



# **TEACHER'S MANUAL**

# Course: Patient Transfer and Evacuation















## **Teachers manual**

The purpose of the teacher's manual is to assist teachers in organizing and introducing training courses. It is not the intention of teacher's manual to present teachers with a rigid

"teaching package" which they are expected to "follow blindly". Educational systems and the cultural backgrounds of trainees in maritime subjects vary considerably from country to country, the teacher manual has been designed to give ideas to you to use material done in OnBoard Med –project in use.

## Patient transfer and evacuation 2 ECTS (54 hours)

#### **Objects: Student**

- understand ship as rescue environments, and they should be able to safely support, transfer and transport patients in various ship emergency evacuation scenarios
- understand the regulation / guidelines /protocols etc. about patient transfer and evacuation
- describe their own responsibility and actions and that of the members of their profession in situations
- know the organization in transfer and evacuation situation
- increase their readiness to work independently and on their own initiative in different kind of situations
- take into account the safety risks of the environment and know how to ensure safety in patient transfer and evacuation
- increase his or her specialist skills in the patient transfer and evacuation
- can use safely different kind of transfer equipment's and can choose right transfer equipment for the individual patient

#### Content:

- the regulations guiding the preparations for exceptional conditions
- responsibility and actions and that of the members of their profession in danger situations
- the organisation
- the leadership and procedure models in accidents and exceptional conditions
- the safety risks of the environment
- how to ensure safety by patient transfer and evacuation
- ergonomic by transferring the patient
- different transfer and evacuation equipment's
- demonstrate their competence and use of equipment in patient transfer and evacuation in simulated situation

#### Implementation:

- lecture
- pair and Group activities
- online work
- independent work
- simulation

#### Assessment:

• study diary (fail, 1-5)













- written paper (group work) (fail, 1-5)
- online learning (done/ refill)
- skill labs and simulations (fail / pass)

## SUMMARY

CONTENT	TIME	LEARNING METHODS and MATERIAL	ASSESSMENT
<ol> <li>List all the equipment what you have on board for patient transfer and evacuation.</li> <li>Demonstrate two the most challenging patient transfer situation on board</li> <li>Watch two other student's videos and analyze.</li> <li>What kind of education is needed for the transfer and evacuation situations?</li> </ol>	8 h	individual pre-work and video (more in the teacher tips)	
Challenges in patient transfer on board	2-6 h	group discussion online or on teachers lead	done / refill
Safety on board (risk analyze and ship as environment)	4-10 h	online discussion lecture	ELLINOR
Patient position after different sickness and injuries	6 h	self-study (table exercise)	
How the different positions helps the body in different situation	1 h	online-lecture or teachers lecture	
First aid positions (emergency care)	2 h	2-3 group work (one is the patient and one is the helper and then change the roles) (in teacher tips)	peer assessment fail / pass
Different positions (medium to hard, with cABCDE)	2-4 h	Skill lab / patient scenario - exercise (teachers tips)	peer assessment fail / pass
Different kind of transfer equipments	2-4 h	Skill lab (teacher tips)	fail / pass
Ergonomic by patient transfer (occupational safety)	2-4h	Lecture Skill lab	













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Patient handling, transfer and	4-6 h	Patient simulation (the difficult after	teacher and peer
evacuation with different		student's knowledge and skills)	assessment
equipment´s			6 H /
			fail / pass
Regulations in patient transfer			SERGEJS
and evacuation			
Roles in patient transfer and		presentation	
evacuation		???	
Safe evacuation	6+4 h	Read the articles (at home)	fail / re-done
		Group discussion online (Optima) about	
		the subject or you can do that at school	
		as well.	
		as wen.	
		Evacuation lecture	
Patient transfer and evacuation	2-4 h +	End simulation	fail / re-done
simulation	prepar		
	ation 4		
	h		













# **TIPS FOR THE TEACHER**

# Pre-exercise (before the course starts):

1. List all the equipment what you have on board for patient transfer and evacuation. Choose three equipment and learn how to use them and write down what type of situation you would use it and why

2. Demonstrate two the most challenging patient transfer situation on board and video them with you mobile phone (5-10 min long). Analyze what makes it challenging and what type of education is needed. Write text and return with your videos.

3. Watch two other students taken videos and analyze them as well. Why the patient transfer is there challenging? Are there same things than in your or something else? Write text about you analyze. Watch also you ergonomic. Are you movements right or is there something were you can pay attention?

4. What kind of education is needed for the transfer and evacuation situations?

## Table-exercise

Every student fills the table alone and then you can exercise the different position.

Or table can be filled in small groups as well.

# Practical exercise after "table"-exercise and lecture

- Practice different kind of challenger transfers and different kind of equipment
  - Get familiar with new equipment's / equipment's you have in use
  - Practice to use them with your pair.
- Practice patient scenarios in groups (4-5)
  - one students is the patient and two are positioning the patient and 1-2 are observing and giving feedback
  - After positioning the patient practice the transferring.
  - Scenarios (more challenging) has the right answers and how should the patient act like
- Ergonomic
  - observers gives feedback for you ergonomic (checklist) as well as transfer













# Scenarios First Aid (Easy)

Patient	background	Technique and Equipment to practice
unconscious	does not answer to the talk no visible injuries	Recovery position both sides. Unconscious lays (different positions) on the ground, sit on the chair etc. What equipment you could use to transfer the patient?
abdominal pain		lyinging down, legs bend
bleeding limb	has cut big scarf in the the leg	Conscious
breathing problem		
epilepsy	seizure on the ground	Hold the head while seizure and the recovery position
shock	had got anaphylaxis from food	Position where breathing is easy. Not standing
burn in the leg	Patient is lying under the bench and can't get out of there.	Emergency transfer away from fire as soon as possible. Do not forget your own safety.
One choice???		













