Los Angeles Police Department Tactical Emergency First-Aid/Trauma Care 1850- 21772 Expanded Course Outline

<u>Instructional Goals:</u> To develop students' basic skills in assessing and treating preventable causes of death due to traumatic injuries likely to be encountered in a tactical environment by police officers. The course will also cover scene safety, rapid triage and treatment (tourniquet application, wound packing and direct pressure), medical decision making, and will explain the contents and use of the Officer First Aid Kit (OFAK) with an emphasis on practical application during instructional scenarios.

<u>Performance Objectives:</u> Using learning activities, drills and practical application scenarios, the student will:

- Demonstrate a working knowledge of the three phases of casualty care in a tactical environment.
- Understand and demonstrate the function of the OFAK trauma kit components.
- ☐ Implement proper assessment protocols to identify and treat life-threatening injuries.
- Describe and show proper decision-making regarding when and how to transport casualties to the next level of medical care.
- ☐ Exhibit a working knowledge of tactical medicine through instructional scenarios.
- □ Demonstrate a basic working knowledge of Rescue Task Force (RTF) function and medical response to mass casualty incidents resulting from active shooters or terrorist attacks.

Instructors of this course are required to have successfully completed the following POST accredited course: First-Aid, AED, CPR 40-Hour Course.

<u>References:</u> Instructors, facilitators, and training supervisors shall ensure that the most current references are utilized.

I. INTRODUCTION

- A. Training Cadre
 - 1. Instructor introductions
- B. Administrative
 - 1. Sign-in
 - 2. Documentation
- C. Training site logistics
 - 1. Exits
 - 2. Restrooms
- D. Course Outline
 - 1. Performance objectives
 - Schedule outline
- E. Safety briefing
 - 1. Emergency procedures
 - 2. Secure weapons

II. TACTICAL COMBAT CASUALTY CARE (TCCC) AND TACTICAL EMERGENCY CASUALTY CARE (TECC): HISTORY AND DEVELOPMENT

- A. Historical development of TCCC/TECC
 - 1. Purpose and treatment.

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- B. Definition of TCCC
 - 1. The standard of prehospital care provided for battlefield traumatic injuries in ongoing tactical environments.
- C. Goals of TCCC
 - 1. Minimal casualties
 - 2. Additional injuries
 - 3. Minimize public harm
 - 4. Stop the threat
- D. History of TCCC development
 - 1. Military studies regarding treatment of preventable causes of death
 - a. Causes of preventable death (to be described in Section IV)
 - 2. Committee on Tactical Emergency Casualty Care
- E. TCCC (military) Vs TECC (civilian): similarities and differences
 - 1. Patient population
 - 2. Medical professional scope of practice
 - 3. Access to definitive care (transport times and level of care available)
- F. LAPD Policy on Rendering Medical Aid
 - 1. Policy and scope of practice
- G. Active shooters and Rescue Task Force (RTF)
 - 1. Definitions
 - a. Hot/warm/cold zones
 - b. Casualty collection point (CCP)
 - c. RTF
 - d. Cover vs concealment
 - 2. Incident Command System (ICS)/Unified Command
 - a. Roles and responsibilities of Law Enforcement
 - b. Roles and responsibilities of Fire and EMS
 - Coordination of Law Enforcement and EMS
 - a. Command, control and communications
 - b. Command Post and staging areas
 - c. Ingress/Egress
 - d. Managing priorities
- H. Threat assessment during operations
 - 1. Warrant services and other preplanned operations
 - 2. Unplanned events

III. OFFICER FIRST AID KIT (OFAK): INTRODUCTION TO COMPONENTS

- A. Identify the components of the OFAK trauma kit to be used during subsequent skills instruction.
 - 1. Importance of having equipment
 - 2. Also known as: Individual First Aid Kit (IFAK) or Trauma Kit
 - 3. An overview of Kit contents.

