



**STUDENT INFORMATION  
PACKAGE  
AND  
POLICIES & PROCEDURES**

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**WE CANNOT SUGGEST STRONGLY ENOUGH THAT YOU READ ALL OF THE INFORMATION CONTAINED IN THIS DOCUMENT AS IT CONTAINS ESSENTIAL INFORMATION FOR YOUR SUCCESS DURING THE NUEC 3 TRAINING PROGRAM.**

## **PROGRAM INTRODUCTION**

The Non-Urban Emergency Care Level 3 (NUEC 3) is a training program developed by PEAK and designed for professional (paid and volunteer) non-urban responders such as (but not limited to) ski/bike patrollers, search & rescue technicians and guides who are tasked with providing advanced emergency medical care to clients and/or workers.

The NUEC 3 is a multi-level government accredited training program that meets the criteria as a 110 hour training standard. The program curriculum is in part a synthesis of the baseline knowledge and skills development objectives contained in the following training programs: PEAK's Non-Urban Emergency Medical Responder and Advanced Protocol Training Program, and the Occupational First Aid Level-3 (WorkSafe BC).

The NUEC 3 program certification is recognized by regulatory authorities throughout Canada at the 'Advanced First Aid Training Level' standard. These include (but not limited to) the BC Provincial Emergency Program, the BC Emergency Medical Assistants Licensing Branch (in-part), Alberta Occupational Health and Safety, the Association of Canadian Mountain Guides, Canadian Ski Guides Association and the Canadian Athletic Therapists Association. As well, many BC mountain resorts and search & rescue teams have adopted the NUEC 3 as their preferred first aid qualification for their membership.

Upon successful completion students will receive the following certifications:

- + Non-Urban Emergency Care 3 (NUEC 3)
- + CPR Level 'C' for Healthcare Providers (CPR HCP)
- + Non-Urban Cardiac Arrest Management: AED Protocol (NUCAM)

## **SECTION 1: TERMS AND CONDITIONS OF REGISTRATION**

### **PROGRAM ELIGIBILITY**

Pre-requisites for the NUEC 3 training program are:

- a. Candidates must be a minimum of 19 years of age.
- b. Candidates must have an acceptable level of physical and mental fitness; you will be required to sign a medical self-declaration attesting to such.
- c. Students must speak and write English fluently.
- d. Students are required to obtain the most current (5<sup>th</sup> edition) Outdoor Emergency Care textbook.
- e. Pre-read approximately 40-60 hours; student and specific course dependent.

### **CONDITIONS OF REGISTRATION**

- a. You have obtained or are in the process of obtaining a current OEC textbook.
- b. PEAK reserves the right to alter or cancel any service at any time without notice due to any condition that may impact the safety of both students and staff. This is at the sole discretion of PEAK. PEAK is not responsible to students for non-course related fees, associated costs or expenses incurred by a student(s) as a result of a cancellation of a service by PEAK.
- c. PEAK reserves the right to deny participation to anyone who is deemed unfit, or poses a threat to their safety or to the safety of the other students or staff.
- d. Health related problems or conditions that may affect your participation in this course must be declared to PEAK and cleared by a doctor prior to attending the course.
- e. In the event of an emergency, it is understood that participants are responsible for the costs associated with any medical, rescue or evacuation of themselves.
- f. Audio recording devices and/or the use of cameras during PowerPoint Presentations or lectures are not permitted unless prior authorization of PEAK's Operations Director is obtained.

### **REFUNDS**

**PEAK does not have a student cancellation policy.** In **very exceptional circumstances** students **may** be granted the opportunity to reschedule for an alternate training program. This is solely at the discretion of PEAK's administration. Should PEAK find it necessary to cancel a program a full refund will be made.

### **ATTENDANCE**

Should you not be able to attend a class for any reason it is your responsibility to pick-up the information that you missed; this will not be at the expense of the other students, PEAK or the instructors. Experience has shown that missing classes has a dramatic impact on program success. Should you not attend 100% of the course you may, at the evaluator's discretion, not receive certification until you have attended the missed class(s). Student must attend a minimum of 80% of the classes to receive NUEC 3 certification.

**PUNCTUALITY**

We ask that you avoid being late for class as this practice disrupts the flow of the course and may detrimentally impact not only you but the other students and instructional staff. Should you be late for a class, we request that you not enter the classroom until the next break is taken. This will ensure that there are no unnecessary interruptions or distractions to other students. Instructional staff may at their discretion alter this policy.

**PERSONAL PREPAREDNESS**

The practical component of NUEC 3 courses are approximately 65% which is conducted mainly in the outdoors. Please ensure that you are well prepared for all weather conditions including heat, cold, wind, snow, rain, mud and insects. Many of the course locations have limited eating facilities and we strongly recommend that participants bring food and fluids with them to class.

**PARTICIPATION AND COURSE TIMES**

The NUEC 3 Course is a demanding and intense program that will challenge you mentally and physically. Typically, unless otherwise notified, classes begin at 0800 hrs. and generally end at 1800 hrs. **or until the course day’s objectives have been met.** This may be later or earlier than 1800 hrs. and, because of this, we strongly encourage you to avoid working or attending other courses during the NUEC 3 course as it will likely impact your experience and success in this course. Rest is essential to ensure maximum retention and learning.

**COURSE LOCATIONS**

We typically hold NUEC 3 course(s) at the same locations (see below); however, at times it is necessary to change course locations due to a number of factors. If it is necessary to change a course location you will be notified by email.

