

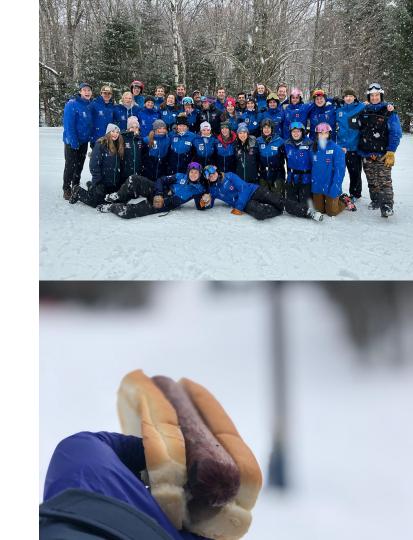


Please SCAN THIS QR CODE to sign in!



# What We Do:

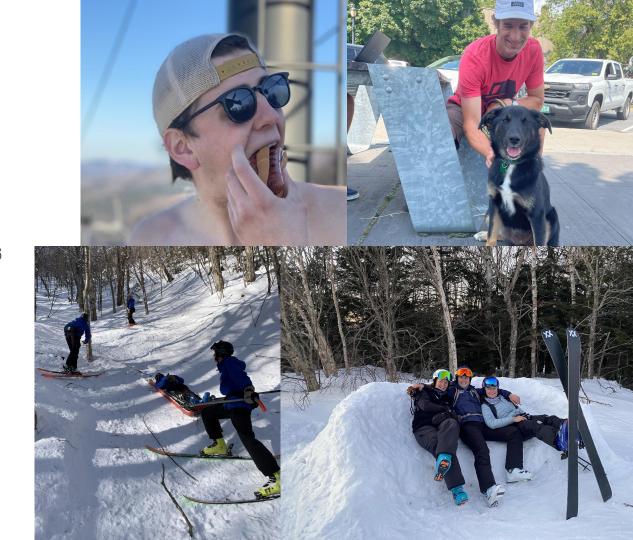
- One full, one half day patrolling the Bowl and Rikert a week (12 hours)
  - Opportunity for paid patrol over breaks
- Medical response
- Opening and closing trails, marking hazards, and sweeping trails
- Lift evacuation (as needed)
- Other operational duties across the mountain
- General ambassadors for the Bowl and Rikert
- Teach subsequent OEC class
- On hill trainings, CPR, lift evacuation trainings
- Hot dogs





# Perks:

- Free Bowl/Rikert pass
- Pro deals
- Locker at the Bowl
- Fun peeps to shred with
- Hours fulfill EMT CE reqs
- Assorted outdoor adventures
- Sam Marquis' style
- PE Credit
- Chats w/ Lachlan and Sloane
- Snowfas
- Hot dogs
- Coco!



# Requirements Breakdown

- I. Take fall OEC class and pass National Ski Patrol Exam and all practicals
  - a. Weekly Class
  - b. Middlebury Specific Midterm/Final
  - c. OEC Practicals
  - d. OEC Final Exam
- 2. Achieve a combined score of 75% and pass all practicals within 2 attempt

OEC Practicals	40%
Midterm Middlebury Exam	10%
Final OEC Exam (80% or above required)	30%
Final Middlebury Exam	10%
Participation	10%



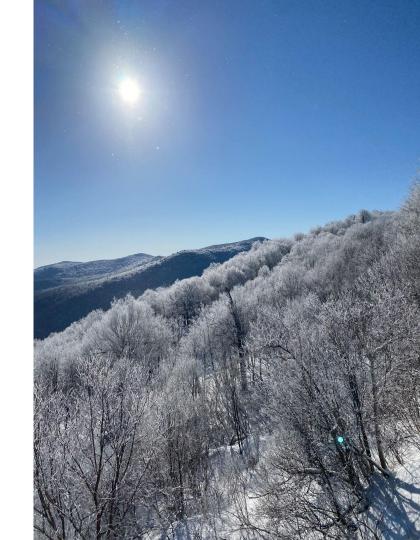
# Requirements Breakdown (cont'd)

J-Term Ski Test

- 2 days, first week of j-term
- Skiing and skills test
- Looking for EXPERT skiers/riders that are comfortable, in-control, and confident on ANY/ALL terrain

Class of I2-I5 "rookies" is selected unanimously in a deliberation directly after the second day of the ski test.

Medical factors including a student's combined OEC class score may be considered.



#### **Course Costs**

**NSP Membership Fee - \$80.00** 

**OEC Course Fee - \$80.00** 

\* PLEASE talk with us if these costs are prohibitive and we will find a solution.







- Attend class weekly
- Complete assigned online material and readings before lecture
- Ask questions, collaborate, and make mistakes
- HAVE FUN!

