

Core Knowledge Objectives

The Wilderness First Aid program is an objectives-driven, skills-based program. Upon completion of this program, a student must have demonstrated adequate core knowledge and skill ability. While core knowledge and skill objectives are listed for each topic, only the objectives necessary to meet the 16-hour course requirement are listed here. Additional objectives will apply and more training time is required when optional topics are added.

Core Knowledge Objectives

| Wilderness First Aid |
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| METHOD: Instructor-led lecture/group discussion and/or self-instruction (DVD-video/computer resident/web-based) |
| 1. Articulate all course goals, requirements, and resources. |
| 2. Define wilderness first aid. |
| 3. Describe the difference between wilderness first aid and standard first aid. |
| 4. Describe the importance of immediately establishing control of the scene. |
| 5. Describe the importance of establishing a safe scene including checking for hazards and standard precautions. |
| 6. Define mechanism of injury (MOI) and describe why it is important as a factor in patient assessment. |
| 7. Discuss the importance of a hands-on physical exam.. |
| 8. Discuss the importance of vital signs and their changes over time.. |
| 9. Discuss the importance of a taking a patient history. |
| 10. Discuss how to take a history.. |
| 11. Discuss the importance of documentation. |
| 12. Define shock and discuss briefly the stages of shock. |
| 13. List the signs and symptoms of shock and describe the patient in which shock may be a potential threat to life. |
| 14. Describe situations that would require an evacuation versus a rapid evacuation of a patient showing signs and symptoms of shock. |
| 15. Define serious bleeding. |
| 16. Define abrasion, laceration and blister |
| 17. Define and describe the treatment for chafing. |
| 18. Describe the signs, symptoms and treatment of wound and skin infections. |
| 19. Describe personal and camp hygiene and their role in prevention of skin infections. |
| 20. Describe how some wounds and wound infections could be prevented. |
| 21. Describe situations that would require an evacuation versus a rapid evacuation of a patient with a wound. |
| 22. Define superficial, partial-thickness and full-thickness burns. |
| 23. Define strain, sprain, fracture and dislocation. |
| 24. List the signs and symptoms of a strain, sprain, fracture and dislocation. |
| 25. Define RICE (rest, immobilize, cold and elevate) and describe its use. |
| 26. Describe the emergency treatment for angulated fractures and open fractures |

Core Knowledge Objectives cont.

| <i>Wilderness First Aid</i> |
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| 27. Describe the long-term care for injuries to bones and joints. |
| 28. Describe how to prevent some bone and joint injuries. |
| 29. Describe situations that would require an evacuation versus a rapid evacuation of a patient with a bone or joint injury |
| 30. List the signs and symptoms of a closed head injury and a skull fracture. |
| 31. Describe the emergency treatment of and long-term care for a head injury. |
| 32. Describe how some head injuries could be prevented. |
| 33. List the most common mechanisms of injury for spinal trauma. |
| 34. List the signs and symptoms of spinal injury. |
| 35. Discuss the importance of proper lifting and moving of patients. |
| 36. Describe how some spinal injuries could be prevented. |
| 37. Describe situations that would require an evacuation versus a rapid evacuation of a patient with a head or spine injury. |
| 38. Define and describe treatment for common medical problems related to ears, nose and teeth. |
| 39. Describe situations that would require an evacuation versus a rapid evacuation of a patient with an eye or facial injury. |
| 40. Describe the emergency treatment of and long-term care for: a. Fractured rib/fractured clavicle b. Pneumothorax c. Flail chest d. Tension pneumothorax e. Open pneumothorax |
| 41. Describe the care for an impaled object |
| 42. Describe situations that would require an evacuation versus a rapid evacuation of a patient with a chest or abdominal injury. |
| 43. Define heat exhaustion, heat stroke and hyponatremia. |
| 44. List the signs and symptoms of heat exhaustion, heat stroke and hyponatremia. |
| 45. Describe the emergency treatment of and long-term care for heat exhaustion, heat stroke and hyponatremia. |
| 46. Describe the prevention of heat illnesses. |
| 47. Describe situations that would require an evacuation versus a rapid evacuation of a patient with a heat illness. |
| 48. Describe the mechanisms of heat loss versus heat gain. |
| 49. Define hypothermia. |
| 50. List the signs and symptoms of mild and severe hypothermia. |
| 51. Describe the prevention of hypothermia. |