<b>BRITISH COLUMBIA</b>		
<b>CITY / TOWN</b>	<b>FACILITY NAME</b>	<b>ADDRESS</b>
Vancouver / Delta	Earthwise	6400 3 <sup>rd</sup> Avenue, V4L 1B1
Fernie	Fernie and District Search & Rescue	102 Commerce Road, V0B 1M5
Golden	Golden and District Search & Rescue	210 Fisher Road, V0A 1H0
Kimberley	Kimberley Alpine Resort	301 Northstar Blvd., V1A 2Y5
Panorama	Panorama Mountain Village	Panorama Mountain, V0A 1T0
Vancouver	Grouse Mountain	6400 Nancy Greene Way, V7R 4K9
<b>ALBERTA</b>		
Lake Louise	Lake Louise Sport & Recreation Centre	101 Village Road, T0L 1E0
Crowsnest Pass	Kanata Inn	11217 21 Ave. Blairmore. T0K 0E0
Crowsnest Pass	Crowsnest Municipal Library	2114 – 127 St., T0K 0E0
<b>WASHINGTON STATE</b>		
Point Roberts	Point Roberts Fire Hall	2030 Benson Road, 98281
Oroville	Oroville Fire Department	1300 Appleway, 98844
Northport	Northport Community Connections Center	405 Center Ave, 99157

## **EVALUATION AND CERTIFICATION**

Please note that registration and participation alone are not guarantees for NUEC 3 certification. The serious nature of pre-hospital care (particularly in the non-urban environment) demands that the evaluation process accurately assesses a candidate's integration of the theoretical information to ensure that practice is initiated safely. NUEC 3 Full and Bridging courses ('courses-of-instruction') students are required to complete exercises, participate in comprehensive lessons with skill and scenario application, achieve a passing grade on a final written evaluation, and demonstrate their skills and knowledge in final practical evaluations incorporating realistic scenarios and skills stations.

## **NUEC 3 CERTIFICATION EVALUATION PROCESS**

The NUEC 3 Evaluation Process entails the following components:

### **+ *Written Evaluation***

Comprised of 100 multiple choice questions.

*Note: Students may request that the written evaluation be conducted orally in the following situations:  
a) the student has an established learning disability; b) English is the student's non-primary language.*

### **+ *Practical Evaluation***

Comprised of a minimum of 4 non-urban based practical scenarios and a minimum of 2 skill stations such as but not limited to; CPR/obstructed airway procedures, minor wound management, airway and oxygen management, splinting, cardiac arrest management, etc.

### **+ *Certification Requirements***

The student must achieve a minimum of 80% on the written component and must demonstrate an acceptable level of competency in the practical component.

### **+ *Evaluation Outcomes***

Students who successfully complete the written component but fail to demonstrate an acceptable level of competency in the practical component must repeat the evaluation process in its entirety. Students who are unsuccessful in the practical and/or the written and practical components are permitted to repeat an NUEC 3 evaluation process one additional time without having to attend an NUEC 3 course-of-instruction. Should a student be unsuccessful on a repeat evaluation the student must then attend an NUEC 3 course-of-instruction before attending a further NUEC 3 Review & Evaluation Course. Conversely, students who fail to achieve an 80% grade on the written component but successfully demonstrate an acceptable level of competency in the practical component are eligible to re-sit the written component under the following terms and conditions:

- 1) Students must have achieved a minimum of 55% on the initial written evaluation. Students who fail to achieve 55% on the initial written evaluation are required to attend an NUEC 3 course-of-instruction prior to re-sitting a successive written evaluation.
- 2) Students must achieve a minimum grade of 85% on the repeat written evaluation. Should a student fail to achieve 85% the student must attend an NUEC 3 course-of-instruction prior to repeating an NUEC 3 evaluation process.
- 3) Students are not permitted to re-sit a written evaluation on the same day that an initial evaluation was taken. Students must re-sit the repeat written evaluation within 30 days from the date of the initial written evaluation. Should a student fail to do so the student must attend an NUEC 3 evaluation process or attend an NUEC 3 course-of-instruction.

## EVALUATION SCORE REVIEW PROCESS

'Score Review' is a provision to students offering additional assurance that operational quality controls in the evaluation process were complete and the scores are accurate. It is an independent confirmation of a student's evaluation score and verification that the multiple choice questions and the simulations approved answer key were used and that they were applied correctly.

Should a student request that a Score Review be conducted they **must** adhere to the following process:

- 1) The student must contact PEAK's administration at 778-899-7325 or via email at ([admin@peakemergencytraining.com](mailto:admin@peakemergencytraining.com)) within 14 days from the date of the evaluation and request that an 'Application for Evaluation Score Review' be sent to them. Students are not to request that a Score Review be conducted through their Instructor(s) or Evaluator(s).
- 2) Once the application is received by the student s/he must complete the application fully and return it to PEAK within 14 days. The application should include:
  - A thorough description of the matter
  - The reasoning as to why the student objects to the Evaluator's decision
  - What outcome the student believes is just
  - Any other pertinent documentation or evidence in support of the review
- 3) Once the application is received by PEAK the following actions will be taken:
  - i) PEAK's administration will ensure that the application has been fully completed.
  - ii) The application is then reviewed by PEAK's Operations Director and the scoring is reviewed for tabulation accuracy. If a tabulation error was made in the student's favour the matter will be handled at this level. If a scoring tabulation error was not made the matter will then be referred to the next level and the application and all pertinent documentation will be forwarded to PEAK's Quality Assurance Director.
  - iii) The application is then reviewed by the Quality Assurance Director who may at their discretion discuss the matter with the student's evaluator(s), instructor(s) and fellow students in an attempt to gather all necessary pertinent information.
  - iv) Once the Quality Assurance Director has completed an inquiry the matter is then reviewed by PEAK's Executive Medical Director who at their discretion may consult with any and all parties including PEAK's Medical Direction & Oversight Team. It is at this stage that a decision is rendered and a remedy established if applicable. The student will receive within 30 days of PEAK's receipt of the application a written explanation of the review decision.
- 4) If the student is not satisfied with the review decision, they may submit to PEAK's Medical Direction & Oversight Team the following information:
  - The reasons as to why the student objects to the review decision
  - What outcome the student believes is just

