

## Scenario 13-1                      Fall from a Chair Lift

Patrollers called to respond to an emergency stop of Roundhouse Chair. Patrollers respond with sled, backboard and O2. At Tower 7, patient is lying face down on a pile of snow covered rocks. Patient is hard unconscious with unknown internal injuries. This is a load and go backboard. Speed is everything.

This calls for an abbreviated secondary - all that head and back stuff is irrelevant; ABC, breaks and bleeding, backboard and out we go.

LOCATION:        Roundhouse Chair Tower 7

WEATHER:        Cold and clear

SAMPLE:        Unavailable

INJURY:        Massive Internal Injuries

SYMPTOMS:    Unconscious – not pain responsive  
                   Cold and clammy.  
                   No deformity.  
                   Abdomen is hard all over.  
                   Minor lacerations with minimal bleeding, face, head & hands.

VITALS:        Initial:    Pulse 140;                      Respiration labored and shallow 25 ;                      BP 100/70  
                   5 min:    Pulse 180 and faint;                      Respiration labored and shallow 35;                      BP 60/50.

OBJECTIVES:    Recognize Urgency  
                   Assessment Judgement  
                   Fast backboard skills

Leader: \_\_\_\_\_                      Assistant: \_\_\_\_\_                      Patient: \_\_\_\_\_

Times: Begin: \_\_\_\_\_    Call: \_\_\_\_\_    Complete: \_\_\_\_\_

### General

Y N Ask if scene safe?  
 Y N Place skis uphill?  
 Y N Introduce self to patient?  
 Y N Ask permission to treat?  
 Y N Gloves?  
 Y N Timely call for equipment and help?  
 Y N Appropriate equipment?  
 Y N Good communication with patient?  
 Y N Proper treatment of each problem?  
 Y N Good use of helper(s)?

### Assessment

Y N Primary Survey (ABC)?  
 Y N Unconscious, Vision Oriented?  
 Y N Clear Neck and Back?  
 Y N Determine chief complaint(s)?  
 Y N Complete SAMPLE?  
 Y N Head, eyes, ears, nose, mouth?  
 Y N Throat, Clavicle, Chest?  
 Y N Abdomen, Pelvis?  
 Y N Legs, Push/Pull?  
 Y N Shoulders/Arms, Grip?

### Specific

Y N Recognize no pain response  
 Y N Recognize urgency  
 Y N Prompt ambulance call  
 Y N Abbreviated secondary  
 Y N Oral airway applied  
 Y N O2 applied  
 Y N Good backboard mechanics  
 Y N Excellent speed thruout

## Scenario 13-2 Walk in Standing Precautionary Backboard

Patient skis up to patroller at lift line. When queried, she responds that she fell on the ice and felt her back go crunch. On palpation, patient identifies point tenderness in vicinity of L-1.

LOCATION: Lift line, base of slope.  
 WEATHER: Warm & sunny  
 SAMPLE: None  
 INJURY: possible lumbar spine fracture  
 SYMPTOMS: point tenderness at L-1  
 Heard back go crunch  
 OBJECTIVES: Standing backboard practice

Leader: \_\_\_\_\_ Assistant: \_\_\_\_\_ Patient: \_\_\_\_\_

Times: Begin: \_\_\_\_\_ Call: \_\_\_\_\_ Complete: \_\_\_\_\_

### General

Y N Ask if scene safe?  
 Y N Place skis uphill?  
 Y N Introduce self to patient?  
 Y N Ask permission to treat?  
 Y N Gloves?  
 Y N Timely call for equipment and help?  
 Y N Appropriate equipment?  
 Y N Good communication with patient?  
 Y N Proper treatment of each problem?  
 Y N Good use of helper(s)?

### Assessment

Y N Primary Survey (ABC)?  
 Y N Unconscious, Vision Oriented?  
 Y N Clear Neck and Back?  
 Y N Determine chief complaint(s)?  
 Y N Complete SAMPLE?  
 Y N Head, eyes, ears, nose, mouth?  
 Y N Throat, Clavicle, Chest?  
 Y N Abdomen, Pelvis?  
 Y N Legs, Push/Pull?  
 Y N Shoulders/Arms, Grip?

### Specific

Y N Immediate head immobilization  
 Y N Interrupts secondary for backboard  
 Y N good backboard mechanics  
 Y N Precautionary O2  
 Y N Complete secondary b4 depart  
 Y N Ambulance call

## Scenario 13-3 High Speed Collision with Tree (ICP)

Mr. Macho Man is reported in the trees on an advanced slope. Hit a big one. Initially unconscious. Regains consciousness (sort of) during secondary. Neck pain at C-7. Anxious, agitated and somewhat combative. Partial paralysis in extremities and spontaneous jerking of lower limbs. Decreasing LOC. Headache.