IV. THREE PHASES OF CARE: TREATMENTS AND TACTICAL CONSIDERATIONS

- A. Understand the appropriate treatments of each Phase of Care, as well as
 - 1. Tactical considerations

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- 2. Mission objectives
- 3. Tourniquet self-application
- B. Describe preventable causes of pre-hospital deaths
 - 1. Massive hemorrhage from extremity wounds
 - 2. Tension pneumothorax
 - 3. Airway obstruction
- C. Hot Zone/Direct Threat Phase/Care Under Fire
 - 1. Definition of Direct Threat Phase
 - 2. Tactical considerations
 - 3. Keep response team maximally engaged in mitigating the existing threat
 - 4. Self-aid
 - 5. Buddy aid concepts
 - 6. Hot Zone Treatments
 - 7. Limited to tourniquet application to extremity hemorrhage only
 - 8. Addressing other massive hemorrhage if tactically feasible
 - 9. Evacuate to warm zone
- D. Warm Zone/Indirect Threat Phase/Tactical Field Care
 - 1. Definition of Indirect Threat Phase
 - 2. Patient assessment
 - 3. Priority of care within warm zone
 - 4. MARCH Assessment and treatment
 - a. Massive Hemorrhage
 - b. Airway
 - c. Respiration
 - d. Circulation
 - e. Hypothermia
 - f. Head Trauma
 - 5. Transport and Evacuation
- E. Tactical Evacuation to Cold Zone (TACEVAC/CASEVAC)
 - 1. Definition of Tactical Evacuation
 - 2. Patient assessment
 - 3. Priority of care within cold zone
- F. Summary of Three Phases of Care
 - 1. Hot Zone/Direct Threat Phase/Care Under Fire
 - 2. Warm Zone/Indirect Threat Phase/Tactical Field Care
 - 3. Tactical Evacuation to Cold Zone (TACEVAC/CASEVAC)

V. SKILLS STATION ROTATIONS

- A. Learning Activity: Students will break into small groups and rotate between 2 stations to receive hands-on instruction.
 - 1. Massive bleeding/Circulation
 - 2. Wound packing
 - 3. Lifts, Carries
 - 4. Load-Up
 - 5. Drags
 - 6. Carries
 - 7. Urgent transport using a police vehicle

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8. Recovery positioning

VI. SCENARIO ROTATIONS

- A. Instructors will review
 - 1. Safety brief
 - 2. No simunitions or live fire will be included in the scenarios
 - 3. Weapons check-A weapons safety check is being conducted. To insure no weapons are present during the scenarios and practical application.
- B. Small group activity
 - 1. Tactical medicine scenarios officers may encounter while on patrol.
- C. Scenario using the concepts of tactical medicine
 - 1. Equipment from the OFAK
- D. Large Scale Scenario "Active shooter".
 - 1. Class exercise "Responding to an Active Shooter".
 - 2. Grouping-victims and first responders
 - 3. Responding to multiple victims
 - 4. Organizing rescue teams
 - 5. Warm Zone response
 - 6. Patient cards identifying medical issues
 - 7. Casualty Collection Point (CCP)
 - 8. Victims to cold zone
 - 9. EMS hand-off
- E. Small Scale Scenarios
 - 1. Students will be advised of the scenario.
 - 2. Responding to a down officer at the scene of a traffic stop.
 - a. Administration of first aid
 - 3. Responding to a domestic violence radio call. While interviewing a victim, suspect shoots officer and retreats into the structure.
 - a. Administration of first aid
 - 4. Business dispute radio call. Upon arrival, observed unconscious gunshot victim.
 - a. Administration of first aid
- F. Assessment
 - 1. Students' performance
- G. Debrief
 - 1. Group discussion

VII. FINAL WRITTEN EXAMINATION

- A. Exam
 - 1. Review

VIII. CONCLUSION AND CLOSING REMARKS

- A. Debrief
 - 1. Course evaluation
 - 2. Instructor evaluations