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| <i>Wilderness First Aid</i> |
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| 52. Describe situations that would require an evacuation versus a rapid evacuation of a patient with hypothermia. |
| 53. Describe briefly the general sequence of events at a submersion (drowning) incident. |
| 54. Describe the safest and most efficient means of removing a submersion victim from the water. |
| 55. Describe the emergency treatment of and long-term care for a drowned patient. |
| 56. Describe how to prevent some drowning incidents. |
| 57. Describe situations that would require an evacuation versus a rapid evacuation of a victim of a submersion accident. |
| 58. Define altitude illnesses including acute mountain sickness (AMS), high altitude cerebral edema (HACE) and high altitude pulmonary edema (HAPE). |
| 59. List the signs and symptoms of AMS, HACE and HAPE. |
| 60. Describe the emergency treatment of and long-term care for AMS, HACE and HAPE. |
| 61. Describe the prevention of AMS, HACE and HAPE, including, briefly, the process of acclimatization. |
| 62. Describe situations that would require an evacuation versus a rapid evacuation of a patient with altitude illness. |
| 63. Describe how lightning can cause injury and/or death. |
| 64. Describe the emergency treatment of and long-term care for lightning-induced injuries including respiratory arrest and cardiac arrest. |
| 65. Describe the prevention of a lightning-induced injury and/or death. |
| 66. Describe situations that would require an evacuation versus a rapid evacuation. |
| 67. Describe the basics of an allergic response and its treatment and prevention. |
| 68. Define and list the signs and symptoms of anaphylaxis. |
| 69. Describe the function of epinephrine and describe conditions under which an injection of epinephrine will be considered. |
| 70. Describe the use of EpiPen® and Twinject® epinephrine injections systems. |
| 71. Describe the function of oral antihistamines in anaphylaxis, and discuss when and how much will be used. |
| 72. Describe how some allergic reactions including anaphylaxis could be prevented. |
| 73. Describe situations that would require an evacuation versus a rapid evacuation of a patient with allergic reaction or anaphylaxis. |
| 74. Define common medical emergencies including respiratory problem, gastrointestinal illness, diabetic problem, seizures, and heart attack and their signs and symptoms. |
| 75. Describe the role that personal and camp hygiene play in prevention of abdominal problems. |
| 76. Describe situations that would require an evacuation versus a rapid evacuation of a person experiencing a medical emergency. |
| 77. Describe the contents and uses of the contents of an adequate wilderness first aid kit based on size of group, duration of trip, destination of trip and time of year of trip. |

Core Skill Objectives

| Wilderness First Aid |
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| METHOD: Physical skill demonstration by student in classroom assessed by authorized Instructor. |
| 1. Demonstrate how to perform an initial assessment including assessing airway, breathing, circulation, disability and the environment (ABCDE). |
| 2. Demonstrate a physical exam on a patient. |
| 3. Demonstrate how to take a set of vital signs including level of response (LOR); heart rate, rhythm and quality (HR); respiratory rate, rhythm and quality (RR); and skin color, temperature and moisture (SCTM). |
| 4. Demonstrate taking a patient history by asking questions related to symptoms, allergies, medications, pertinent medical history, last intake and output, and events surrounding the incident (SAMPLE). |
| 5. Demonstrate documentation in written and verbal form using information gathered via the subjective, objective, assessment and plan (SOAP) format. |
| 6. Demonstrate the emergency treatment of and describe the long-term care for a patient in shock. |
| 7. Demonstrate control of bleeding including direct pressure, packing the wound and tourniquets. |
| 8. Demonstrate wilderness treatment, including the use of improvisation, for each bleeding control technique. |
| 9. Demonstrate proper wound-cleaning techniques, including pressure irrigation, scrubbing and rinsing. |
| 10. Demonstrate the proper management of superficial, partial-thickness and full-thickness burns in short- and long-term settings. |
| 11. Demonstrate a field assessment for injuries to bones and joints. |
| 12. Demonstrate and/or describe the emergency treatment, including the use of improvisation, for strains and sprains. |
| 13. Demonstrate and/or describe the emergency treatment, including the use of improvisation, for fractures and dislocations, including realignment of fingers, toes, patella and shoulder |
| 14. Demonstrate a field assessment for injuries to the head. |
| 15. Demonstrate a field assessment for injuries to the spine. |
| 16. Demonstrate a one-rescuer roll from back to side, side to back, and facedown to back with placement of a protective pad underneath the patient. |
| 17. Demonstrate a two- and three-rescuer roll from back to side, side to back, and facedown to back with placement of a protective pad. |
| 18. Demonstrate body elevation and movement (BEAM) of a patient. |
| 19. Demonstrate a field assessment of a patient with a chest or abdominal injury. |
| 20. Demonstrate the emergency treatment of and describe the long-term care for mild and severe hypothermia. |
| 21. Demonstrate the emergency treatment of and describe the long-term care for common medical emergencies including a patient having a respiratory problem, gastrointestinal illness, diabetic problem, seizures, and heart attack. |
| 22. Demonstrate an adequate response, in several scenarios, to one or more patients who are acting ill or injured and who will require an assessment, treatment (if possible) and a decision concerning evacuation. |