

You Are the Rescuer

Discussion Resources

Over the past several years, your refresher committee has suggested that the best way to present “You Are the Rescuer” (YATR) is in a guided discussion format in small groups. There are many correct answers and many correct methods to solve the scenario. Does the rescue approach discussed meet the care objective?

- + **I can** discuss my possible solution in a guided discussion format.
- + **I can** listen to other possible solutions.
- + **I can** offer constructive feedback to all suggested solutions in that guided discussion format.

This year, three scenarios have been selected for the YATR exercise. Additionally, we once again invite you to compose your own scenario, one that is appropriate to your particular environment. Regardless of where the incident occurred—on the slopes, in the water, or during the summer at an event you attended—the assessment and basic emergency care remain essentially the same. Remember that we are OEC technicians year round. As you discuss the scenarios, keep in mind that there are many correct answers. “Solving the problem” is not the primary objective; a guided discussion of all the possible solutions is. Try to adapt the presented scenarios to your local needs and consider your local protocols.

LEADING QUESTIONS

DISCUSSION POINTS

As you approach this patient, what are your priorities?	Describe and discuss what you would do to: 1. Ensure scene safety; 2. Manage the scene; and 3. Assess the patient.
What possible problems do you think the patient may have?	Identify potential problems/signs and symptoms of each problem.
What resources might you need to manage this patient/situation?	For example: 1. Equipment; 2. Human resources; and 3. Resources needed at base.
What emergency care does this patient require?	Describe and discuss: 1. Immediate emergency care needs; 2. Needs during transport; 3. Needs in the patrol room; and 4. Important considerations.
What problem(s) might you encounter as you manage the scene?	For example: 1. Complications with the patient; 2. Crowd control; and 3. Challenging terrain.
What are your transport considerations?	For example: 1. From the accident scene to the base facilities; 2. ALS/BLS; or 3. Air ambulance.
How would your emergency care of this patient differ if you would have responded to this accident in a different season or activity?	

Scenario 1

Scenario 2



BRIGITTE SOHRAN-BROWN



NANCY PITSTICK

You and three friends are ice climbing on a popular waterfall that is reached by hiking up a well-established trail about 1.5 miles from the road. It is 28 F on a gorgeous, sunny morning. As you are roping up to climb one of the smaller routes on the side of the main fall, you hear a scream. You look up and watch in horror as a climber who was trying to place an ice screw about 15 feet up the main line falls and lands face-down on the icy ground. You race to the stricken man's side just as he struggles to sit up. He is approximately 35 years old, appears dazed and is gasping for breath. He is bleeding from the nose and mouth. You instruct your friend, a fellow OEC technician, to stabilize his head while you do a rapid assessment, which reveals an unstable sternum, an apparent humeral fracture, and pain in the upper left quadrant. You and your friends are all OEC technicians; none of the other six people standing around have any first aid training. What do you do?

NOTES

You are driving down a two-lane road at 45 mph on your way to the resort when a car driving towards you suddenly swerves to the shoulder, makes a U-turn, and races past you. Just as you are muttering disgust for the hair-brained maneuver, he slams on his brakes and stops in the middle of the road.

You then see the cause of his seemingly erratic driving behavior. A pedestrian is lying in the middle of a crosswalk and is not moving. Traffic is heavy, but most vehicles immediately pull to the side of the road. You run up the road to the scene to offer assistance.

As you approach the scene, you see an approximately 75 year old woman in a running suit and shoes sprawled in a contorted manner in the middle of the crosswalk stripes; she is not moving. The erratic driver is leaning over the woman, apparently checking for a carotid pulse. As you approach, you identify yourself as a ski patroller to anyone who is listening and offer to help. The man says he is a First Responder. You note that there is blood coming from the woman's mouth and nose, and she is making gurgling sounds as she breathes. There is severe mid-shaft angulation in her lower right leg and right forearm. The man tells you that she has no carotid pulse and asks you to help turn her supine to start CPR; however, you note that she is continuing to breathe regularly and her neck is very contorted. A quick check of her radial pulse reveals a strong, rapid pulse, which you communicate to the First Responder. With that information, the First Responder backs off from the scene and leaves. A large crowd from the neighborhood is rapidly forming and two people have taken over traffic control. They tell you they have called 911.

