

Profile information current as at 13/05/2024 08:23 am

All details in this unit profile for PMSC20017 have been officially approved by CQUniversity and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

# **General Information**

#### Overview

In this unit, you will be introduced to the indirect threat care environment, which signals a shift through risk deescalation from basic life support to advanced life support treatment methods. You will further your knowledge of the comprehensive trauma assessment of patients, combining the skills of clinical history taking with those of physical examination using a trauma focused primary survey. In addition, you will undertake a review of clinical findings and incorporate differential diagnosis to implement an appropriate treatment plan in preparation for evacuation. Risk mitigation and situational awareness techniques will be added to the clinical assessment to ensure a measured situational response in the event of threat re-escalation.

## **Details**

Career Level: Postgraduate

Unit Level: Level 8 Credit Points: 6

Student Contribution Band: 8

Fraction of Full-Time Student Load: 0.125

# Pre-requisites or Co-requisites

There are no requisites for this unit.

Important note: Students enrolled in a subsequent unit who failed their pre-requisite unit, should drop the subsequent unit before the census date or within 10 working days of Fail grade notification. Students who do not drop the unit in this timeframe cannot later drop the unit without academic and financial liability. See details in the <a href="#">Assessment Policy and Procedure (Higher Education Coursework)</a>.

# Offerings For Term 2 - 2019

• Online

# Attendance Requirements

All on-campus students are expected to attend scheduled classes – in some units, these classes are identified as a mandatory (pass/fail) component and attendance is compulsory. International students, on a student visa, must maintain a full time study load and meet both attendance and academic progress requirements in each study period (satisfactory attendance for International students is defined as maintaining at least an 80% attendance record).

## Website

This unit has a website, within the Moodle system, which is available two weeks before the start of term. It is important that you visit your Moodle site throughout the term. Please visit Moodle for more information.

# Class and Assessment Overview

#### Recommended Student Time Commitment

Each 6-credit Postgraduate unit at CQUniversity requires an overall time commitment of an average of 12.5 hours of study per week, making a total of 150 hours for the unit.

# Class Timetable

#### **Regional Campuses**

Bundaberg, Cairns, Emerald, Gladstone, Mackay, Rockhampton, Townsville

#### **Metropolitan Campuses**

Adelaide, Brisbane, Melbourne, Perth, Sydney

# **Assessment Overview**

1. Case Study Weighting: 35% 2. Case Study Weighting: 35%

3. Written Assessment

Weighting: 30%

# Assessment Grading

This is a graded unit: your overall grade will be calculated from the marks or grades for each assessment task, based on the relative weightings shown in the table above. You must obtain an overall mark for the unit of at least 50%, or an overall grade of 'pass' in order to pass the unit. If any 'pass/fail' tasks are shown in the table above they must also be completed successfully ('pass' grade). You must also meet any minimum mark requirements specified for a particular assessment task, as detailed in the 'assessment task' section (note that in some instances, the minimum mark for a task may be greater than 50%). Consult the <u>University's Grades and Results Policy</u> for more details of interim results and final grades.

# **CQUniversity Policies**

#### All University policies are available on the CQUniversity Policy site.

You may wish to view these policies:

- Grades and Results Policy
- Assessment Policy and Procedure (Higher Education Coursework)
- Review of Grade Procedure
- Student Academic Integrity Policy and Procedure
- Monitoring Academic Progress (MAP) Policy and Procedure Domestic Students
- Monitoring Academic Progress (MAP) Policy and Procedure International Students
- Student Refund and Credit Balance Policy and Procedure
- Student Feedback Compliments and Complaints Policy and Procedure
- Information and Communications Technology Acceptable Use Policy and Procedure

This list is not an exhaustive list of all University policies. The full list of University policies are available on the CQUniversity Policy site.

# Previous Student Feedback

# Feedback, Recommendations and Responses

Every unit is reviewed for enhancement each year. At the most recent review, the following staff and student feedback items were identified and recommendations were made.

# Feedback from Verbal, during residential school

#### **Feedback**

The assessments are too close together

#### Recommendation

The assessments will be spread out more evenly in the next iteration of the unit where possible. Assessment tasks are made available on the unit moodle page and students will be encouraged to engage with the assessment tasks earlier to ensure there is enough time to complete each assessment.