LOCATION: In the trees off an advanced slope

WEATHER: Snow flurries and cold

SAMPLE: Alcohol

INJURY: Inner-cranial pressure (ICP)

SYMPTOMS: Initially unconscious  
 Regains consciousness (sort of) three min. after equipment.  
 Neck pain at C-7.  
 Anxious, agitated and somewhat combative.  
 Partial paralysis in extremities and spontaneous jerking of lower limbs.  
 Decreasing LOC. Headache.

Vitals: Initial: Pulse 60; Respiration Cheyn-Stokes; BP 100/70.  
 5 min: Pulse; 25 Respiration Cheyn-Stokes; BP 60/50.

OBJECTIVES: Combative backboard  
 Recognize, treat ICP

Look for:

- Recognizes head injury by symptoms
- Quick but complete secondary
- Immediate head stabilization with pack, etc.
- Quick call
- Good backboard mechanics
- Hi-flow O2 -- hyperventilate with BVM
- Head up transport

Leader: \_\_\_\_\_ Assistant: \_\_\_\_\_ Patient: \_\_\_\_\_

Times: Begin: \_\_\_\_\_ Call: \_\_\_\_\_ Complete: \_\_\_\_\_

### General

- Y N Ask if scene safe?
- Y N Place skis uphill?
- Y N Introduce self to patient?
- Y N Ask permission to treat?
- Y N Gloves?
- Y N Timely call for equipment and help?
- Y N Appropriate equipment?
- Y N Good communication with patient?
- Y N Proper treatment of each problem?
- Y N Good use of helper(s)?

### Assessment

- Y N Primary Survey (ABC)?
- Y N Unconscious, Vision Oriented?
- Y N Clear Neck and Back?
- Y N Determine chief complaint(s)?
- Y N Complete SAMPLE?
- Y N Head, eyes, ears, nose, mouth?
- Y N Throat, Clavicle, Chest?
- Y N Abdomen, Pelvis?
- Y N Legs, Push/Pull?
- Y N Shoulders/Arms, Grip?

### Specific

- Y N Recognize ICP
- Y N Fast secondary
- Y N Early stabilization
- Y N Quick call
- Y N Good backboard mechanics
- Y N Hyperventilate with O2.
- Y N Head up transport

## Scenario 13-4 Fall in Cafeteria

Aunt Millie slipped on the steps while going to the bathroom. Conscious but her lower back hurts badly and she complains a lot anyway. Whine Whine Whine.

LOCATION: Steps near bathroom

WEATHER: Inside

SAMPLE: High BP medication. Forgot it this morning.

INJURY: Pulled muscles in back

SYMPTOMS: Pain is exclusively on left side of the back  
Has been nauseous since Sunday

Vitals: Initial: Pulse 60; Respiration 12; BP 150/95.  
5 min: Pulse; 25 Respiration 12; BP 150/95.

OBJECTIVES: Not everything is a backboard

Look for:

Recognizes non-spinal injury  
Backboard is optional but not a good idea

Leader: \_\_\_\_\_ Assistant: \_\_\_\_\_ Patient: \_\_\_\_\_

Times: Begin: \_\_\_\_\_ Call: \_\_\_\_\_ Complete: \_\_\_\_\_

### General

Y N Ask if scene safe?  
Y N Place skis uphill?  
Y N Introduce self to patient?  
Y N Ask permission to treat?  
Y N Gloves?  
Y N Timely call for equipment and help?  
Y N Appropriate equipment?  
Y N Good communication with patient?  
Y N Proper treatment of each problem?  
Y N Good use of helper(s)?

### Assessment

Y N Primary Survey (ABC)?  
Y N Unconscious, Vision Oriented?  
Y N Clear Neck and Back?  
Y N Determine chief complaint(s)?  
Y N Complete SAMPLE?  
Y N Head, eyes, ears, nose, mouth?  
Y N Throat, Clavicle, Chest?  
Y N Abdomen, Pelvis?  
Y N Legs, Push/Pull?  
Y N Shoulders/Arms, Grip?