# Patient position and transfer exercise

Make pairs. One of the students / refreshers acts as a patient and the other one is the interviewer. You can give the roles to the pair, f. ex. mariner call to the captain or... At the same time you can practice how to use the device used on board. The most important part is how to act like patient, so do not tell what symptoms you have, act them (as long it is possible)!

# Pair Activity: patient scenario

Make pairs. One of the students / refreshers acts as a patient and the other one is the interviewer. Patient acts like patient (more realistic the better) and Interviewer practice interview, patient triage, examination and documentation and the end the ISBAR by consulting the doctor.

You can puzzle this exercise as you like. You can to this exercise without documentation at first. And then do the documentation as a separate exercise. Students can use triage guide, primary and secondary evaluation guide in this exercise.

# Patient scenario 1 for practice:

Patient gives the details only when asked or measured.

- *What had happened*: 42-year man (John Smith) in the bar on the ship after fight. Broken bottle had made deep wound in the right under arm.
- What do you first (START): Stop bleeding. After that you can continue primary triage and then you can continue the further assessment. Patient is awake but sleepy. Breathing is normal and normal frequency. No need the spinal immobilisation. Radial pulse is fast.
- *ALARM*: how does the protocol go? Where do you call? What device are you using? Why?
- TIP FOR PATIENT: What is the Best position if you are not in good position start to move.
- Assessment (ABCDE): Patient saturation 96 %, breathing normal. Patient answers in low pace and tired to the asker questions. Breathing rate 24/min. Auscultation clear and symmetric. NIBP 120/82 mmHg, Heart rate 126/min. Skin is warm and dry. Under arm wound bleeds even if there is pressure bandage. Blood lost one litre. Fingers in both hands are quite cold. Patient tells that he feels dizzy. GCS 15. Pain in the arm and NRS 7 (pain scale). Blood sugar 4,4 mmol/l. Temperature (oto)36,0 °C. Alco 0,0 promil. Patient should be examined more to find out other problems. No other visible injuries or bleeding than in the arm.
- *Position:* if patient is awake: supine position (airway open), bleeding limb elevated, if not awake then recovery position and limb elevated to stop the bleeding.
- ISBAR Request: Patient hemodynamic (BP, P) is those bleeding quite stable. The compensation mechanisms cannot hold that stable much longer. Patient bleeding has to stop somehow and transported to the hospital as soon as possible.













Debrief:

- How did that go?
- How did you do? What do you know about patient's condition? How about the handling and positioning the patient? What about those went good? How about patient safety?
- What did you learn?

# CHANGE THE ROLES !!

# Patient scenario 2 for practice:

Patient gives the details only when asked or measured.

- What had happened: 24-years old male (David Moon). He is drunk and felt down stairs, about 10 stars. End of the stair he landed right foot ahead and felt down. Now sits there.
- What do you first (START): No heavy bleeding. No need to immobilize the spine. Airway is open and he is awake. He is clearly drunk but says hello to the helpers. Radialis pulse feels strong.
- *ALARM*: how does the protocol go? Where do you call? What device are you using? and why?
- Assessment (ABCDE): Patient SpO2 is 96 %, breathing is easy and he speaks long sentences. Breathing rate (BR) is 24/min. Breathing sounds are clear and symmetrical. Blood Pressure (BP) 138/91 mmHg, HR 110/min. His skin is warm, dry and healthy color. Right foot is swollen beneath the ankle, skin is healthy, but purple. Pulse in the leg is strong. Leg is very painful. He can barely move his toes. Patient tells that otherwise his ok. You can't see any other injuries. Patient has tried to stand up but could not do it. Pain is NRS 9. He is drunk, but talks clearly. GCS 15. Blood sugar 7,8 mmol/l. Temperature (oto) 37,0 °C. Alco 1,2 promille.
- *Position and Transfer:* if patient is awake: supine position (airway open), bleeding limb elevated, if not awake then recovery position and limb elevated to stop the bleeding.
- *ISBAR Request:* After interview, symptoms and injuries you can suspect fracture in the foot area. Patient is stable but he needs doctor for x-ray and fracture treatment.

Debrief:

- How did that go?
- How did you do interview go? How about Triage? How about ABCDE? What about those went good?
- What did you learn?

# **Mariners Health and Health Promotion**

Procedures to handle crews health, supportive methods for discussion in difficulty situations onboard I ECTS













#### OBJECTIVES

- know, how to assess mariner's health condition onboard
- know, which are mariners health problems nowadays
- Know, how to handle these health problems (for example obesity, cardiovascular diseases)
- know, how to prevent these -> Health promotion
- Procedures: Guidance, dialogy discussion, debriefing (Individual/group)
- NOTE! Material in course Crowd and Crisis management. Debriefing and human factors.

#### **CONTENT / TIME**

- Info
- Mariners health and health problems
- Health promotion
- Procedures: Guidance, dialogy discussion, debriefing













