



UN Buddy First Aid Course (UNBFAC)

# Student Handbook



United Nations

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# INTRODUCTION

This workbook is designed to help the United Nation Buddy First Aid Student in attending the casualty and preventing the deterioration of the patient within the remit of the UNBAFC trained rescuer.

The treatment pictograms are designed around the 'MARCH' system of casualty care.

- M – Massive Bleed**
- A – Airway**
- R – Respiration**
- C – Circulation**
- H – Heat/Cold Injuries**

This handbook will assist the student in achieving a positive outcome for the casualty. It is to be used in treating injuries to the casualty in the immediate period following the incident; these will be the most life-threatening injuries. The complicated injuries that are beyond the scope of the UNBFAC trained rescuer or long-term definitive care need to be treated by a trained medical professional.

# MODULE 1

## Understanding Medical Capabilities

<b>Goal:</b>	Define the trainee's role in providing first aid and the Medical Evacuation Chain.
<b>Time:</b>	45 minutes
<b>Venue:</b>	Classroom environment
<b>Method:</b>	Theory Lecture
<b>Student Ratio</b>	1:10
<b>Teaching Objectives</b>	<b>By the end of this session, trainees will be able to:</b>  <b>a. Explain</b> the role of a 'First Aider'. <b>b. Identify</b> the major causes of preventable death. <b>c. Define</b> the various levels of pre-hospital emergency medicine. <b>d. Explain</b> the 10:1:2 Principle as they relate to medical treatment timelines <b>e. Discuss</b> first aid as it relates to the tactical environment. <b>f. Define</b> the various levels of Medical Treatment Facility within the UN Evacuation System.

### The "10:1:2 Doctrine" for Trauma Care

The survival chain in line with this timeline is described as follows:

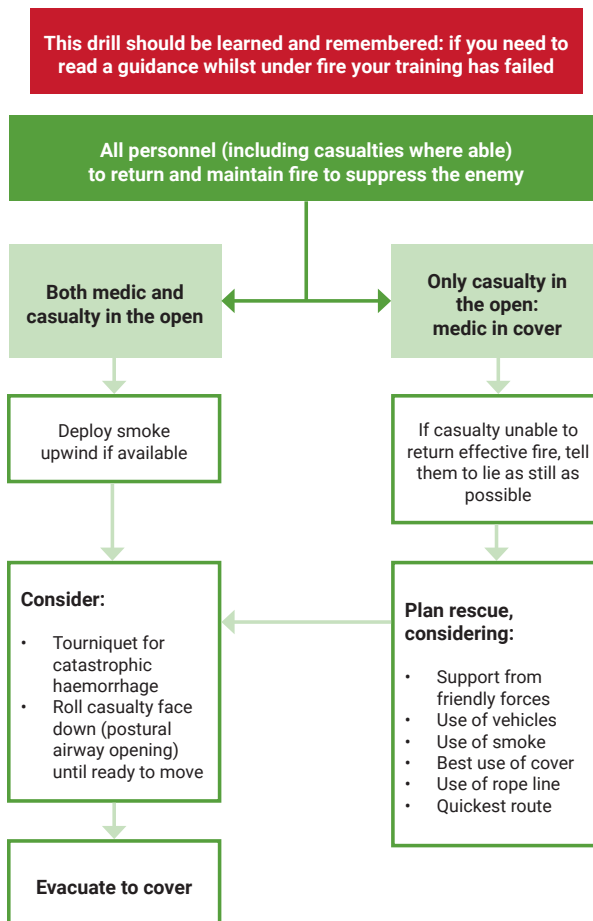
10. Represents the recommended maximum time, in minutes, to provide the necessary immediate lifesaving measures after the onset of injury/illness. This is often referred to as the 'Platinum 10 minutes'
1. Represents the recommended maximum time that necessary damage control resuscitation procedures are provided by emergency medical personnel. This should be completed within 1 hour of the onset of injury/illness and is often referred to as the 'Golden hour'
2. Represents the recommended maximum time that necessary Damage Control Surgery (DCS) is provided. This should start within 2 hours of the injury/illness.



