

**New York State Volunteer Ambulance & Rescue Association  
District 7  
Suffolk County, New York**

# **DISTRICT 7 EMS DRILL COMPETITION**

**SUNDAY, JULY 11, 2010**

(Rain or Shine)

DEER PARK FIRE DEPARTMENT  
NORTH TRAINING BUILDING  
973 NICOLLS ROAD, Deer Park, NY 11729  
(SOUTH OF LIE OFF COMMACK ROAD)

**EVALUATORS MEETING: 10:00 AM**

**TEAM SET UP: 11:00 AM**

**START OF DRILL: 12:00 PM**

REGISTRATION FEE: \$25.00 per team  
MAIL TO: NYSVA&RA DISTRICT 7  
Andrea Golinsky 68 6<sup>th</sup> Avenue Huntington Station, NY 11746  
**Teams MUST be registered by June 30<sup>th</sup> NO EXCEPTIONS**

**BRING YOUR OWN FOOD & BEVERAGES**

**FOR DRILL INFORMATION CONTACT  
TERESA McLAUGHLIN 631-383-2300**

Directions: From the North: LIE Route 495 to Exit 52 Southbound Commack Road approximately 2.7 miles to Nicolls Road, Left at traffic light to DPFDF Training Facility entrance. Park on south side of bays.

From the South: Sunrise Highway or Southern State Parkway to Route 231 Northbound. Approximately 3/4 mile North Commack Road folks to right. North 2.5 miles across tracks to second traffic light (Nicolls Road). Turn right to DPFDF Training Facility entrance. Park on south side of bays.

**NEW YORK STATE  
VOLUNTEER AMBULANCE  
AND  
RESCUE ASSOCIATION**

**DRILL RULES AND PROCEDURES**

**AUGUST 2008**

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## Section 1a. Entries

1. Local drills shall have an entry deadline as specified by the hosting committee.
2. All drills will be announced by the hosting committee no less than two weeks prior to the drill date. Additional time is encouraged so teams can prepare for the drill.
3. All applications and any required fees will be submitted to the host committee prior to the entry deadline or as specified by the hosting committee. Entry fees are non-refundable.
4. Entries for the State Drill must be postmarked no less than six weeks prior to the drill date.

**All teams entered in the State Drill must be in good standing with the NYSVA & RA and have paid the required entrance fees for drills during the competing season. Failure to pay the above fees will result in disqualification from the State Drill for the season.**
5. No more than two teams per division, per squad, may enter any drill.
6. Any representing member or team that is observed **willfully** damaging any property shall be disqualified from the drill.
7. Any team that is disqualified or fails to appear will forfeit their entry fees.
8. All teams must be sponsored by a member squad or all team members must be individual members of the NYSVA & RA.
9. All teams must have a letter on their Squad's stationary, signed by a Squad Officer, declaring that all team members are currently and have been in good standing for at least sixty days prior to the drill.
10. The drill season will begin January 1<sup>st</sup> and conclude on December 31<sup>st</sup>.

## Section 1b. Problems

1. **All problems shall conform to current NYS BLS Protocols and Operational Policy and Procedures. Only protocols in effect prior to January 1<sup>st</sup> of the current year shall apply. New protocols enacted in the current year will apply the following year.**
2. Only the drill committee (and the drill rules chairperson when necessary), shall have access to any drill problems prior to the start of the drill.

3. The sealed problem will be opened and read at the evaluator's meeting. Any questions shall be addressed by members of the drill committee. Any changes deemed necessary will be made at this time.
4. Evaluators will not have contact with other persons after the problem has been opened.
5. Problems will be designed to cover a wide variety of realistic situations which the pre-hospital care provider may encounter in any life situation.
6. The problem will have a written description of each situation. If moulage, or any other form of "treat as you find" is used, these descriptions will be provided to the team as they are discovered.
7. At the start of each problem, scenarios will be read from the floor, and teams will receive a minimum of two copies.
8. Team members may address their assigned evaluators with regards to clarification of the problem or any changes in the patient's condition.
9. All statements made by the team members to the evaluators will be considered as coming from the captain and must be acknowledged by the evaluators. Ultimately, the team captain has final say.
10. The team captain shall be designated at the start of the drill, or each problem in the case of substitution.
11. No substitution may be done after the problem has been read.
12. Each team (in the same division) will work identical drill problems.
13. Victims are to wear shorts, tee shirts and fully **laced and tied** sneakers. All other team members must be dressed uniformly and allow for exposure of body sections.
14. The working area will be a minimum of 10 foot by 10 foot square.
15. The drill area must be kept clear of spectators at all times. A spectator's area will be setup whenever possible.
16. The drill rules committee reserves the right to halt any drill due to lack of safety or impractical rescue methods as to endanger others.
17. **Due to the possible transmission of blood-borne and air-borne pathogens, no mask is to be placed on the face of any drill participants.**

18. No treatments, except for the application of the mast suit, the use of oxygen, the placement of oral/nasal airways, the placement of masks, and the administration of anything given orally shall be simulated but the team must be able to explain their use.

### **Section 1c. Time allotments**

1. Two minutes will be given to the team to discuss the problem and will not count as the actual problem time.
2. All problems will be solved within a time limit set by the drill committee, not to exceed thirty minutes.
3. Teams will be ready to compete at the time set by the host committee. Teams will remain on the floor after each problem so they are ready to start the next problem.
4. Teams reporting late for the start of a drill or a problem will be penalized as set forth by the host committee, which may be in the form of points or complete disqualification from the competition.
5. Designated start times will be announced by the host committee when the notice of the drill is announced.