**NUEC 3 CERTIFICATION MAINTENANCE**

An NUEC 3 Provider **must** attend an Annual Skills Update Course (ASU) **annually**. The ASU system of certification maintenance offers NUEC 3 Providers (Providers) the opportunity to update, renew, and demonstrate competency in required NUEC 3 skills, knowledge, procedures and protocols. It also offers Providers the chance to improve their clinical skills and ensure that their knowledge and skills are kept current.

The ASU system of certification maintenance is divided into 4 distinct Cycles ('A' – 'D'); essentially designed to review the entire course curriculum over a 3-year period. Specifically, Cycles 'A' through 'C' covers one-third of the original NUEC 3 course curricula. Cycle 'D' is a recertification Cycle which contains a formative reassessment process which includes a written and practical re-evaluation.

**Example:**

Initial Certification Date: 01/01/2012

YEAR	DATES	ASU CYCLE	CURRICULUM
1	01/01/2012 – 31/12/2012	<b>A</b>	Annual Skills Update
2	01/01/2013 – 31/12/2013	<b>B</b>	Annual Skills Update
3	01/01/2014 – 31/12/2014	<b>C</b>	Annual Skills Update
4	01/01/2015 – 31/12/2015	<b>D</b>	Recertification Cycle – Formative Reassessment Process - Includes a <u>formative</u> written and practical re-evaluation
5	01/01/2016 – 31/12/2016	<b>A</b>	Annual Skills Update
6	01/01/2017 – 31/12/2017	<b>B</b>	Annual Skills Update
7	01/01/2018 – 31/12/2018	<b>C</b>	Annual Skills Update
8	01/01/2019 – 31/12/2019	<b>D</b>	Recertification Cycle – Formative Reassessment Process - Includes a <u>formative</u> written and practical re-evaluation

**Should a Provider fail to attend an Annual Skills Update Course within any 3-year consecutive period; certification is said to be terminated following the year of the missed Annual Skills Update. To re-establish certification a Provider must attend an NUEC 3 course-of-instruction &/or successfully complete an evaluation process.**



## **SECTION 2: PROGRAM PREPARATION**

### **PRE-PROGRAM PREPARATION – PRIORITY CHAPTERS**

We look forward to instructing you and anticipate a rich, two-way exchange of knowledge and experience. To ensure that your educational experience is as beneficial as possible, you are required to commit the time necessary to fully understand and assimilate the information contained in the OEC 5<sup>th</sup> edition textbook.

**The NUEC 3 course is demanding and fast-paced and requires that students have a thorough knowledge of the theory and a complete command of all of the information contained in the OEC 5<sup>th</sup> edition textbook prior to attending the training sessions.**

It has been our experience that students who have not been successful in this course have not put the time in to study the OEC textbook and the Practical Scenario Evaluation Checklist (pages 15 and 16). To assist you in your pre-course preparation we provide the following table which outlines the chapters in priority (priority 1-4, priority 1 being the highest).

OEC CHAPTER	PRIORITY
1	4
2	4
3	2
4	4
5	2
6	1
7	1
8	2
9	1
10	1
11	1
12	3
13	1
14	2
15	1
16	2
17	2
18	1
19	2
20	1
21	1
22	2
23	1
24	2
25	2
26	3
27	3
28	2
29	3
30	3
31	4
32	3
33	3
34	4
35	4
36	4

## COMMONLY USED ABBREVIATIONS

<b>ABC</b>	Airway, Breathing, Circulation
<b>ACLS</b>	Advanced Cardiac Life Support
<b>AED</b>	Automated External Defibrillator
<b>ALS</b>	Advanced Life Support
<b>AST</b>	Avalanche Skills Training
<b>AVPU</b>	Alert, Verbal, Pain, Unresponsive
<b>A<sub>x</sub></b>	Allergies
<b>BCAS</b>	British Columbia Ambulance Service
<b>Bg</b>	Blood Glucose
<b>BP</b>	Blood Pressure
<b>BPM</b>	Beats Per Minute
<b>BSI</b>	Body Substance Isolation
<b>CAD</b>	Coronary Artery Disease
<b>C/C</b>	Chief Complaint
<b>CMS</b>	Circulation, Motor, Sensory
<b>CNS</b>	Central Nervous System
<b>C/O</b>	Complains Of
<b>COPD</b>	Chronic Obstructive Pulmonary Disease
<b>CPR</b>	Cardio Pulmonary Resuscitation
<b>CSF</b>	Cerebral Spinal Fluid
<b>CVS</b>	Cardiovascular System
<b>D &amp; V</b>	Diarrhea and Vomiting
<b>D<sub>x</sub></b>	Diagnosis
<b>DCAPBLTS</b>	Deformities, Contusions, Abrasions, Punctures and Penetrations, Burns, Lacerations, Temperature, Skin
<b>EHS</b>	Emergency Health Services
<b>EMR</b>	Emergency Medical Responders
<b>EMS</b>	Emergency Medical System
<b>ETA</b>	Estimated Time of Arrival
<b>FBAO</b>	Foreign Body Airway Obstruction
<b>GI</b>	Gastrointestinal
<b>GTN</b>	Nitroglycerin
<b>GRAVIDA</b>	Number of Pregnancies (including miscarriages)
<b>HACE</b>	High Altitude Cerebral Edema
<b>HAPE</b>	High Altitude Pulmonary Edema
<b>HEMPBC</b>	Hazards, Environment, Mechanism of Injury / Nature of Illness, Number of Patients, Body Substance Isolation, Condition of Pt.
<b>H<sub>x</sub></b>	History
<b>H<sub>x</sub>CC</b>	History of Chief Complaint
<b>ICP</b>	Intracranial Pressure