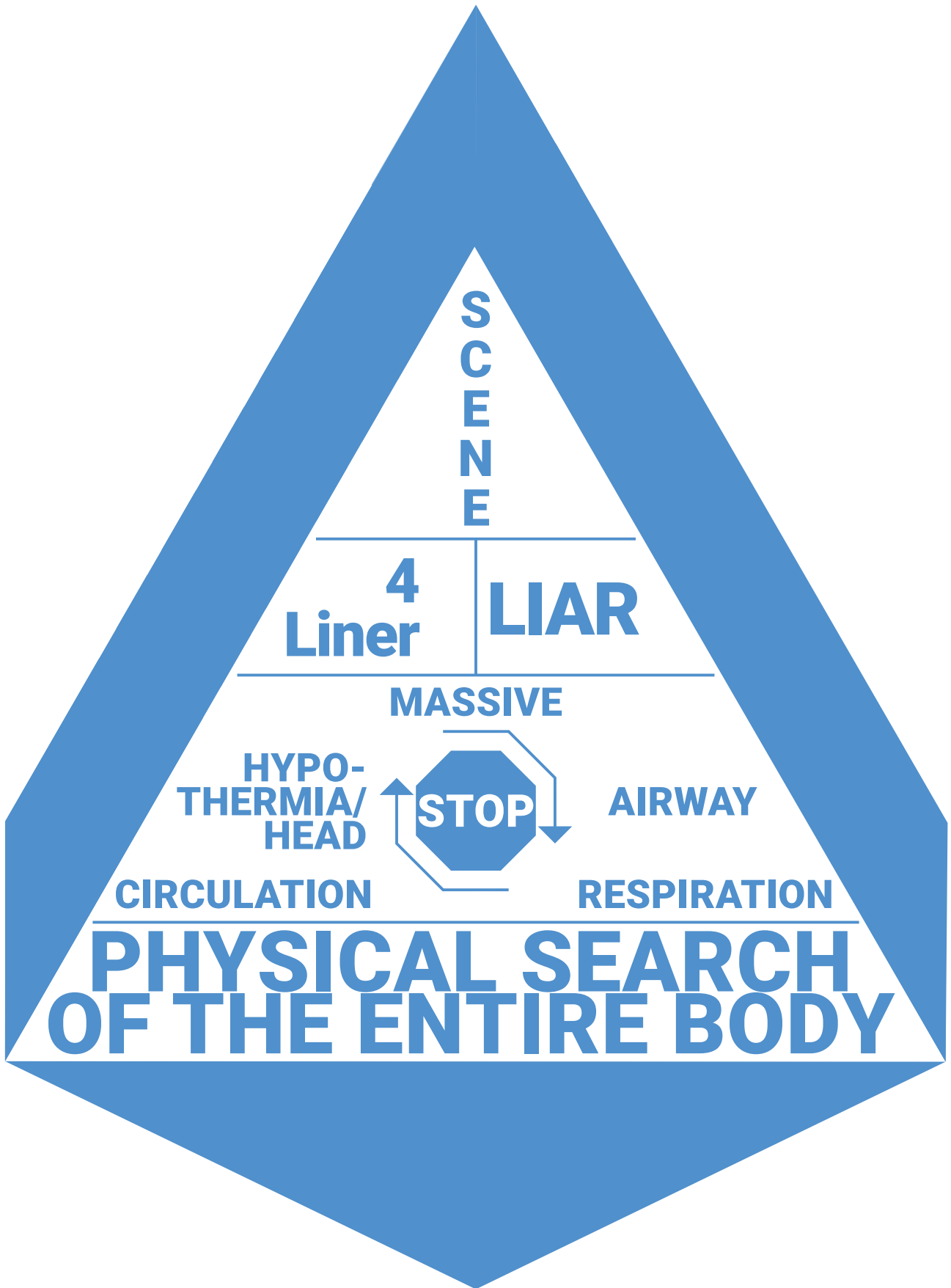
# MODULE 2

## Assessing and Controlling a Scene

<b>Goal:</b>	Define the trainee's role in Assessing and Controlling an incident.
<b>Time:</b>	45 minutes
<b>Venue:</b>	Classroom & Practical Training Area
<b>Method:</b>	Theory Lecture
<b>Student Ratio</b>	1:10
<b>Teaching Objectives</b>	<p><b>By the end of this session, trainees will be able to:</b></p> <ol style="list-style-type: none"> <li><b>Define</b> SCENE management</li> <li><b>Demonstrate</b> use of PPE (Personal Protective Equipment)</li> <li><b>Initiate</b> an emergency alert (LIAR).</li> <li><b>Explain</b> the need for a thorough full body check of the casualty.</li> <li><b>Explain</b> the systematic approach to casualty care using the MARCH acronym.</li> <li><b>Explain</b> the assessment of a casualty's response using AVPU</li> </ol>











# MODULE 3

## Controlling Massive Bleeding



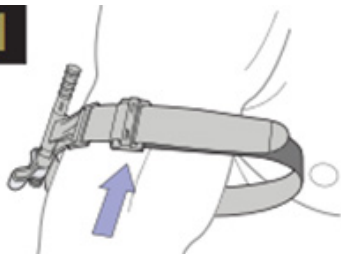
Goal:	Demonstrate the treatment of a Massive Bleeding
Time:	60 minutes
Venue:	Classroom & Practical Training Area
Method:	Theory Lecture
Student Ratio	1:10
Teaching Objectives	By the end of this session, trainees will be able to: <b>a. Identify</b> the parts of the arterial tourniquet <b>b. Prepare</b> and store a tourniquet effectively for 1-handed technique <b>c. Apply</b> a tourniquet using 1-handed technique (self-application) <b>d. Apply</b> a tourniquet to a casualty using 2-handed technique <b>e. Apply</b> an effective improvised windlass tourniquet <b>f. Demonstrate</b> packing a wound cavity to the bone <b>g. Apply</b> direct pressure for a minimum of 5 minutes