# **Unit Learning Outcomes**

### On successful completion of this unit, you will be able to:

- 1. Formulate a comprehensive tactical primary survey including a clinical assessment of physiological systems
- 2. Synthesise data obtained from clinical assessments to construct treatment plans that address and prioritise the major causes of trauma death at an advanced life support level
- 3. Discuss the importance of assessing and maintaining operational control and managing patient movement during threat re-escalation.

# Alignment of Learning Outcomes, Assessment and Graduate Attributes Intermediate Introductory Graduate Professional Advanced Level F Level Level Level Level Alignment of Assessment Tasks to Learning Outcomes **Assessment Tasks Learning Outcomes** 1 2 3 1 - Case Study - 35% 2 - Case Study - 35% 3 - Written Assessment - 30% Alignment of Graduate Attributes to Learning Outcomes **Graduate Attributes Learning Outcomes** 2 1 3 1 - Knowledge 2 - Communication

Graduate Attributes		Learning Outcomes						
			1		2		3	}
3 - Cognitive, technical and creative skills			0		0		0	
4 - Research								
5 - Self-management								
6 - Ethical and Professional Responsibility					0			
7 - Leadership							o	
8 - Aboriginal and Torres Strait Islander Cultures								
Alignment of Assessment Tasks to Graduate	Attribut	es						
Assessment Tasks	Graduate Attributes							
	1	2	3	4	5	6	7	8
1 - Case Study - 35%	o	0	0					
2 - Case Study - 35%	o	o	0			0		

# Textbooks and Resources

# **Textbooks**

There are no required textbooks.

#### **Additional Textbook Information**

Students will have online access to the required textbook: Ciottone's Disaster Medicine, second edition, Elsevier. Students who require additional clinical background information may refer to Emergency and Trauma Care for Nurses and Paramedics, K.Curtis, Elsevier. Additionally, students will have online access to the Journal of Special Operations Medicine (JSOM) Tactical Paramedic Protocols handbook.

## IT Resources

# You will need access to the following IT resources:

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)

# Referencing Style

All submissions for this unit must use the referencing style: <u>Harvard (author-date)</u> For further information, see the Assessment Tasks.

# **Teaching Contacts**

## Aldon Delport Unit Coordinator

a.delport@cqu.edu.au

# Schedule

Week 1 - 15 Jul 2019

Module/Topic

Chapter

**Events and Submissions/Topic** 

Triage.

Triage HX.

Tactical triage.

Triage in dynamic events.

Systems of care.

Casualty Clearing Stations.

Use of advanced practitioners

and physicians.

Week 2 - 22 Jul 2019

Module/Topic

Chapter

**Events and Submissions/Topic** 

**Haemorrhage control.** 

Junctional haemorrhage.

Wound packing.

Junctional tourniquets.

Innovative junctional

haemorrhage control.

Introduction to REBOA.

Week 3 - 29 Jul 2019

Chapter

**Events and Submissions/Topic** 

Airway management.

Airway anatomy and physiology.

Basic manoeuvres and

positioning.

Module/Topic

Basic adjuncts.

Intermediate adjuncts.

Advanced airway control.

Surgical airway.

Week 4 - 05 Aug 2019

Module/Topic

Chapter

**Events and Submissions/Topic** 

Respiratory.

Anatomy and physiology.

Closed/open/tension

pneumothorax and other lung

pathologies.

Ventilation.

Basic mechanical ventilation.

Week 5 - 12 Aug 2019

Module/Topic

Chapter

**Events and Submissions/Topic** 

Bleeding control. IV IO. Fluid Resuscitation. TQ assessment and deescalation.		
Vacation week - 19 Aug 2019		
Module/Topic	Chapter	Events and Submissions/Topic
Week 6 - 26 Aug 2019		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
Head injury and hypothermia. Patient warming options. Head injuries. Cerebral perfusion pressure. Mean arterial pressure.		
Week 7 - 02 Sep 2019		
Module/Topic	Chapter	Events and Submissions/Topic
Pharmacology 1. Pharmacology terms. Trauma-specific medications. Triple option pain management.		<b>Tactical primary survey-Case</b> <b>study</b> Due: Week 7 Monday (2 Sept 2019) 11:55 pm AEST
Week 8 - 09 Sep 2019		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
Pharmacology 2. Antibiotics.		
Week 9 - 16 Sep 2019		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
Extremity trauma. Extremity fractures. Pelvic fractures. Splinting. Traction splinting. Other fractures.		Fluid Therapy-Case study Due: Week 9 Monday (16 Sept 2019) 11:55 pm AEST
Week 10 - 23 Sep 2019		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
<b>Burns.</b> Burns Pathophysiology. Burns resuscitation.		
Week 11 - 30 Sep 2019		
Module/Topic	Chapter	<b>Events and Submissions/Topic</b>
<b>Traumatic resuscitation.</b> Evidence review of traumatic resuscitation.		Patient movement Due: Week 11 Monday (30 Sept 2019) 11:55 pm AEST
Week 12 - 07 Oct 2019		
Module/Topic	Chapter	Events and Submissions/Topic

