COUNTY OF SAN LUIS OBISPO HEALTH AGENCY



Public Health Department Emergency Medical Services Agency



Jeff Hamm Health Agency Director Penny Borenstein, M.D., M.P.H. Health Officer

MEMO

December 31, 2013

To: All SLO County BLS Providers and Training Coordinators

From: Heather Tucker, EMS Specialist

Subject: Training Materials for New BLS Skills and Commercial Tourniquets

Attached to this packet you will find training materials for the new BLS Skills that go into effect on January 1, 2014.

There are skills sheets for **Pulse Oximetry** and **Aspirin (ASA) Administration** as well as a short quiz for ASA administration. We are asking that your EMT personnel receive training within their current certification period and submit proof of completed training to the EMSA when applying for recertification. Individual training records will be required as this is the responsibility of the individual EMT. Please do not submit agency training rosters but issue certifications of training and/or have your personnel retain copies of completed skills sheets and/or exams.

***Only EMTS that have completed this training may operate under, "BLS Optional Scope" in the protocols. ***

Please ensure that your Patient Care Reports include a space for including documentation of Pulse Oximetry readings.

Additionally, survey results from the commercial tourniquet "survey monkey" assessment shows that only 4 local providers are carrying a commercial tourniquet and that there is still training to be completed on their use. Attached is a word document with options for training materials for each of the approved commercial tourniquets as well as a skill sheet (for the C-A-T tourniquet) that can be revised for the tourniquet you have.

Please direct any questions or concerns to the EMSA.

Pulse Oximetry

Candidate Name	Date
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	Points	Points
	Possible	Awarded
Clean patients finger if soiled and/or remove nail polish as necessary	1	
Place probe on clean finger	1	
Turn on the pulse oximeter	1	
Note reading on the LED display	1	
Palpate the radial pulse to ensure that it correlates with the pulse rate on the	1	
LED display of the pulse oximeter		
Verbalizes documentation of findings on PCR	1	
Passing score is 5 (at least 80%)	6	

of Attempts ____ PASS/FAIL

Evaluator Name: ______

Printed

Signature

Aspirin Administration

Candidate Name Date

	Points	Points
	Possible	Awarded
Takes or verbalizes appropriate standard precautions	1	
Administers oxygen to the patient	1	
Obtains history (Onset, Provocation, Quality, Radiation, Severity, Time)	1	
Obtains history (Signs/symptoms, allergies, medications, last oral intake, events	1	
Obtains vital signs (R, P, B/P, pupils, skin)	1	
*Rechecks to ensure patient is not allergic to aspirin	1	
Asks if patient has already taken aspirin for this event	1	
*Checks medication for expiration date	1	
Administers medication appropriately, assuring patient chews the aspirin	1	
Verbalizes reassessment of patient	1	
Verbalizes appropriate documentation of aspirin administration on PCR	1	
Passing score is 9 (at least 80%)	11	

of Attempts ____ PASS/FAIL

*Critical Fail Criteria

____Failure to ensure patient is not allergic to the medication

____Failure to check medication date for expiration

Evaluator Name: ______

Printed

Signature

ASPIRIN

Classification:	Nonsteroidal anti-inflammatory (anti anti-inflammatory).	i-thrombotic, analgesic, antipyretic,	
Action:	 Inhibits prostaglandin synthesis Irreversibly inactivates the enzyr platelets 	ne cyclooxygenase in circulating	
Indications:	Aspirin administration should be considered for any complaint of suspected cardiac origin regardless of chest pain.		
Contraindications:	 Anaphylaxis to aspirin or other salicylates Patients who have a known hypersensitivity/prior allergic reaction to Aspirin, Ibuprofen, Naproxen, or other non-steroidal anti- inflammatory drugs. 		
Adverse Effects:	Respiratory Bronchospasm Asthma like symptoms Other Skin rash Anaphylaxis Prolonged bleeding	Gastrointestinal Nausea/vomiting Gastric upset GI bleeding Potentiation of peptic ulcer	
Administration:	ADULT DOSE 162 mg of non-enteric coated tablets	chewed and swallowed	

Notes:

- The patient should be advised to chew the tablets prior to swallowing.
- Aspirin may increase the risk of bleeding especially when combined with anticoagulants and thrombolytic therapy.



San Luis Obispo County BLS Optional Scope

Aspirin Administration Quiz

- 1. Aspirin is classified as all of the following EXCEPT:
 - a. anti-inflammatory
 - b. analgesic
 - c. antipyretic
 - d. antiemetic
 - e. antiplatelet agent
- 2. Aspirin is indicated, per SLO County Policy, for:
 - a. crushing chest pain with a systolic blood pressure greater than 100
 - b. any complaint of pain as long as they are not allergic to aspirin
 - c. any complaint of suspected cardiac origin regardless of chest pain
 - d. chest pain not relieved with their own Nitroglycerin
- 3. The correct dose of Aspirin according to SLO County Policy is:
 - a. 81 mg of non-enteric coated chewable tablets
 - b. 162 mg of enteric coated tablets
 - c. 162 mg of non-enteric coated chewable tablets
 - d. 324 mg of non-enteric coated chewable tablets
- 4. List 2 contraindications to Aspirin administration:
- 5. List 4 adverse effects to Aspirin administration:

SLO County Approved Tourniquets

Training Information

SOF-T Training Video:

http://www.tacmedsolutions.com/store/Products_Detail.php?ProductID=1

C-A-T Training Pamphlet:

http://combattourniquet.com/wp-content/uploads/2012/06/RAW-23110-INSTR-CAT-US-CRI.pdf

C-A-T Tourniquet Videos and Training Presentations:

http://combattourniquet.com/videos/

MAT Tourniquet Training Presentation:

http://www.pyng.com/wp/wp-content/uploads/2011/02/PM-087b%20MAT%20Training%20PowerPoint%20Presentation.pdf

Tourni-Kwik 4 (TK4 & TK4L) Tourniquet Training Video:

http://www.youtube.com/watch?v=LLUEWWTWoyc

Commercial Tourniquet Application

For the C-A-T

Candidate Name	Date
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	Points	Points
	Possible	Awarded
Slid the wounded extremity through the loop of self-adhering band or wrapped around the extremity	1	
Positioned the tourniquet above the simulated wound site; left at least 2 inches of uninjured skin between the tourniquet and the wound site	1	
Twisted the windlass rod until the distal pulse was no longer palpable	1	
Locked the rod into place	1	
Grasped the windless strap, pulled it tight and adhered it to the Velcro on the windlass clip	1	
Verbalizes documentation of placement time on the tourniquet device	1	
Passing score is 5 (at least 80%)	6	

of Attempts ____ PASS/FAIL

Evaluator Name: _____

Printed

Signature