### Label parts of the Tourniquet





1



OR

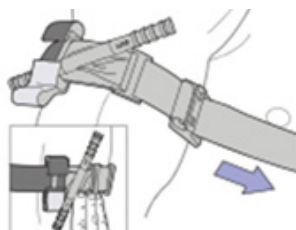
1



**ONE-HANDED APPLICATION** Insert the injured limb through the loop in the band and position it 2-3" above the bleeding site directly to the skin.

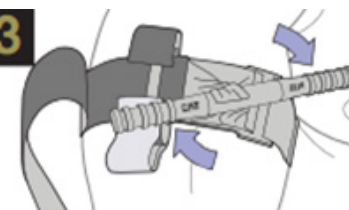
**TWO-HANDED APPLICATION** Route the band around the limb, pass the tip through the slit of the buckle, and position it above the bleeding site directly to the skin.

2



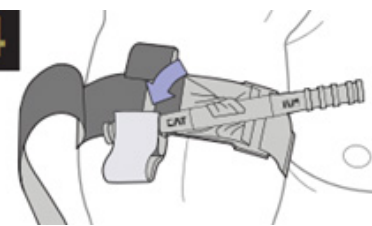
Pull band tightly and fasten it back on itself all the way around the limb, but not over the rod clips. Band should be tight enough that tips of three (3) fingers cannot be slid between the band and the limb. If the tips of three (3) fingers slide under band, re-tighten and re-secure.

3



Twist the rod until bleeding has stopped.

4



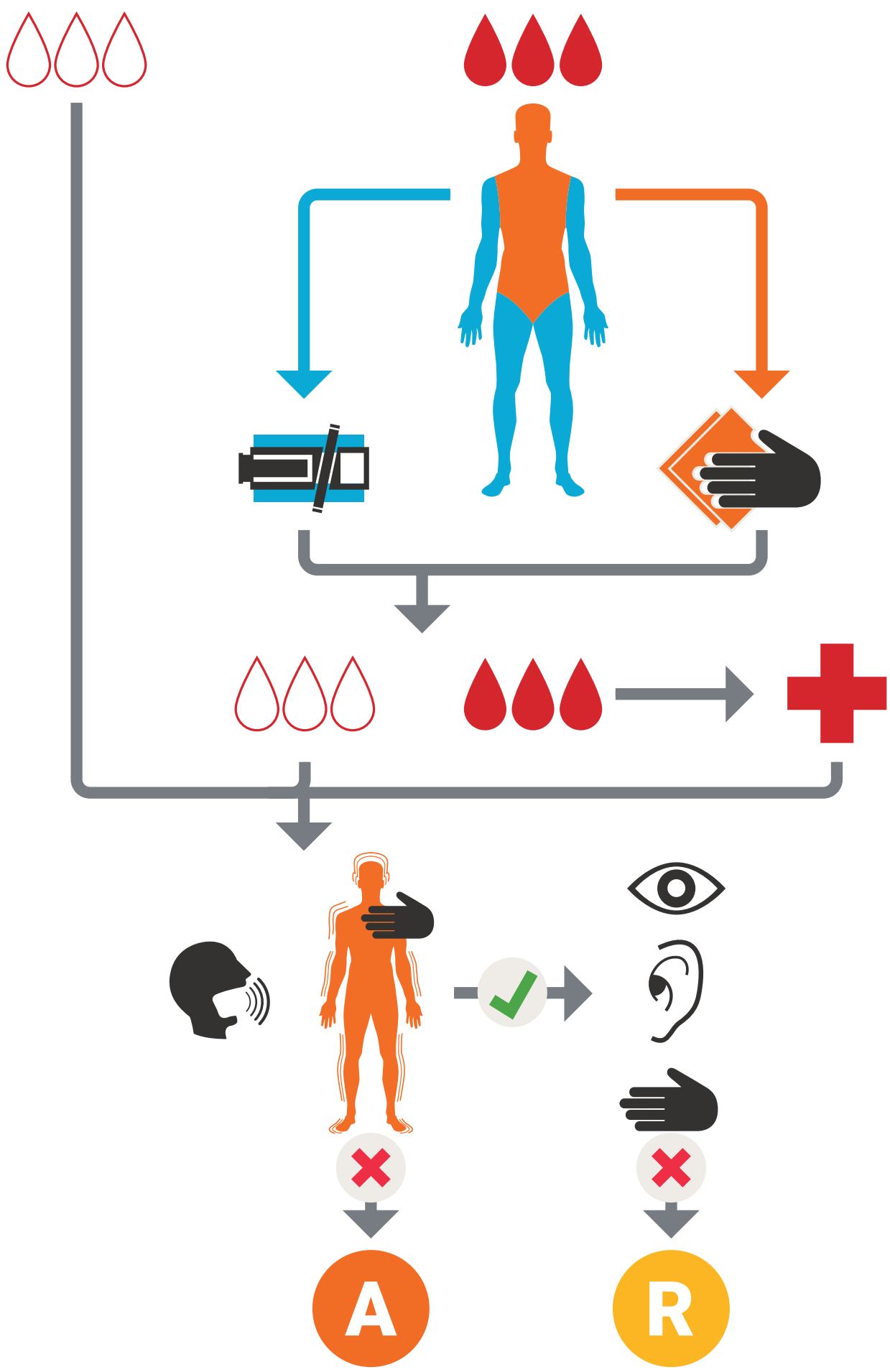
Secure the rod inside a clip to lock it in place. Check for bleeding and distal pulse. If bleeding is not controlled, or distal pulse is present, consider additional tightening or applying a second above and side-by-side to the first. Reassess.