<b>LLS</b>	Looks-Like-Shock
<b>LOC</b>	Level of Consciousness
<b>LOR</b>	Level of Responsiveness
<b>LZ</b>	Helicopter Landing Zone
<b>MI</b>	Myocardial Infarction
<b>MOI</b>	Mechanism of Injury
<b>NOCP</b>	National Occupational Competency Profile
<b>NOI</b>	Nature of Illness
<b>NUEMR</b>	Non-Urban Emergency Medical Responder
<b>N<sub>2</sub>O<sub>2</sub></b>	Nitrous Oxide ( <i>aka</i> Entonox)
<b>OFA</b>	Occupational First Aid
<b>O<sub>2</sub></b>	Oxygen
<b>OPQRST</b>	Onset, Pain and Provocation, Quality, Radiating, Severity, Time
<b>PAS</b>	Person(s) At Scene
<b>PEARL</b>	Pupils Equal and Reactive to Light
<b>PM</b>	Pocket Mask
<b>PPV</b>	Positive Pressure Ventilation
<b>PARA</b>	Number of viable births (>20 weeks)
<b>PRN</b>	As/When Needed
<b>Pt.</b>	Patient
<b>PWD</b>	Pink, Warm, Dry
<b>RBS</b>	Rapid Body Survey
<b>RESP</b>	Respirations
<b>ROSC</b>	Return of Spontaneous Circulation
<b>RR</b>	Respiration Rate
<b>R<sub>x</sub></b>	Medications / Prescriptions
<b>SAMPLE</b>	Signs and Symptoms, Allergies, Medications, Past Medical History, Last Meal, Events Leading Up to the Incident
<b>SAR</b>	Search and Rescue
<b>SCA</b>	Sudden Cardiac Arrest
<b>SOB</b>	Shortness of Breath
<b>SOC</b>	Signs of Circulation
<b>S<sub>P</sub>O<sub>2</sub></b>	Oxygen Saturation
<b>T/S</b>	Temperature / Skin
<b>T<sub>x</sub></b>	Treatment
<b>VF</b>	Ventricular Fibrillation
<b>V/S</b>	Vital Signs
<b>VT</b>	Ventricular Tachycardia
<b>WSBC</b>	WorkSafe BC, <i>formerly</i> Workers Compensation Board of British Columbia (WCB)

## **SECTION 3: PROGRAM POLICY AND PROCEDURES**

### **SAFETY WHILE ON COURSE**

PEAK takes every reasonable step to ensure the safety of our students and staff; however, we recognize that risk is increased whenever students are taken out of the classroom. Notwithstanding this risk, we fully support our students' efforts to develop their individual potential – but only to the extent that doing so does not infringe upon another's freedom to do likewise. PEAK therefore requires that students follow certain guidelines to help ensure a safe and supportive working and learning environment. We also ask that students conduct themselves in a responsible and mature way at all times.

### **SCOPE OF PRACTICE – DEFINITION**

Scope of Practice is a term used by licensing authorities and certifying bodies for various professions that defines the procedures, actions, and processes that are permitted for the licensed or certified individual. The scope of practice is limited to that which allows for specific education and experience, and specific demonstrated competency. Scope of Practice limits for out-of-hospital care providers is an essential part of health care regulation, and ensures safe and effective patient care as well as reduced legal risk for the provider, their employer, and governing body.

### **SCOPE OF PRACTICE – PEAK**

In this Scope of Practice directive, it is understood that those trained by PEAK agree to abide by the protocol practice limitations prescribed in PEAK's training programs, printed manuals, and Medical Direction Quality Management documentation. The provider may not initiate a protocol for which s/he has not been duly trained and certified to practice and/or where their certification is not current.

### **STUDENT CODE OF CONDUCT**

Students are required to agree in writing (*course registration*) for the terms and conditions of the policy as follows:

- a. Seek to ensure my safety and that of those around me at all times.
- b. Behaviour potentially endangering the safety of any individual will not be tolerated.
- c. Behave in a manner respectful of those around me and of the learning environment.
- d. Violence or threats of violence will not be tolerated.
- e. Conduct disruptive of the learning and working environment will not be tolerated.
- f. Communicate in a manner supportive of those around me at all times.
- g. Abusive and/or demeaning treatment of others that creates an intimidating or offensive environment will not be tolerated.
- h. Theft, defacement, or destruction of property will be dealt with by the police.
- i. Participate fully and responsibly in the learning environment.
- j. Impairment by drugs or alcohol during class will not be tolerated.
- k. Practice good personal hygiene.

## DISMISSAL FROM PROGRAM

The following student actions are grounds for immediate course dismissal:

- a. Behaviour posing risk to self or to others.
- b. Physical abuse of PEAK or course host organization’s equipment/property.
- c. Failure to attend 100% of the program may result in your not being permitted to attend the *NUEC 3 Evaluation Process* (Instructor discretion) and therefore not receive NUEC 3 certification. Experience has shown that missing even 10% of instruction typically results in a student being incomplete in the course.
- d. Behaviour that is repetitively disruptive to students and the learning environment. Cell phone use for speaking, texting, emailing or any other form of social media is not permitted during instruction.
- e. Falsification of certification(s), qualification(s) and/or personal information.
- f. Failure to adhere to the student code of conduct.