## **RESOURCES**

- OEC 6th ed
  - Copies are on reserve at Davis and Armstrong Libraries
- Website: <a href="http://middpatrol.squarespace.com/">http://middpatrol.squarespace.com/</a>
  - Where to find online chapter materials (under OEC tab)
- Instagram: @Midd\_SkiPatrol



**Outdoor** 

#### **CHAPTER 1**

# INTRODUCTION TO OUTDOOR EMERGENCY CARE





# HISTORY OF THE OEC

- Started in Stowe, VT by Charles "Minnie" Dole
- In 1938, he organized a the first ever volunteer ski patrol
- Since developed into the largest non-urban medical rescue organization.
- In the early 1980s created the first care guideline textbook titled *Winter Emergency Care*, which was shortly after renamed *Outdoor Emergency Care* 
  - OEC technicians would begin care of a patient in a wilderness situation, would continue care during transport, and would further continue care in a first-aid room or ski-area clinic.



# **OEC TODAY**

- OEC text is primarily focused on skiing, but also carries over to rafting, mountain biking, and other backcountry activities
- Course covers, human anatomy and physiology, patient assessment, medical and trauma intervention
- Practical trainings reinforce textbook material



# **OEC CERTIFICATION**

- 8 skills scenarios for practical exam
- 100 multiple choice test for written exam
- If passed, receive a three year certification
- Annual refresher course to keep up to date
- CPR is also required



## ETHICAL AND LEGAL ISSUES

- Responsibilities as a patroller:
  - Respect autonomy (independence)
  - Do no harm (nonmaleficence)
  - Benefit others (beneficence)
  - Be just (justice)
  - Be faithful (fidelity)
- Good Samaritan Laws
  - Laws protecting voluntary first aid caregivers
  - So long as their actions are not one of **gross negligence** (reckless disregard for the consequences of their actions)
- Duty to rescue, or duty to act
  - General citizen has no duty to rescue another individual
  - In uniform, on or off duty, you have a reasonable expectation to provide care to an injured person
  - i.e. the doctrine of public reliance



# ETHICAL AND LEGAL ISSUES (CONT'D)

- Inappropriate termination of first-aid care once begun is abandonment
  - Only ever transfer care to an individual of equal or higher training (higher scope of care)
- Negligence occurs when an caregiver harms an individual by not performing up to the standard of their training
- Patrollers are often protect by **assumption of risk**, whereby members of the public assume the inherent risk of skiing or riding



# PATIENT CONSENT

- Before providing first-air cade, permission/consent is required
- Must be **informed consent**, meaning the injured person must understand what actions the responder plants to take
- If someone is incapable of provided expressed consent then but would if they could this is **implied consent**
- The consent of a minor must be obtained from a parent or legal guardian
  - If not found implied consent typically allows first aid



# PATIENT REFUSAL

- A patient may refuse first aid care, we must abide by their request but carefully document their refusal
  - Touching someone who does not want to be touched is battery
  - Placing a person in the situation where they fear battery will occur is **assault**
- Finally all patrollers must abide by the guidelines of the Health Insurance Portability and Accountability Act (HIPAA)
  - Patrollers should protect the privacy of an individual and their medical information.



#### **CHAPTER 2**

# EMERGENCY MEDICAL CARE SYSTEMS





# LEVELS OF EMERGENCY PERSONNEL

- Prehospital providers: on scene medical care
- **EMR**: Emergency Medical Responder
- **EMT**: Emergency MEdical Technician
- **AEMT**: Advanced Emergency Medical Technician
- Paramedic
  - \* All have different levels of training, recert requirements and scopes of practice\*

## **CONTINUITY OF CARE**

- Seamless transfer of care from initial contact through definitive treatment
- Complicated by outdoor setting
- Commonality becomes increasingly important as a system grows
  - Common goals, language and practices

# COMMUNICATION AND DOCUMENTATION

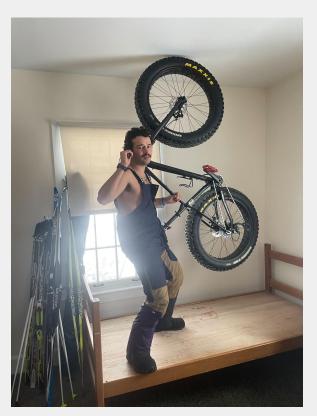
- **Communication Systems** = the connection between levels of the Emergency Care System
- Effective communication directly improves patient outcomes
- Medical Oversight
  - Direct
  - Indirect: Written Protocols local standards of care
- Documentation creates a record of events
  - Important clinical information that aids in continuity of care
  - research/ learning tool
  - Legally important

# **CONTINUING EDUCATION**

- Essential requirement
- Ensures responders' ability to perform their job



# LET'S MOVE AND LIFT!!!











See you next week! Don't forget to sign in!