PMSC20017 *Indirect Threat Care*
Term 1 - 2021

Profile information current as at 12/10/2024 12:14 pm

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 de-escalation 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 Assessment Policy and Procedure (Higher Education Coursework).

Offerings For Term 1 - 2021

- 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 University's Grades and Results Policy 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 Informal feedback

Feedback

Students appreciated the contemporary knowledge provided in this unit.

Recommendation

Content will continue to evolve to ensure students receive contemporary knowledge related to the tactical, and more specifically, the indirect phase of tactical medical care.

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

— N/A Level | • Introductory Level | • Intermediate Level | • Graduate Level | ∘ Professional Level | ∘ Advanced 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		
	1	2	3
1 - Knowledge	∘	∘	∘
2 - Communication	∘	∘	∘

Graduate Attributes	Learning Outcomes		
	1	2	3
3 - Cognitive, technical and creative skills	○	○	○
4 - Research			
5 - Self-management			
6 - Ethical and Professional Responsibility		○	
7 - Leadership			○
8 - Aboriginal and Torres Strait Islander Cultures			

Alignment of Assessment Tasks to Graduate Attributes

Assessment Tasks	Graduate Attributes							
	1	2	3	4	5	6	7	8
1 - Case Study - 35%	○	○	○					
2 - Case Study - 35%	○	○	○			○		
3 - Written Assessment - 30%	○	○	○				○	

Textbooks and Resources

Textbooks

There are no required textbooks.

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: Harvard (author-date)
For further information, see the Assessment Tasks.

Teaching Contacts

Aldon Delport Unit Coordinator
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Schedule

Week 1 - 08 Mar 2021

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 - 15 Mar 2021

Module/Topic	Chapter	Events and Submissions/Topic
Haemorrhage control. Junctional haemorrhage. Wound packing. Junctional tourniquets. Innovative junctional haemorrhage control. Introduction to REBOA.		

Week 3 - 22 Mar 2021

Module/Topic	Chapter	Events and Submissions/Topic
Airway management. Airway anatomy and physiology. Basic manoeuvres and positioning. Basic adjuncts. Intermediate adjuncts. Advanced airway control. Surgical airway.		

Week 4 - 29 Mar 2021

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 - 05 Apr 2021

Module/Topic	Chapter	Events and Submissions/Topic
Damage control resuscitation 1. Bleeding control. IV IO. Fluid Resuscitation. TQ assessment and de-escalation.		**Tactical primary survey.** Due: Week 5 Monday (5 Apr 2021) 11:45 pm AEST

Vacation Week - 12 Apr 2021

Module/Topic	Chapter	Events and Submissions/Topic

Week 6 - 19 Apr 2021

Module/Topic	Chapter	Events and Submissions/Topic
Head injury and hypothermia. Patient warming options. Head injuries. Cerebral perfusion pressure. Mean arterial pressure.		

Week 7 - 26 Apr 2021

Module/Topic	Chapter	Events and Submissions/Topic
Pharmacology 1. Pharmacology terms. Trauma-specific medications. Triple option pain management.		

Week 8 - 03 May 2021

Module/Topic	Chapter	Events and Submissions/Topic
Pharmacology 2. Antibiotics.		

Week 9 - 10 May 2021

Module/Topic	Chapter	Events and Submissions/Topic
Extremity trauma. Extremity fractures. Pelvic fractures. Splinting. Traction splinting. Other fractures.		**Fluid therapy.** Due: Week 9 Monday (10 May 2021) 11:45 pm AEST

Week 10 - 17 May 2021

Module/Topic	Chapter	Events and Submissions/Topic
Burns. Burns Pathophysiology. Burns resuscitation.		

Week 11 - 24 May 2021

Module/Topic	Chapter	Events and Submissions/Topic
Traumatic resuscitation. Evidence review of traumatic resuscitation.		

Week 12 - 31 May 2021

Module/Topic	Chapter	Events and Submissions/Topic
Review. Review of TECC ITC. Penetrating eye trauma.		**Patient movement** Due: Week 12 Monday (31 May 2021) 11:45 pm AEST

Review/Exam Week - 07 Jun 2021

Module/Topic	Chapter	Events and Submissions/Topic

Exam Week - 14 Jun 2021

Module/Topic	Chapter	Events and Submissions/Topic

Assessment Tasks

1 Tactical primary survey.

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 tactical primary survey framework.
- 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 5 Monday (5 Apr 2021) 11:45 pm AEST

Return Date to Students
Week 8 Monday (3 May 2021)

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

assessmentOutcome

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

assessmentGradAttribute

- Knowledge
- Communication
- Cognitive, technical and creative skills

2 Fluid therapy.

Assessment Type
Case Study

Task Description
There are currently few “fluid” choices for patients who have suffered major trauma and are treated by paramedics from a civilian sector EMS system. You will be given a list of patients with varying trauma pathologies. 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 report must include the following for each case:

- 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 (10 May 2021) 11:45 pm AEST

Return Date to Students
Week 11 Monday (24 May 2021)

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 per 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

assessmentOutcome

- 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.

assessmentGradAttribute

- 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 how it supports or refutes the need for aggressive spinal immobilisation in tactical contexts. You will be given a case study to focus your discussion. Your discussion must be supported by the best evidence currently available on the topic of spinal immobilisation in the tactical environment.
Your report must:

- 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.

Assessment Due Date
Week 12 Monday (31 May 2021) 11:45 pm AEST

Return Date to Students
Exam Week Monday (14 June 2021)

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

assessmentOutcome

- 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.

assessmentGradAttribute

- 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 Academic Learning Centre (ALC) 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