The PEAK Operations Director will review all student dismissals with the affected student.

## EXITING FROM A COURSE

Should a student need to exit from a course for any reason – including an inability to meet the required competencies – the following procedures shall apply:

- a. The student will address the reason(s) for exiting the course with their Instructor and the course Lead Instructor (if applicable).
- b. Instructors will advise the Operations Director on the students’ status.
- c. The Operations Director will advise the student of their options, namely: Audit future courses until such time as they are prepared to re-enter the program they were enrolled in.

## DISPUTE RESOLUTION

PEAK maintains a dispute resolution policy that is consistent with the BC Private Post-Secondary Education Commission (section 14.1) as follows:

- a. Designated Staff Member
  - The Operations Director will review any disputes or complaints.
- b. Written Submissions
  - All parties involved in the dispute or named in the complaint and/or conflict, will submit in writing to the Operations Director, all pertinent information and details of events leading up to the dispute or complaint.
- c. Review and Investigation
  - Relevant materials will be reviewed and interviews conducted by the Operations Director who will review all information obtained with the Executive Medical Director. A decision will be rendered by both Directors.
- d. Written Decision
  - The decision, with the reasons, will be provided and communicated in writing by the Operations Director to all parties involved in the dispute.

## **PROTECTION OF STUDENT PERSONAL INFORMATION**

- a. All students enrolled in PEAK courses shall be afforded personal information privacy protection and information access compliant with the BC Government PIPA Act and the National PIPEDA Act.
- b. All student packages shall contain the BC Government, Ministry of Management Services brochure, “Guide to the Personal Information Protection Act” (pdf).
- c. All student registration forms shall state the PEAK policy and procedures with respect to student privacy protection and student records access.
- d. All student registration forms shall require student sign-off authority for the collection, use and disclosure of personal information consistent with PIPA and PIPEDA legislation.
- e. All students shall have informed access to the PEAK Policy and Procedures Manual.

## **STUDENT SUPPORT SERVICES**

This policy covers student support services as follows:

- Website Access
- Counseling Services
- Harassment Prevention
- Human Rights Policies

### ***Student Resources***

The ‘Student Resource Area’ of the PEAK website contains reference materials and other essential documents that you may find helpful.

### ***Counseling***

- a. Counseling services will be provided to a student upon request. Fees for this service are the student’s responsibility.
- b. The Instructor can arrange for counseling services through the Operations Director should the student so choose.
- d. In the event the course takes place at a post-secondary institution or corporation, counseling services are to be provided by the institution.

### ***Harassment Prevention***

Harassment prevention measures are incorporated in the student and instructor codes of conduct.

### ***Human Rights***

- a. Students who are employees may take human rights complaints to their employer for remediation.
- b. Students taking a course at a post-secondary institution may have human rights complaints heard under the policies of that institution.

## PRE-COURSE CHECKLISTS

<b>NUEC 3 FULL COURSE</b>	
Have you read this <i>Student Information Package, Policies &amp; Procedures</i> document in its entirety?	<input type="checkbox"/>
Have you acquired a current (5 <sup>th</sup> edition) Outdoor Emergency Care (OEC) textbook? If not, please visit <a href="http://www.bradybooks.com">www.bradybooks.com</a> ; this is solely the student’s responsibility	<input type="checkbox"/>
Have you begun to read and study the OEC textbook?	<input type="checkbox"/>
Have you committed to memory and do you have a firm command of the <i>Practical Scenario Evaluation Checklist</i> (see page 15-16)?	<input type="checkbox"/>
Do you know the course location and start times?	<input type="checkbox"/>

<b>NUEC 3 BRIDGING COURSE</b>	
Have you read this <i>Student Information Package, Policies &amp; Procedures</i> document in its entirety?	<input type="checkbox"/>
Have you acquired a current (5 <sup>th</sup> edition) Outdoor Emergency Care (OEC) textbook? If not, please visit <a href="http://www.bradybooks.com">www.bradybooks.com</a> ; this is solely the student’s responsibility	<input type="checkbox"/>
Have you started to study, at the very minimum, the <i>priority chapters</i> (page 9)?	<input type="checkbox"/>
Have you committed to memory and do you have a firm command of the <i>Practical Scenario Evaluation Checklist</i> (see page 15-16)?	<input type="checkbox"/>
Do you know the course location and start times?	<input type="checkbox"/>