5



Route the band between the clips and over the rod. Secure rod and band with TIME strap. Record time of application.

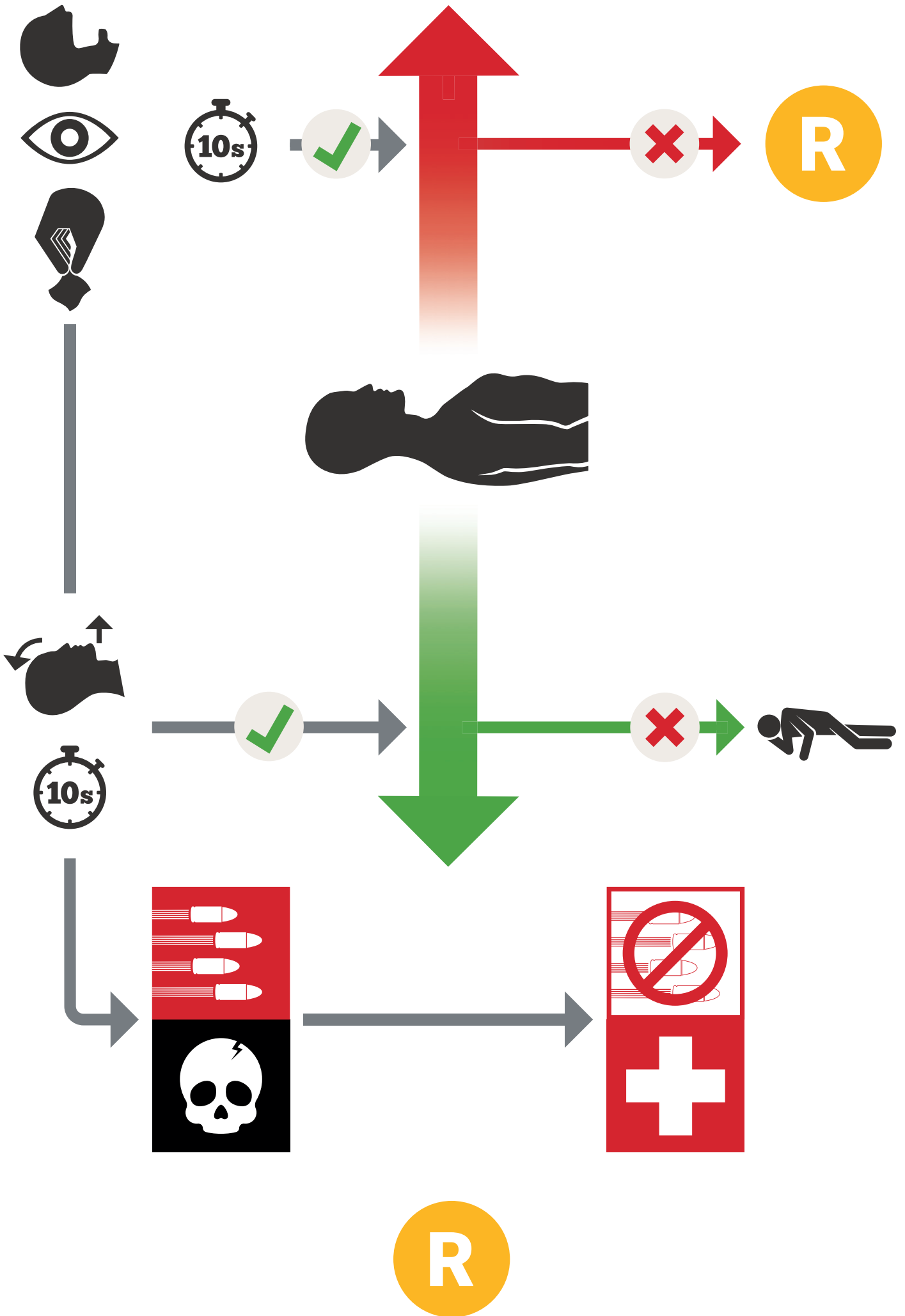






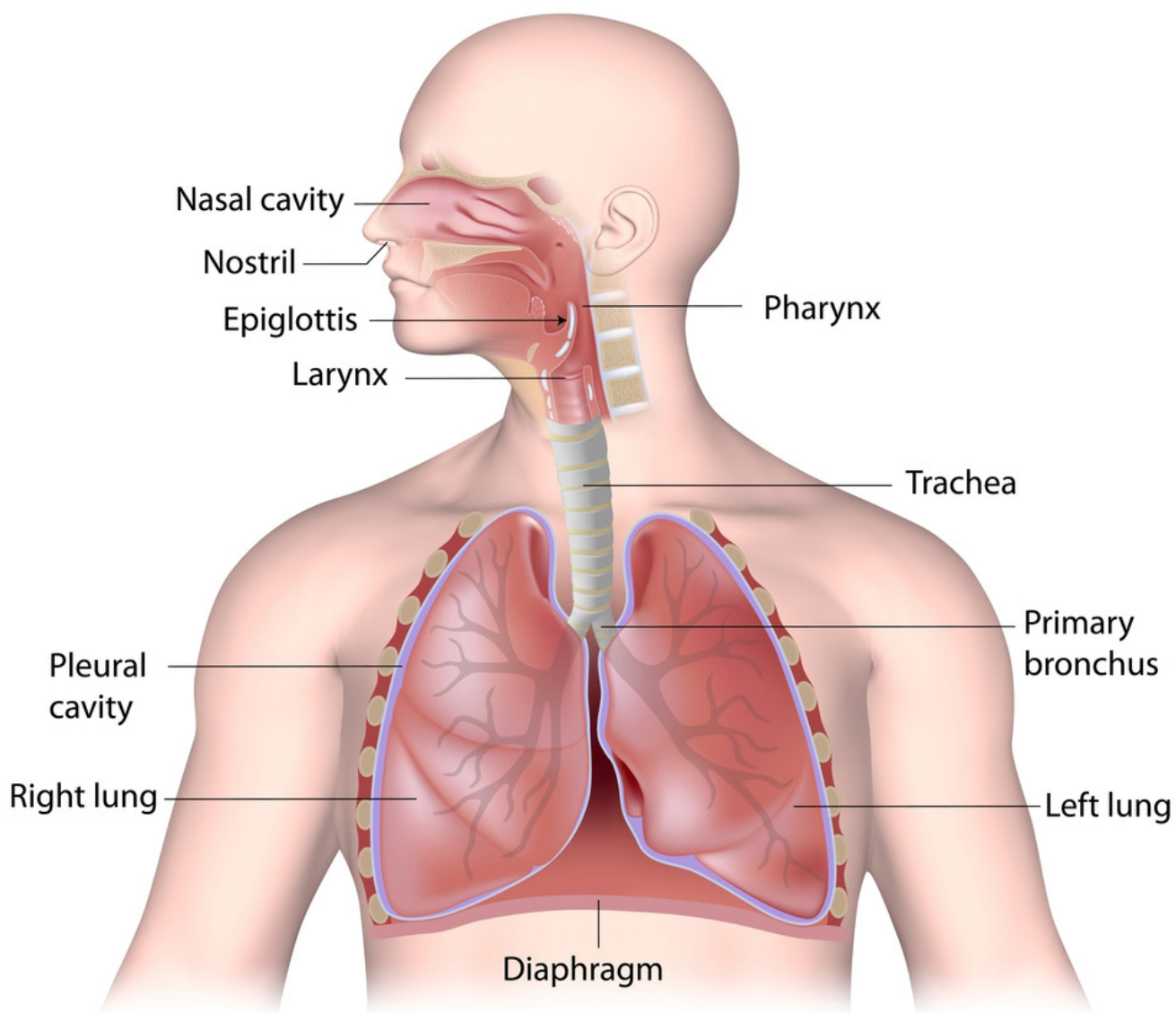


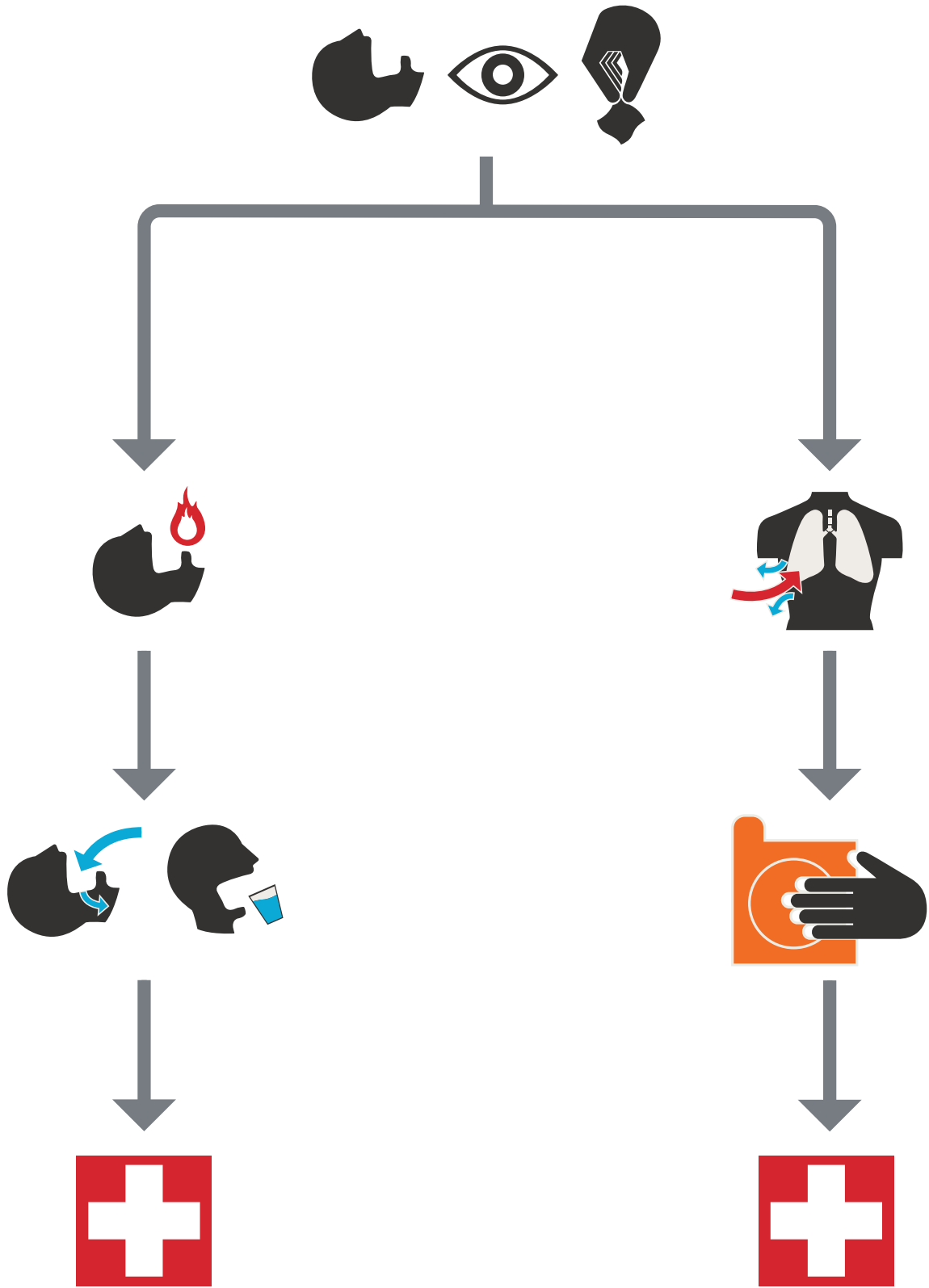