**Damage control resuscitation** 

<u>1.</u>

#### Review.

Review of TECC ITC. Penetrating eye trauma.

#### Review/Exam Week - 14 Oct 2019

Module/Topic Chapter Events and Submissions/Topic

Exam Week - 21 Oct 2019

Module/Topic Chapter Events and Submissions/Topic

### **Assessment Tasks**

# 1 Tactical primary survey-Case study

#### **Assessment Type**

Case Study

#### **Task Description**

In the tactical medical context, you will approach the primary survey differently to the traditional EMS primary survey. This approach is based on our understanding of the preventable causes of death in the tactical context. You will be provided with a clinical case as a catalyst to reflect on the differences between the standard primary survey and a tactical primary survey. You must rationalise the differences by referring to the current evidence related to preventable causes of death and the inherent risk of conducting medical treatment in a threat-potentiated environment.

Your case study must include the following information

- Tabulate the differences between a tactical primary survey and a standardised EMS primary survey.
- Discuss your plan for the most appropriate treatment for your patient using the skills matrix within the framework of the tactical primary survey.
- Rationalise your decisions to defer or prioritise treatments based on the context of the indirect threat care environment and the flow of a tactical medical case.
- Rationalise your recommended interventions using the best current evidence for the tactical primary survey.

#### **Assessment Due Date**

Week 7 Monday (2 Sept 2019) 11:55 pm AEST

### **Return Date to Students**

Week 9 Monday (16 Sept 2019)

#### Weighting

35%

#### Minimum mark or grade

50%

#### **Assessment Criteria**

There is a minimum word count of 2000 words with 10% deviation excluding references for your assessment. Your case study will be clear and concise. The case study will be assessed in accordance with the information and rubric provided on the units Moodle page. It should be presented in an essay format.

The case study is worth 35% of your overall unit mark.

### **Referencing Style**

• Harvard (author-date)

#### **Submission**

Online

#### **Learning Outcomes Assessed**

· Formulate a comprehensive tactical primary survey including a clinical assessment of physiological systems

#### **Graduate Attributes**

- Knowledge
- Communication
- Cognitive, technical and creative skills

# 2 Fluid Therapy-Case study

# **Assessment Type**

Case Study

#### **Task Description**

There are currently few "fluid" choices for patients who have suffered major trauma and who are being treated by paramedics from a civilian sector EMS system. You will be given a list of patients with varying trauma pathologies and you must choose the optimal fluid resuscitation strategy for each pathology based on the current best evidence within the tactical medical context. You must provide the rationale for your choice based on the best available evidence. You must also consider the environmental and logistical aspects of carrying and administering your fluids of choice and describe how you will allocate and distribute fluid resources in a hypothetical team setting. You are not limited in your exploration of fluid choices by any clinical practice guidelines and you are encouraged to explore and consider fluids that are not in your current scope of practice.

Your case study report must include:

- Tabulate the pros and cons of different fluids based on the best current evidence.
- Discuss your logistical and allocation plan.
- Rationalise your fluid choices based on the presenting pathologies of each case.

#### **Assessment Due Date**

Week 9 Monday (16 Sept 2019) 11:55 pm AEST

#### **Return Date to Students**

Week 11 Monday (30 Sept 2019)

#### Weighting

35%

#### Minimum mark or grade

50%

#### **Assessment Criteria**

There is a minimum word count of 2000 words with 10% deviation excluding references for your assessment. Your case study will be clear and concise. The case study will be assessed in accordance with the information and rubric provided on the units Moodle page. It should be presented in an essay format.

The case study is worth 35% of your overall unit mark.