# PRACTICAL SCENARIO EVALUATION CHECKLIST

STUDENT	SCENARIO#	DATE	START	END	<input type="checkbox"/> -EXAM <input type="checkbox"/> -PRACTICE <input type="checkbox"/> -PASS <input type="checkbox"/> -INCOMPLETE
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SCENE SIZE-UP				SQ	TIMES / NOTES	PTS	CPI	SCORE
<b>COMM:</b> <input type="checkbox"/> -DECLARES SELF AT SCENE <input type="checkbox"/> -COMMUNICATES EXACT SCENE LOCATION						1		
<b>H</b>	<input type="checkbox"/> -HAZARDS IDENTIFIED	MITIGATES	<input type="checkbox"/> -X-SKIS/BOARD <input type="checkbox"/> -DELEGATES TASK <input type="checkbox"/> -OTHER			2	☠	
			<input type="checkbox"/> -ACCESS & EGRESS <input type="checkbox"/> -EQUIP. NEEDS <input type="checkbox"/> -WEATHER			1		
<b>E</b>	<input type="checkbox"/> -ENVIRONMENT	CONSIDERS	<input type="checkbox"/> -DETERMINES NEED FOR SPINAL <input type="checkbox"/> -INSTRUCTS NOT TO MOVE			2	☠	
<b>M</b>	<input type="checkbox"/> -MOI / NOI	QUESTIONS	<input type="checkbox"/> -WITNESS(S) & HOLDS <input type="checkbox"/> -STABILIZES HEAD			1		
<b>P</b>	<input type="checkbox"/> -PATIENT(S), NUMBER OF <input type="text"/>	ESTABLISHES	<input type="checkbox"/> -LOR OF EACH PT. <input type="checkbox"/> -RAPID TRIAGES AS REQUIRED			1		
<b>B</b>	<input type="checkbox"/> -BSI / STANDARD PRECAUTIONS	MITIGATES	<input type="checkbox"/> -GLOVES <input type="checkbox"/> -GOGGLES / GLASSES <input type="checkbox"/> -OTHER			2	☠	
<b>C</b>	<input type="checkbox"/> -CONDITION OF PATIENT(S)	OBSERVES	<input type="checkbox"/> -PWD <input type="checkbox"/> -PCD <input type="checkbox"/> -LLS <input type="checkbox"/> -RECOGNIZES OBVIOUS DISTRESS			1		
<b>TOTAL POINTS</b>								<b>/10</b>

PRIMARY ASSESSMENT				SQ	TIMES / NOTES	PTS	CPI	SCORE	
<input type="checkbox"/> -LOR	<input type="checkbox"/> -A	<input type="checkbox"/> -V	<input type="checkbox"/> -P	<input type="checkbox"/> -U				2	☠
<input type="checkbox"/> -DETERMINES PATIENT RELIABILITY						1			
<input type="checkbox"/> -CONSENT	<input type="checkbox"/> -EXPRESSED	<input type="checkbox"/> -IMPLIED	<input type="checkbox"/> -OBTAINED (CHILD)	<input type="checkbox"/> -DENIED/REFUSED				1	
<input type="checkbox"/> -CHIEF COMPLAINT	<input type="checkbox"/> -ESTABLISHED IF POSSIBLE					1			
<b>COMM:</b> <input type="checkbox"/> -CODE DECISION <input type="checkbox"/> -2 <input type="checkbox"/> -3 <input type="checkbox"/> -S <input type="checkbox"/> -A <input type="checkbox"/> -I <input type="checkbox"/> -L <input type="checkbox"/> -E <input type="checkbox"/> -R						1			

UNRESPONSIVE		RESPONSIVE		SQ	TIMES / NOTES	PTS	CPI	SCORE
<b>A</b>	<input type="checkbox"/> -ASSESES EFFECTIVENESS <input type="checkbox"/> -POSITIONS APPROPRIATELY <input type="checkbox"/> -ASSESES GAG REFLEX                               INSERTS: <input type="checkbox"/> -OPA <input type="checkbox"/> -NPA	<b>A</b>	<input type="checkbox"/> -ASSESES EFFECTIVENESS <input type="checkbox"/> -POSITIONS APPROPRIATELY			2	☠	
<b>B</b>	ASSESSES EFFECTIVENESS <input type="checkbox"/> -RATE <input type="checkbox"/> -RHYTHM <input type="checkbox"/> -VOLUME <input type="checkbox"/> -EXPOSES & EXAMINES                               PROVIDES: <input type="checkbox"/> -PPV <input type="checkbox"/> -O <sub>2</sub>	<b>B</b>	ASSESSES EFFECTIVENESS <input type="checkbox"/> -RATE <input type="checkbox"/> -RHYTHM <input type="checkbox"/> -VOLUME <input type="checkbox"/> -EXPOSES & EXAMINES                               PROVIDES: <input type="checkbox"/> -PPV <input type="checkbox"/> -O <sub>2</sub>			2	☠	
<b>C</b>	ASSESSES EFFECTIVENESS <input type="checkbox"/> -RATE <input type="checkbox"/> -RHYTHM <input type="checkbox"/> -VOLUME ASSESSES PULSES <input type="checkbox"/> -RADIAL <input type="checkbox"/> -FEMORAL <input type="checkbox"/> -CAROTID ASSESSES <input type="checkbox"/> -TEMP/SKIN <input type="checkbox"/> -CAPILLARY REFILL <input type="checkbox"/> -CONTROLS OBVIOUS EXTERNAL BLEEDING	<b>C</b>	ASSESSES EFFECTIVENESS <input type="checkbox"/> -RATE <input type="checkbox"/> -RHYTHM <input type="checkbox"/> -VOLUME ASSESSES PULSES <input type="checkbox"/> -RADIAL <input type="checkbox"/> -FEMORAL <input type="checkbox"/> -CAROTID ASSESSES <input type="checkbox"/> -TEMP/SKIN <input type="checkbox"/> -CAPILLARY REFILL <input type="checkbox"/> -CONTROLS OBVIOUS EXTERNAL BLEEDING			2	☠	
<b>CARDIAC ARREST:</b> The priority is to initiate compressions immediately at a ratio of 30:2 (compressions to ventilations) <u>prior to</u> inserting an airway adjunct or delivering ventilations.								
<b>D</b>	<input type="checkbox"/> -LEVEL OF RESPONSIVENESS (GCS) <input type="checkbox"/> -PACKS HEAD <input type="checkbox"/> -MANUAL STABILIZATION <input type="checkbox"/> -RULED-OUT	<b>D</b>	<input type="checkbox"/> -LEVEL OF RESPONSIVENESS (GCS) <input type="checkbox"/> -INSTRUCTS NOT TO MOVE <input type="checkbox"/> -PACKS HEAD <input type="checkbox"/> -MANUAL STABILIZATION <input type="checkbox"/> -RULED-OUT			2	☠	
<b>RBS</b>	<input type="checkbox"/> -EXPOSES & EXAMINES THOROUGHLY <input type="checkbox"/> -INCOMPLETE <input type="checkbox"/> -STABILIZES & SUPPORTS INJURIES <input type="checkbox"/> -MEDIC ALERTS	<b>RBS</b>	<input type="checkbox"/> -EXPOSES & EXAMINES THOROUGHLY <input type="checkbox"/> -INCOMPLETE <input type="checkbox"/> -STABILIZES & SUPPORTS INJURIES <input type="checkbox"/> -MEDIC ALERTS			2	☠	
<b>COMM:</b> <input type="checkbox"/> -# OF PT.S <input type="checkbox"/> -LOR <input type="checkbox"/> -AGE & SEX <input type="checkbox"/> -C/C <input type="checkbox"/> -MOI / NOI <input type="checkbox"/> -ACCESS/EGRESS <input type="checkbox"/> -RESPONDERS <input type="checkbox"/> <input type="checkbox"/> -T-BOG <input type="checkbox"/> -SAGER <input type="checkbox"/> -TRAUMW/ O <sub>2</sub> <input type="checkbox"/> -N <sub>2</sub> O <sub>2</sub> <input type="checkbox"/> -CODE 2/3 <input type="checkbox"/> -LOCATION <input type="checkbox"/> -HELICOPTER <input type="checkbox"/> -LITTER <input type="checkbox"/> -HETS <input type="checkbox"/> -AED / CAM <input type="checkbox"/> -AP DRUGS <input type="checkbox"/> -CODE 4 <input type="checkbox"/> -EMS-GROUND <input type="checkbox"/> -OTHER						1		
<b>TOTAL POINTS</b>								<b>/16</b>

