you attend in-person or via electronic means (Skype, etc.)?

**3.** How was this refresher developed?

\_\_\_\_\_ From the "ground up" in addition to using the "Refresher Planning Matrix."

\_\_\_\_\_ By using the entire sample refresher, or various parts of it.

\_\_\_\_\_ Combination of the above.

\_\_\_\_\_ From scratch, without using any of the refresher planning tools.

**4.** Did the IOR, instructors and participants seem to understand the refresher objectives?

**5.** Were all objectives met? \_\_\_\_\_ If no, please explain why they were not.

**6.** Were there any shortcomings discovered at the refresher? \_\_\_\_\_ If, yes, please mark all that apply.

\_\_\_\_\_ Missed topics? \_\_\_\_\_ Shortage of instructors? \_\_\_\_\_ Equipment failure? \_\_\_\_\_ Other?

If so, what action was taken to remedy them?

**7.** Please comment on the quality and content of the mini-presentations. Were any of them exceptionally good? (Please describe.) Did each presenter involve the entire group in the presentation, as opposed to lecturing to them? \_\_\_\_\_ If no, please specify?

**8.** How was the "Case Review" presented? Was it interactive, thought provoking, and/or generate discussion?

**9.** What audio/visual aids were used in the refresher presentations and stations?

\_\_\_\_\_ Material available from the NSP "Instructor Resources."

\_\_\_\_\_ Slides/PowerPoint presentations.

\_\_\_\_\_ Posters and charts.

\_\_\_\_\_ 3-D models.

\_\_\_\_\_ Other (describe).

Which A/V aids worked well? What did not work well and why?

**10.** Were the relevant objectives, skill guides and/or Critical Performance Indicators available at all stations? \_\_\_\_\_ If no, how was this remedied?

11. Do you feel that there was adequate opportunity for every OEC technician to demonstrate their hands-on skills according to this year's OEC cycle's objectives?

12. Were there any OEC Technicians who needed to go through remediation stations? \_\_\_\_\_ If yes, please comment on how this was handled. (How were these OEC Technicians identified? How was the remediation process presented to the OEC Technician, etc?)

13. Please comment on the quality and availability of equipment used at the refresher and the suitability of the refresher facility.

14. How would you describe the organization of the refresher? Was it well-organized? What recommendations would you make to improve this refresher?

15. What two improvements could be made to the *Instructor Guide*?

1.

2.

16. What two improvements could be made to the *Refresher Workbook*?

1.

2.

The OEC refresher is meant to be a stand-alone event. Were any of the following included as part of the OEC refresher?

\_\_\_\_\_ CPR

\_\_\_\_\_ Chairlift evacuation

\_\_\_\_\_ Patrol administrative business

\_\_\_\_\_ Management concerns or training

\_\_\_\_\_ Other (please describe)

You are now asked to forward this completed form and related refresher documents to the appropriate OEC personnel, as listed below: ATTACH A COPY OF THE SCHEDULE FOR THE REFRESHER YOU ARE REFERRING TO WITH THIS QA FORM. A COPY OF THE SCHEDULE MUST BE SUBMITTED TO THE NATIONAL OFFICE VIA THE EMAIL LISTED BELOW

\_\_\_\_ Copy of QA form sent to patrol representative/IOR.

\_\_\_\_ Copy sent to ROA.

\_\_\_\_ Copy sent to division OEC supervisor.

\_\_\_\_ Copy sent to national office. (Send to [refresher@nspserver.org](mailto:refresher@nspserver.org).)

**THE NATIONAL SKI PATROL**  
**133 S. Van Gordon Street, Suite 100**  
**Lakewood, CO 80228**  
**Phone: 303.988.1111**  
**Fax: 800.222.4754**



## **2017 Cycle A OEC Refresher Committee Statement**

The mission of the OEC Refresher Committee is to provide assistance to all Outdoor Emergency Care technicians so that they may effectively review Outdoor Emergency Care content and skills each year and render competent emergency care to the public they serve. The objectives of the program are to:

- Provide a source of continuing education for all OEC technicians;
- Provide a method for verifying OEC technician competency in OEC knowledge and skills;
- Review the content of the OEC curriculum over a three-year period; and
- Meet local patrol and area training needs in emergency care.

Please take a moment and let us know how we can make your refresher better!

Email the Refresher Committee at [refresher@nspserve.org](mailto:refresher@nspserve.org).

## **2017 OEC REFRESHER COMMITTEE**

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