### Specific

Y N Fast secondary  
Y N Early stabilization  
Y N Recognizes time line of nausea  
Y N Evaluates back appropriately  
Y N Optional backboard – ask patient?  
Y N Management Call – slip & fall

## Scenario 13-5 -- Snowboarder Meets Rock – Thoracic fracture

Sara Snowboarder started down Silver Belt on Thanksgiving. Big mistake. There is just enough snow to ski on the groomed runs. Makes it across first big rock and hits the second with her back after cart wheeling in the air. Patient is found draped over the rock.

LOCATION: Rocks in Silver Belt

WEATHER: Cold and clear

SAMPLE: unavailable

INJURY: Thoracic Spine Injury

SYMPTOMS: Unconscious but pain responsive  
Back pain at T-4.  
Partial loss of sensation in and spontaneous jerking of lower limbs.

Vitals: Initial: Pulse 60; Respiration 15; BP 120/70.  
5 min: Pulse; 60 Respiration 16; BP 120/70.

OBJECTIVES: Unconscious backboard

Look for:

Quick but complete secondary  
Immediate head stabilization with pack, etc.  
Quick call  
Good backboard mechanics  
Hi-flow O2  
Head down transport

Leader: \_\_\_\_\_ Assistant: \_\_\_\_\_ Patient: \_\_\_\_\_

Times: Begin: \_\_\_\_\_ Call: \_\_\_\_\_ Complete: \_\_\_\_\_

### General

Y N Ask if scene safe?  
Y N Place skis uphill?  
Y N Introduce self to patient?  
Y N Ask permission to treat?  
Y N Gloves?  
Y N Timely call for equipment and help?  
Y N Appropriate equipment?  
Y N Good communication with patient?  
Y N Proper treatment of each problem?  
Y N Good use of helper(s)?

### Assessment

Y N Primary Survey (ABC)?  
Y N Unconscious, Vision Oriented?  
Y N Clear Neck and Back?  
Y N Determine chief complaint(s)?  
Y N Complete SAMPLE?  
Y N Head, eyes, ears, nose, mouth?  
Y N Throat, Clavicle, Chest?  
Y N Abdomen, Pelvis?  
Y N Legs, Push/Pull?  
Y N Shoulders/Arms, Grip?

### Specific

Y N Fast secondary  
Y N Early stabilization  
Y N Quick call  
Y N Good backboard mechanics  
Y N High flow O2.  
Y N Head up transport

## Scenario 14-1 Head over heels flip

On a nice day, two patrolers are standing watching a snowboarder coming down KT-22. Then she caught a front edge of her board. She managed the first few flips with handstands, then lost it and tumbled down about 300 vertical feet. Verbal but minimally oriented at the bottom.

LOCATION: Bottom of KT-22

WEATHER: Clear and cold

SAMPLE: Unavailable – not alert enough to answer questions requiring thought

INJURY: Pain and deformity at C-7.  
Closed forearm fracture.  
Facial bleeding due to icy conditions

SYMPTOMS: Minimally oriented  
Cervical pain  
Forearm fracture pain is masked till palpation

VITALS: Initial: Pulse 125      Respiration 24.    BP 110/75  
5 min: Pulse 145.      Respiration 35.    BP 60/50

OBJECTIVES: BACKBOARD SPEED

Look for:

- Recognizes neck injury
- Quick call after checking femurs
- Quick but complete secondary
- Immediate head stabilization with pack, etc.
- Good backboard mechanics
- Hi-flow O2
- Head up transport
- Problem done in no more than ten minutes

Leader: \_\_\_\_\_ Assistant: \_\_\_\_\_ Patient: \_\_\_\_\_

Times: Begin: \_\_\_\_\_ Call: \_\_\_\_\_ Complete: \_\_\_\_\_

### General

- Y N Ask if scene safe?
- Y N Place skis uphill?
- Y N Introduce self to patient?
- Y N Ask permission to treat?
- Y N Gloves?
- Y N Timely call for equipment and help?
- Y N Appropriate equipment?
- Y N Good communication with patient?
- Y N Proper treatment of each problem?
- Y N Good use of helper(s)?

### Assessment

- Y N Primary Survey (ABC)?
- Y N Unconscious, Vision Oriented?
- Y N Clear Neck and Back?
- Y N Determine chief complaint(s)?
- Y N Complete SAMPLE?
- Y N Head, eyes, ears, nose, mouth?
- Y N Throat, Clavicle, Chest?
- Y N Abdomen, Pelvis?
- Y N Legs, Push/Pull?
- Y N Shoulders/Arms, Grip?