UNRESPONSIVE				SQ	PTS	CPI	SC	RESPONSIVE				SQ	PTS	CPI	SC		
<input type="checkbox"/> -CONTINUOUS PATIENT OBSERVATION THROUGHOUT					2	☠		<input type="checkbox"/> -S <input type="checkbox"/> -A <input type="checkbox"/> -M <input type="checkbox"/> -P <input type="checkbox"/> -L <input type="checkbox"/> -E					2	☠			
<input type="checkbox"/> -S <input type="checkbox"/> -A <input type="checkbox"/> -M <input type="checkbox"/> -P <input type="checkbox"/> -L <input type="checkbox"/> -E <input type="checkbox"/> -N/A					1			<input type="checkbox"/> -O <input type="checkbox"/> -P <input type="checkbox"/> -Q <input type="checkbox"/> -R <input type="checkbox"/> -S <input type="checkbox"/> -T <input type="checkbox"/> -N/A					1				
<input type="checkbox"/> -SPINAL IMMOBILIZATION (PRN)					2	☠		<input type="checkbox"/> -SPINAL IMMOBILIZATION (PRN)					2	☠			
<input type="checkbox"/> -MAINTAINS BODY TEMPERATURE / PREVENTS FURTHER HEAT LOSS					1			<input type="checkbox"/> -MAINTAINS BODY TEMPERATURE / PREVENTS FURTHER HEAT LOSS					1				
<input type="checkbox"/> -PERFORMS CRITICAL INTERVENTIONS & TREATMENTS (PRN)					2	☠		<input type="checkbox"/> -PERFORMS TREATMENTS (PRN)					1				
<b>V/S</b> <input type="checkbox"/> -LOR <input type="checkbox"/> -RESP <input type="checkbox"/> -PULSE <input type="checkbox"/> -BP <input type="checkbox"/> -T/S <input type="checkbox"/> -PUPILS					2	☠		<b>V/S</b> <input type="checkbox"/> -LOR <input type="checkbox"/> -RESP <input type="checkbox"/> -PULSE <input type="checkbox"/> -BP <input type="checkbox"/> -T/S <input type="checkbox"/> -PUPILS					2	☠			
<input type="checkbox"/> -CONDUCTS A THROUGH DETAILED PHYSICAL (IF APPROPRIATE)					2	☠		<input type="checkbox"/> -CONDUCTS A THROUGH DETAILED PHYSICAL (IF APPROPRIATE)					1				
TRANSPORT DECISION: <input checked="" type="checkbox"/> -UNSTABLE-RTC					2	☠		TRANSPORT DECISION: <input type="checkbox"/> -UNSTABLE-RTC <input type="checkbox"/> -STABLE					1				
<b>TOTAL POINTS</b>								<b>/14</b>	<b>TOTAL POINTS</b>								<b>/11</b>

☠ = CRITICAL PERFORMANCE INDICATOR; required skill &/or action that must be performed.



