

# Arizona Peace Officer Standards and Training

## Basic Curriculum Lesson Plan

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**LESSON TITLE: FIRST AID - BLEEDING AND RELATED INJURIES 8.1**

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SUBJECT:	First Aid (Bleeding/Related Injuries)
AZ POST DESIGNATION:	8.1.10
HOURS:	1.5
COURSE CONTENT:	Instruction on the function and design of the circulatory system. Instruction includes treatment for bleeding and specific injuries.
PERFORMANCE OBJECTIVES:	<p>Upon completion of this course of instruction, students using notes, handouts and other support materials as references, within the allotted time, will:</p> <p>8.1.10      Given written, verbal or visual descriptions of bleeding persons, identify the types of bleeding and the proper methods for reducing blood flow, to include:</p> <p>A.      Methods:</p> <p>          1.      Direct pressure.</p> <p>          2.      Tourniquet.</p> <p>B.      Specific injuries:</p> <p>          1.      Abdominal injuries.</p> <p>          2.      Avulsed parts.</p> <p>          3.      Face/scalp wounds.</p> <p>          4.      Impaled objects.</p> <p>          5.      Lacerations.</p> <p>          6.      Nose bleeds.</p> <p>          7.      Puncture wounds.</p> <p>          8.      Amputated body parts.</p>

**LESSON TITLE: FIRST AID  
BLEEDING AND RELATED INJURIES**

**PAGE: 2**

DATE FIRST PREPARED: January 1998  
PREPARED BY: Allen Weston

REVIEWED – **REVISED**: David Kleinman DATE: December 1998  
**REVIEWED** – REVISED: Sgt. W. Wright ALEA DATE: January 2001  
Course Revision 2001

**REVIEWED** – REVISED: SME Committee DATE: October 2003  
REVIEWED – **REVISED**: Officer Tim Taylor, DATE: February 2004  
SME Chairman

REVIEWED – **REVISED**: AZ POST – Hours corrected DATE: June 2006  
REVIEWED – **REVISED**: SME First Aid Group DATE: November 2017  
REVIEWED – REVISED: Jenny Hancock AZDPS DATE: July 2022  
AZPOST

REVIEWED – REVISED: DATE:  
AZ POST – APPROVAL: Don Yennie DATE: November 2017  
AZ POST – APPROVAL: Lori Wait DATE: July 2022

INSTRUCTOR REFERENCES: Emergency Care and Transportation of the sick and injured 12th Edition.

CLASS LEVEL: Student

TRAINING AIDS:

INSTRUCTIONAL STRATEGY:

SUCCESS CRITERIA: 70% or higher on a written, multiple-choice examination.

COMPUTER FILE NAME: Bleeding and Related Injuries.

DATE RELEASED TO THE SHARE FILE: September 2023

**I. INTRODUCTION**

- A. Instructor – (self) introduction.
- B. Preview of performance objectives.

**II. TYPES OF INJURIES**

A. Internal:

- 1. No observation of bleeding.
- 2. Will see the signs and symptoms of shock.
- 3. Treat for shock. (Review signs and symptoms of hypovolemic shock)

**P. O. 8.1.11**

B. External:

- 1. Visually observe some type of bleeding.

**III. THE PRIMARY OBJECTIVE IN ALL EXTERNAL INJURIES IS TO STOP PROFUSE BLEEDING**

A. Direct pressure.

**P. O. 8.1.10B1**

- 1. Gloved hand/dressing.
  - a. Dressing – material placed over a wound.
    - i. Gauze.
    - ii. Bulky.
    - iii. Occlusive (airtight).
    - iv. Use what you have; sterile is best, but do not leave the patient to try and find something.
  - b. A bandage holds the dressing in place.
    - i. Bandage only after the bleeding is controlled.
    - ii. Never remove, always add.
    - iii. The bandage is wrapped from below the wound to the top, covering the entire dressing.