# The Respiratory System

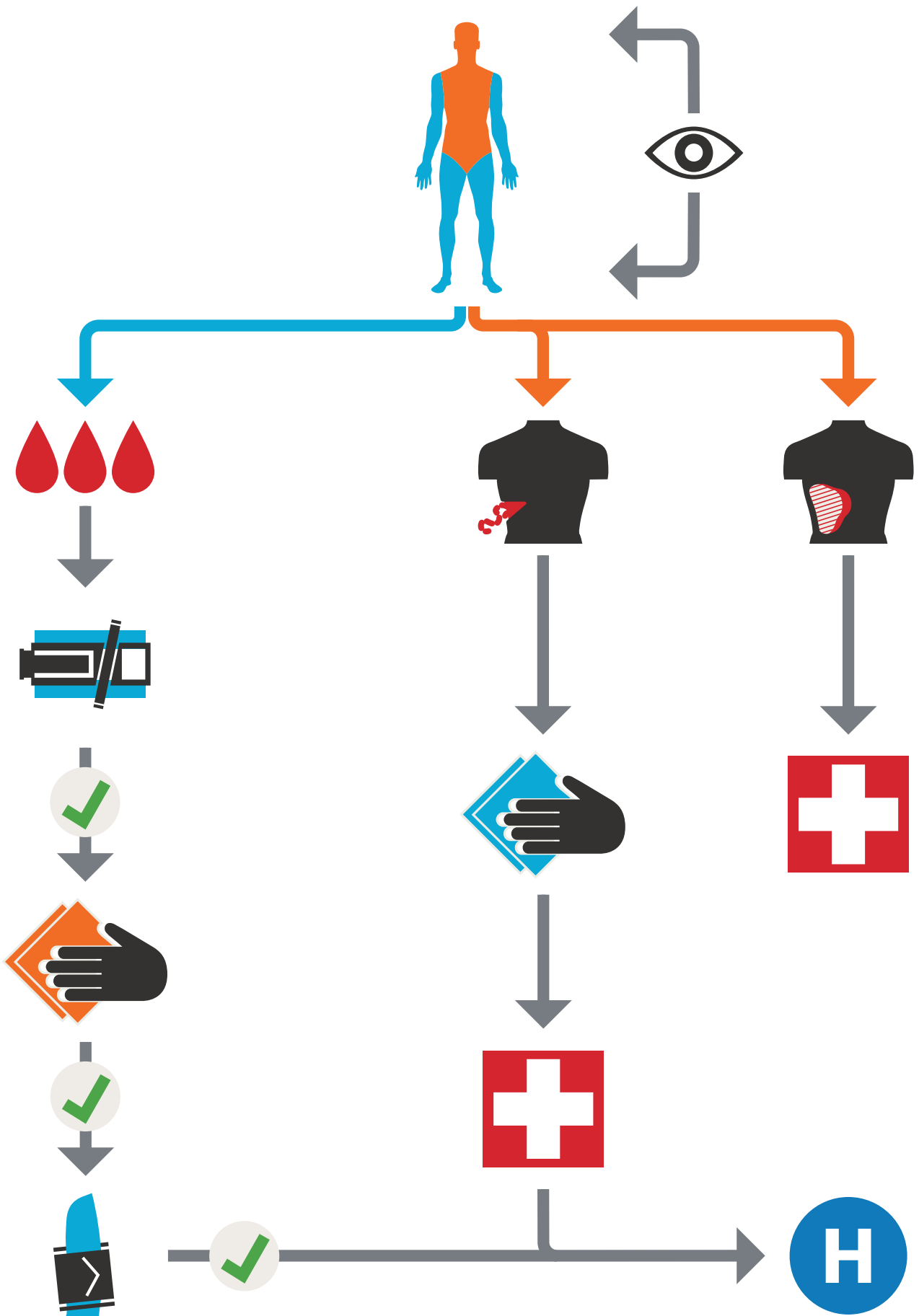




C













# MODULE 7

## Heat and Cold Injuries



<b>Goal:</b>	Demonstrate the treatment of Climatic injuries
<b>Time:</b>	45 minutes
<b>Venue:</b>	Classroom & Practical Training Area
<b>Method:</b>	Theory Lecture
<b>Student Ratio</b>	1:10
<b>Teaching Objectives</b>	<p>By the end of this session, trainees will be able to:</p> <ol style="list-style-type: none"> <li><b>Discuss</b> the normal heat range of the body.</li> <li><b>Define</b> Hypothermia.</li> <li><b>Define</b> Hyperthermia.</li> <li><b>State</b> the signs and symptoms of heat cramps/heat exhaustion and heat stroke.</li> <li><b>Discuss</b> the importance of hydration and electrolyte replacement.</li> <li><b>Identify</b> and treat a patient with severe hypothermia.</li> <li><b>Identify</b> and treat a patient with severe hyperthermia.</li> </ol>