**2° RESPONSE:** -BSI -MOI/NOI -#PT.S -LOR -INJURY/ILLNESS -C-SPINE? -RTC? -DELEGATION -Tx T: \_\_\_\_\_

<b>TREATMENTS</b>		CPI	YES NO	NOTES
<b>AIRWAY MANAGEMENT:</b>	<input type="checkbox"/> -N/A <input type="checkbox"/> -OPA/NPA <input type="checkbox"/> -SUCTION	☒		
<b>BREATHING MANAGEMENT:</b>	<input type="checkbox"/> -N/A <input type="checkbox"/> -POCKET MASK <input type="checkbox"/> -O <sub>2</sub> <input type="checkbox"/> -BVM <input type="checkbox"/> -NRB <input type="checkbox"/> -S <sub>2</sub> O <sub>2</sub>	☒		
<b>CIRCULATION MANAGEMENT:</b>	<input type="checkbox"/> -N/A <input type="checkbox"/> -DIRECT PRESS <input type="checkbox"/> -INDIRECT PRESS <input type="checkbox"/> -TOURN <input type="checkbox"/> -CPR	☒		
<b>SPINAL MANAGEMENT:</b>	<input type="checkbox"/> -N/A <input type="checkbox"/> -RULED-OUT <input type="checkbox"/> -CMS <input type="checkbox"/> -CERVICAL COLLAR <input type="checkbox"/> -BOARD/CLAMSHELL	☒		
<b>FRACTURE MANAGEMENT:</b>	<input type="checkbox"/> -N/A <input type="checkbox"/> -CMS <input type="checkbox"/> -SPLINT <input type="checkbox"/> -MANUAL TRACTION <input type="checkbox"/> -PELVIC BINDING			
<b>SHOCK MANAGEMENT:</b>	<input type="checkbox"/> -N/A <input type="checkbox"/> -BLANKET <input type="checkbox"/> -SUPINE POSITIONING <input type="checkbox"/> -O <sub>2</sub> <input type="checkbox"/> -LEGS RAISED	☒		
<b>ADVANCED PROTOCOLS</b>	<input type="checkbox"/> -N <sub>2</sub> O <sub>2</sub> <input type="checkbox"/> -SAGER <input type="checkbox"/> -EPI/BEN <input type="checkbox"/> -SALBUTAMOL <input type="checkbox"/> -NITRO/ASA <input type="checkbox"/> -AED			
<b>OTHER MANAGEMENT:</b>	<input type="checkbox"/> -N/A _____			
<b>POSITIONING:</b>	<input type="checkbox"/> -SUPINE <input type="checkbox"/> -ROTHBERG <input type="checkbox"/> -SEMI-FOWLER <input type="checkbox"/> -TRENDELENBURG <input type="checkbox"/> -HIGH-FOWLER <input type="checkbox"/> -HAINES			
<b>TRANSPORT POSITIONING:</b>	<input type="checkbox"/> -N/A <input type="checkbox"/> -SUPINE <input type="checkbox"/> -3/4 <input type="checkbox"/> -SITTING <input type="checkbox"/> -SEMI-SITTING <input type="checkbox"/> -SUPINE/LATERAL <input type="checkbox"/> -UP <input type="checkbox"/> -DOWN			<b>TRANSPORT INTERVAL:</b> T: _____

<b>ON-GOING ASSESSMENT</b>		CPI	YES NO	NOTES
<b>PATIENT OBSERVATION:</b>	<input type="checkbox"/> -LOR <input type="checkbox"/> -ABCDs <input type="checkbox"/> -REASSESS AFTER MOVING PATIENT			
<b>VITAL SIGNS:</b>	<input type="checkbox"/> -3-5 MIN (UNSTABLE) or <input type="checkbox"/> -10-15 MIN (STABLE)			2° _____ 3° _____
<b>TREATMENT:</b>	<input type="checkbox"/> -ASSESS & ADJUST AS NECESSARY			
<b>COMMUNICATIONS:</b>	<input type="checkbox"/> -RESPONDERS <input type="checkbox"/> -DISPATCH <input type="checkbox"/> -EMS <input type="checkbox"/> -PATIENT			
<b>REPORT TO EMS:</b>	<input type="checkbox"/> -LOR <input type="checkbox"/> -AGE <input type="checkbox"/> -SEX <input type="checkbox"/> -O/C <input type="checkbox"/> -INJURIES FOUND <input type="checkbox"/> -MOI/NOI <input type="checkbox"/> -V/S OFFERED <input type="checkbox"/> -INTERVENTIONS MADE			<b>END TIME:</b> T: _____

<b>MANAGEMENT SKILLS</b>	
<b>DECISION MAKING:</b>	<input type="checkbox"/> -PROBLEMASSESSMENT <input type="checkbox"/> -PT. ASSESSMENT <input type="checkbox"/> -APPROPRIATE PRIORITIZATION <input type="checkbox"/> -ENSURES OVERALL SAFETY
<b>PROBLEM MANAGEMENT:</b>	<input type="checkbox"/> -ACTION PLAN <input type="checkbox"/> -ANTICIPATION <input type="checkbox"/> -RESOURCE MGMT. <input type="checkbox"/> -SKILL PERFORMANCE <input type="checkbox"/> -TRANSPORTATION
<b>LEADERSHIP:</b>	<input type="checkbox"/> -ATTITUDE <input type="checkbox"/> -ABILITY TO DIRECT <input type="checkbox"/> -CONFIDENCE <input type="checkbox"/> -TEAM INTERACTION

**DEBRIEF NOTES**

1) HOW DO YOU THINK YOU DID OVERALL?

2) IN RETROSPECT, ARE THERE THINGS YOU WOULD HAVE LIKED TO HAVE DONE DIFFERENTLY?

3) ARE YOU READY TO BE EVALUATED?

<b>RESULTS OF EVALUATION</b>							
	CRITERIA	SCALE					TOTAL
	PARTICIPATION (10%)	1	2	3	4	5	____ (x2)
	TEAM INTERACTION (15%)	1	2	3	4	5	____ (x3)
	LEADERSHIP (20%)	1	2	3	4	5	____ (x4)
	SCENARIO MANAGEMENT (25%)	1	2	3	4	5	____ (x5)
	OBSERVABLE KNOWLEDGE (30%)	1	2	3	4	5	____ (x6)
<b>TOTAL</b>							____ /100
I hereby agree with the facts stated on this evaluation & I confirm that it accurately reflects my performance as demonstrated during this evaluation scenario.							
Student's Signature _____							