#### **Referencing Style**

• Harvard (author-date)

## **Submission**

Online

#### **Learning Outcomes Assessed**

- Formulate a comprehensive tactical primary survey including a clinical assessment of physiological systems
- Synthesise data obtained from clinical assessments to construct treatment plans that address and prioritise the major causes of trauma death at an advanced life support level
- Discuss the importance of assessing and maintaining operational control and managing patient movement during threat re-escalation.

#### **Graduate Attributes**

- Knowledge
- Communication
- Cognitive, technical and creative skills
- Ethical and Professional Responsibility

# 3 Patient movement

#### **Assessment Type**

Written Assessment

## **Task Description**

Spinal immobilisation is practised as routine by paramedics in the civilian context. Discuss the current evidence and describe how it supports or refutes the need for aggressive spinal immobilisation in tactical contexts. Your discussion must be supported by the best evidence currently available on the topic of spinal immobilisation in the tactical environment.

Your report must include:

- Critically appraise the evidence for or against spinal immobilisation in tactical contexts.
- In relation to C-TECC and CoTCCC guidelines, discuss current recommendations for spinal immobilisation in tactical contexts.
- Consider the evidence and guidelines and discuss how you would balance the tension between medicine and tactics in a threat-potentiated environment.
- You will be given a case study to focus your discussion.

#### **Assessment Due Date**

Week 11 Monday (30 Sept 2019) 11:55 pm AEST

# **Return Date to Students**

Review/Exam Week Monday (14 Oct 2019)

#### Weighting

30%

## Minimum mark or grade

50%

#### **Assessment Criteria**

There is a minimum word count of 2000 words with 10% deviation excluding references for your assessment. Your case study will be clear and concise. The case study will be assessed in accordance with the information and rubric provided on the units Moodle page. It should be presented in an essay format.

The report is worth 30% of your overall unit mark.

#### **Referencing Style**

• Harvard (author-date)

#### **Submission**

Online

## **Learning Outcomes Assessed**

• Synthesise data obtained from clinical assessments to construct treatment plans that address and prioritise the

major causes of trauma death at an advanced life support level

• Discuss the importance of assessing and maintaining operational control and managing patient movement during threat re-escalation.

#### **Graduate Attributes**

- Knowledge
- Communication
- Cognitive, technical and creative skills
- Leadership

# **Academic Integrity Statement**

As a CQUniversity student you are expected to act honestly in all aspects of your academic work.

Any assessable work undertaken or submitted for review or assessment must be your own work. Assessable work is any type of work you do to meet the assessment requirements in the unit, including draft work submitted for review and feedback and final work to be assessed.

When you use the ideas, words or data of others in your assessment, you must thoroughly and clearly acknowledge the source of this information by using the correct referencing style for your unit. Using others' work without proper acknowledgement may be considered a form of intellectual dishonesty.

Participating honestly, respectfully, responsibly, and fairly in your university study ensures the CQUniversity qualification you earn will be valued as a true indication of your individual academic achievement and will continue to receive the respect and recognition it deserves.

As a student, you are responsible for reading and following CQUniversity's policies, including the **Student Academic Integrity Policy and Procedure**. This policy sets out CQUniversity's expectations of you to act with integrity, examples of academic integrity breaches to avoid, the processes used to address alleged breaches of academic integrity, and potential penalties.

#### What is a breach of academic integrity?

A breach of academic integrity includes but is not limited to plagiarism, self-plagiarism, collusion, cheating, contract cheating, and academic misconduct. The Student Academic Integrity Policy and Procedure defines what these terms mean and gives examples.

#### Why is academic integrity important?

A breach of academic integrity may result in one or more penalties, including suspension or even expulsion from the University. It can also have negative implications for student visas and future enrolment at CQUniversity or elsewhere. Students who engage in contract cheating also risk being blackmailed by contract cheating services.

#### Where can I get assistance?

For academic advice and guidance, the <u>Academic Learning Centre (ALC)</u> can support you in becoming confident in completing assessments with integrity and of high standard.

What can you do to act with integrity?



#### **Be Honest**

If your assessment task is done by someone else, it would be dishonest of you to claim it as your own



# Seek Help

If you are not sure about how to cite or reference in essays, reports etc, then seek help from your lecturer, the library or the Academic Learning Centre (ALC)



# **Produce Original Work**

Originality comes from your ability to read widely, think critically, and apply your gained knowledge to address a question or problem