Warm, flushed skin



Very high fever of 41°C



Headache



Dizziness & confusion



Unconsciousness



Nausea & Vomiting



Uncontrolled breathing



Intense shivering



Mental confusion



Loss of coordination



Cold & blue skin



irregular heartbeat

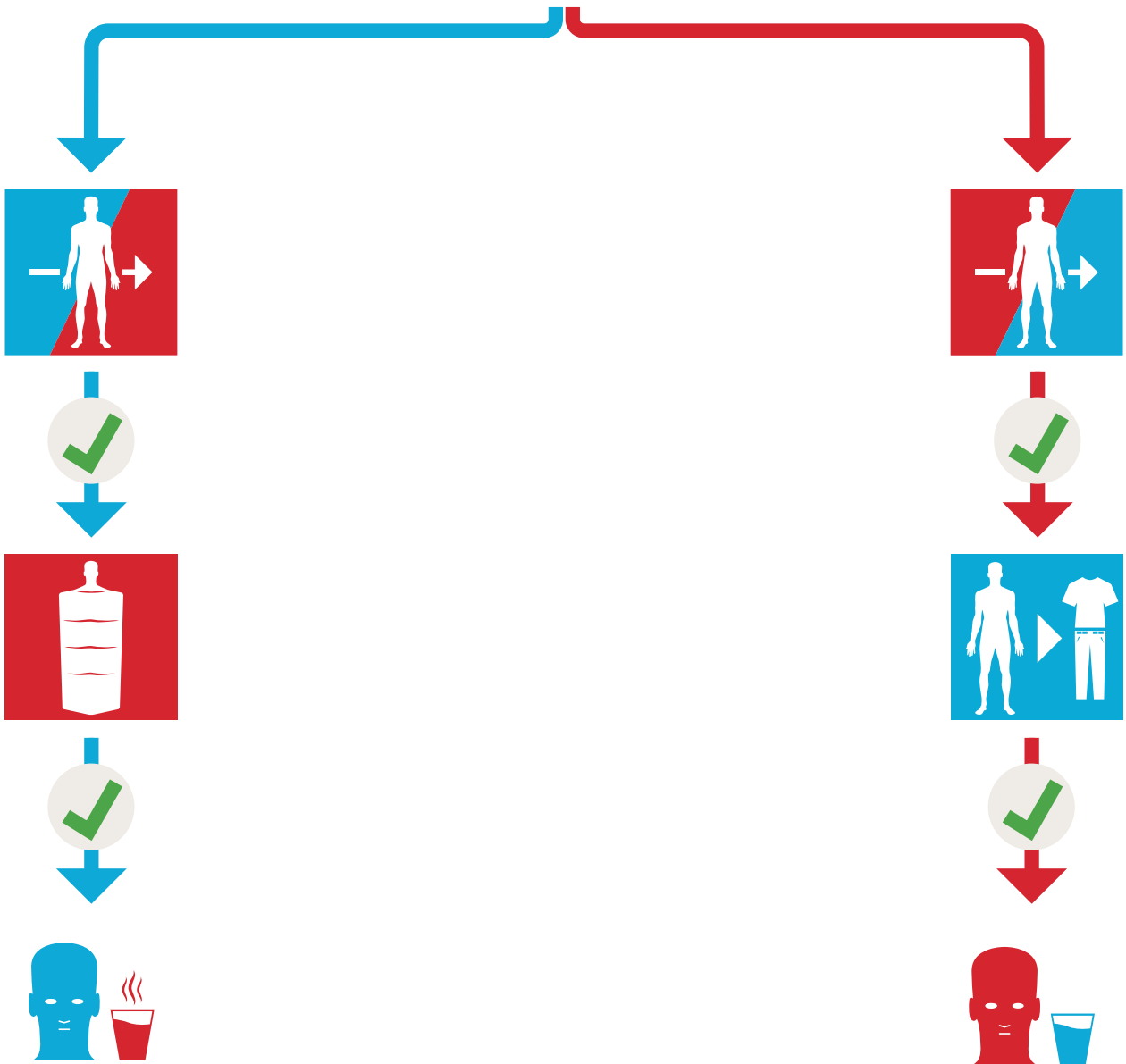
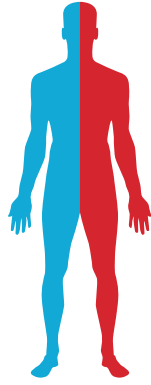


Weak pulse



Enlarged pupils







# MODULE 8

## Casualty Management and Pre-Evacuation Care

<b>Goal:</b>	Demonstrate Casualty Management and Pre-Evacuation Care
<b>Time:</b>	45 minutes
<b>Venue:</b>	Classroom & Practical Training Area
<b>Method:</b>	Theory Lecture
<b>Student Ratio</b>	1:10
<b>Teaching Objectives</b>	<p>By the end of this session, trainees will be able to:</p> <ol style="list-style-type: none"> <li><b>Demonstrate</b> safe techniques for moving casualties: <ul style="list-style-type: none"> <li>• <b>One/Two Person</b></li> <li>• <b>Kings Throne</b></li> <li>• <b>Hasty Harness</b></li> <li>• <b>Fireman's Carry</b></li> </ul> </li> <li><b>Explain</b> the need to complete a secondary survey of the casualty if not evacuated immediately.</li> <li><b>Explain</b> the need to repeat the AVPU assessment.</li> <li><b>Discuss</b> the next stage of patient care and the patient care pathway.</li> </ol>

**A** The patient is awake

**V** The patient responds to verbal stimulation

**P** The patient responds to painful stimulation

**U** The patient is completely unresponsive