### Specific

- Y N Recognize neck injury
- Y N Quick call
- Y N Immediate head stabilization
- Y N Good backboard mechanics
- Y N High flow O2
- Y N Head up transport
- Y N Within ten minutes

## Scenario 14-2 Snowmobile Accident

Lift mechanic was traversing across an intermediate slope to reach a stopped lift when his snowmobile rolled over on top of him and then rolled on down the hill. Patient has impaired breathing due to flail chest segment. Patient's nose & facial bones are fractured with substantial bleeding down the throat. No pain or deformity found in head, neck, or back.

LOCATION: Intermediate slope

WEATHER: Cold and clear

SAMPLE: Can't talk intelligibly because of facial injuries

INJURY: Flail Chest Segment

SYMPTOMS: impaired breathing due to flail chest segment.  
nose & facial bones are fractured  
substantial bleeding down the throat

VITALS: Initial: Pulse 120      Respiration 18      BP 110/75  
5 min: Pulse 145.      Respiration 35.      BP 60/50

OBJECTIVES: Chest injury treatment

Leader: \_\_\_\_\_ Assistant: \_\_\_\_\_ Patient: \_\_\_\_\_

Times: Begin: \_\_\_\_\_ Call: \_\_\_\_\_ Complete: \_\_\_\_\_

### General

Y N Ask if scene safe?  
Y N Place skis uphill?  
Y N Introduce self to patient?  
Y N Ask permission to treat?  
Y N Gloves?  
Y N Timely call for equipment and help?  
Y N Appropriate equipment?  
Y N Good communication with patient?  
Y N Proper treatment of each problem?  
Y N Good use of helper(s)?

### Assessment

Y N Primary Survey (ABC)?  
Y N Unconscious, Vision Oriented?  
Y N Clear Neck and Back?  
Y N Determine chief complaint(s)?  
Y N Complete SAMPLE?  
Y N Head, eyes, ears, nose, mouth?  
Y N Throat, Clavicle, Chest?  
Y N Abdomen, Pelvis?  
Y N Legs, Push/Pull?  
Y N Shoulders/Arms, Grip?

### Specific

Y N Recognizes breathing problem  
Y N Quick equipment call  
Y N Ambulance call  
Y N quick but complete secondary  
Y N Clears neck and back  
Y N No backboard- bad side down  
Y N Hi flow O2  
Y N Head up transport  
Y N Load and go, go, go

## Scenario 14-3 Skier Collision

Hot shot flies down the hill and hits matron from the back. Hot shot is unconscious about six feet from matron but unobtrusive. Matron is basically uninjured but frightened and angry. Getting blood all over her new white Bolger jacket.

LOCATION: Bottom of Intermediate slope

WEATHER: Nice day

SAMPLE: Hot shot: Unavailable  
Matron: Estrogen

INJURY: Hot Shot: Broken jaw,  
avulsed tooth,  
compromised airway,  
unconscious.  
No oral bleeding.  
Matron: Sore knee,  
scalp cut,  
frightened and loud

SYMPTOMS: Hot Shot: unconscious but pain responsive  
Airway fails when rolled on back

### OBJECTIVES:

Hot: Recognize and put off matron;  
Find two patients  
Unconscious person is priority  
Quick call  
Airway and Hi-flow O2  
Good backboard mechanics  
Protect tooth  
Matron: Complete Secondary  
Bandage  
Splint  
Check distal pulses before and after  
Transport

Leader: \_\_\_\_\_ Assistant: \_\_\_\_\_ Patient: \_\_\_\_\_

Times: Begin: \_\_\_\_\_ Call: \_\_\_\_\_ Complete: \_\_\_\_\_

### General

Y N Ask if scene safe?  
Y N Place skis uphill?  
Y N Introduce self to patient?  
Y N Ask permission to treat?  
Y N Gloves?  
Y N Timely call for equipment and help?  
Y N Appropriate equipment?  
Y N Good communication with patient?  
Y N Proper treatment of each problem?  
Y N Good use of helper(s)?

### Assessment

Y N Primary Survey (ABC)?  
Y N Unconscious, Vision Oriented?  
Y N Clear Neck and Back?  
Y N Determine chief complaint(s)?  
Y N Complete SAMPLE?  
Y N Head, eyes, ears, nose, mouth?  
Y N Throat, Clavicle, Chest?  
Y N Abdomen, Pelvis?  
Y N Legs, Push/Pull?  
Y N Shoulders/Arms, Grip?

### Specific

Y N Find two patients  
Y N Unconscious priority  
Y N quick call  
Y N Oral Airway  
Y N Good backboard mechanics  
Y N Protect tooth  
Y N Head up transport  
Y N Quick transport