- iv. Apply enough pressure to control the bleeding.
      - v. Check the pulse. (At a foot or wrist on the same limb that is injured.)
    - 2. Place over the wound, hold and apply steady pressure.
  - A. On arteries, this technique takes 10-30 minutes. Pulsating action stops clotting from taking place.
  - B. Tourniquet. **P. O. 8.1.10A2**
    - 1. Use when bleeding cannot be controlled with direct pressure.
      - a. Used for amputation.
      - b. Used only on extremities.
      - c. Stops blood flow past the point of the tourniquet.
    - 2. Method:
      - a. Commercially Available Tourniquet- Follow the instructions to apply correctly.
      - b. Tourniquet placement.
        - i. Locate appropriate site.
        - ii. Place the tourniquet 3 to 4 inches above the wound site.
        - iii. If unable to locate the wound site, place a tourniquet as high as possible on the limb.
        - iv. Tighten until bleeding stops or no distal pulses felt.
      - c. Note the time tourniquet is applied and notify EMS.
      - d. Never loosen a tourniquet.

**IV. TYPES OF COMMON EXTERNAL BLEEDING INJURIES**

- A. Abrasions- Control bleeding and bandage.
- B. Cuts, lacerations, incisions- Control bleeding and bandage. (Surface injuries)

**P. O. 8.1.10B5**

C. Punctures and Penetrating wounds. **P. O. 8.1.10B7**

1. Use occlusive dressing on the torso or neck.
2. Control bleeding and bandage.

D. Avulsions. **P. O. 8.1.10B1**

1. Reposition the skin. (A piece of skin torn off or left hanging as a flap)
2. Control bleeding and bandage.

E. Amputations. **P. O. 8.1.10B8**

1. Bulky dressing. **P. O. 8.1.10B1**
2. Preserve part.
3. Keep cool and dry.

## **V. SPECIFIC INJURIES**

A. Abdominal injuries.

1. Contains both hollow and solid organs. (Hollow - Stomach, intestine, etc. Solid - Liver, pancreas and spleen.)
  - a. The rupture of hollow organs allows waste contents to spill into the peritoneal cavity.
  - b. The rupture of solid organs results in severe bleeding.
2. Treatment of injury.
  - a. Internal.
    - i. Treat for shock. Organs such as the liver and spleen can lose a lot of blood, if damaged.
    - ii. May make the patient more comfortable by holding a pillow on his/her abdomen.
  - b. External (protruding organs).
    - i. Normal procedure.

- ii. Be alert for vomiting.
- iii. Cover exposed internal organs with occlusive dressing, such as plastic wrap. Keep organs cool and moist.
- iv. Do not try and push the organs back in.

**B. Impaled objects.**

**P. O. 8.1.10B4**

**1. Treatment of injury.**

- a. Do not remove. One (1) exception is noted below.
- b. Stabilize bulky dressing.
- c. Bandage in place.
- d. Do not shorten, cut or break off unless you cannot transport.

**2. Impaled object in cheek.**

- a. This is the exception, **if it is making breathing difficult.**
- b. Check to see if it passed through.
  - i. One (1) side – pull out in the direction in which it entered.
  - ii. Two (2) sided – pack inside the cheek first and then remove. Do not obstruct the airway with dressing.
- c. Standard treatment for an impaled object.

**C. Scalp and face wounds.**

**1. Bleed heavily.**

**P. O. 8.1.10B3**

**2. Assess for skull fractures.**

**3. Do not apply pressure to head wounds if skull fracture is possible.**

**D. Nosebleeds.**

**1. Pinch nostrils.**

**P. O. 8.1.10B6**

2. Sitting position, leaning forward.
  3. Assess for head/neck injuries.
- E. Mental exercise:
1. You stop to assist a motorist changing a tire. While you are talking to him, the jack slips and the car falls. The wheel-well trim cuts his arm, leaving a five (5)-inch laceration on his forearm. The man grabs his arm and sits down.
    - a. What do you do first?
    - b. What do you do next?
    - c. What is your first intervention?
    - d. Once the bleeding is controlled, what would be your next intervention?
    - e. What is your final step?

## **VI. CONCLUSION**

- A. Review of performance objectives.
- B. Final questions and answers.
- C. Instructor closing comment(s).