### **Section 1d. Awards**

1. A minimum of three overall place trophies and two problem trophies will be awarded for each division.
2. Perpetual and Leg Cup trophies must be returned each year so that it may be presented to the winner at the Award's Ceremony. Any Leg trophy that is won by the same team for three consecutive years will be retired, with the replacement for the following year being provided by the team. The replacement will be of comparable quality.
3. Novice trophies will be awarded to a team who, in their first season, has not taken any awards. A team winning a novice trophy will not be eligible for a second novice trophy if any additional are awarded, except at the State Drill.
4. Each team winning a Leg or Perpetual trophy will affix the squad/team name and year to the trophy at their own cost.

### **Section 2a. Selection**

1. The State Drill Committee shall consist of no less than three members for the State Drill. One member shall be designated as the committee chair and facilitate

all aspects of the drill. At least one member of the committee **must be a current NYS Certified Instructor Coordinator** to ensure the problems shall be written according to current NYS BLS Protocols and Operational Policy and Procedures. If the designated committee chair is not a current NYS Certified Instructor Coordinator, the committee member who is shall have the ability to provide interpretation of current NYS Protocols and Policy and Procedures. Local drills will be at the discretion of the hosting committee but should conform to the policies set forth to ensure consistency with the State Drill.

2. Evaluators for the competition will be determined by the drill committee. Every effort should be made to choose evaluators who do not belong to a competing squad or department. The drill committee will make every effort to ensure the evaluators do not have any affiliations with any of the competing teams.
3. Evaluators will be assigned to a different team for each problem. Each evaluator will give their undivided attention to the team they have been assigned keep track of the team's actions throughout the problem.
4. Evaluators may not, at any time, be assigned to any team from their squad if so affiliated. If an evaluator does not divulge their department affiliation or attempts to hide their affiliation, the evaluator will be banned from the competition. Any team who knowingly conspires with any evaluator to gain an advantage will be disqualified.
5. Evaluators will be picked by a random lottery for each team by the drill committee prior to each problem.
6. A minimum of two evaluators per team shall be utilized to provide better accuracy in scoring at the State Drill. Refer to **section (2e.)** for eligibility of evaluators.

## **Section 2b. Scoring**

1. Final results of the drill including problem totals shall be posted immediately following the presentation of awards.
  - All score sheets will be returned to the teams no later than ten days following the drill, including a copy of the correct answers to all problems.
  - A review of the problems to provide rationale on the correct answers will be completed within 24 hours after the conclusion of the competition. This will allow all teams the opportunity to have a chance to review the problem in-depth and enhance their education on the proper assessment/treatments.
2. All scoring will be based on correct answers provided during the competition including subtractions for major violations.

3. All evaluators will keep track of the team's actions as soon as the problem begins. The evaluators will meet following the problem and complete one final score sheet based on their notes during the problem.
4. If a team feels they were treated unfairly by the evaluators, the team must protest in writing and within ten minutes of the end of a problem if they feel the evaluators missed an important action, did not provide the proper information to the team in a timely manner, or treated the team in an unfair manner. The drill committee will then review the protest with the evaluators and their score sheets to determine if the team deserves additional points. The decision by the drill committee will be final.
5. If a team fails to protest within ten minutes after the completion of the problem, no additional points will be awarded. However, the team may in writing make a complaint about the evaluators which will be reviewed to determine if the evaluators are at fault and determine if they should be allowed to evaluate again.
6. The role of the Rules and Procedures Chairperson will be to assure the rules are followed by all parties.

### **Section 2c. Problem Evaluating**

1. Each team will be provided with evaluators for the state drill. Local drills may have variations based on availability of evaluators.
2. The decision of the evaluators is final concerning the actions by the team. Evaluators must agree on the actions made by the team when the final score sheet is completed.
3. Evaluators will keep notes during the working of the problem and then collectively transfer their results to the final score sheet.
4. Order of treatment will be determined by the order in which treatment was begun.
5. Evaluators will sign the final score sheet attesting to the accuracy to the best of their ability.
6. Teams will only have the ability to challenge the evaluators' actions as indicated in the scoring section. Every effort will be made to assure teams are treated in a fair manner and awarded points for their actions. Evaluators will use their note sheets to keep track of the teams' actions. Teams will not have the ability to argue for points.

### **Section 2d. Major Infractions**

1. The following will be considered Major Infractions:

- A. **Rough handling:** defined as excessive movement of an injured part or person that may inflict additional or new injury to the patient. This decision must be unanimous amongst the evaluators in order to be marked on the final score sheet.
  - B. **Contamination:** defined as an: (1) action which introduces a pathogen to a patient with an open wound or mucous membrane that would be harmful to a patient. (2) An action which would introduce a pathogen to themselves or a team member.
  - C. **Victim Assistance:** defined as actions of the victim to provide an unfair advantage to their teammates.
  - D. **Sideline Assistance:** any form of communication from the sidelines to any team member.
2. Each major infraction will be valued at no more than 300 points.

### **Section 2e. Qualifications / Requirements**

- 1. Evaluators must be 18 years of age and be a current NYS Certified EMT-B or higher.
- 2. A minimum of two evaluators per team shall be utilized to provide better accuracy in scoring at the State Drill. If possible, at least one evaluator must be at least a NYS Certified Lab Instructor or an instructor approved by the drill committee. The second evaluator shall be at the discretion of the drill committee based on experience in evaluating NYS Practical Skills Examinations, prior service as an evaluator for previous competitions, and prior experience in instructing practical skills. The evaluator will be considered on a case by case basis.
- 3. The qualifications of evaluators for local drills may vary based on availability. However, every attempt will be made by the hosting committee to provide qualified evaluators.

### **Section 2f. Field Evaluators**

- 1. The drill committee will serve as the field evaluators for the NYS Drill. Additional field evaluators will be provided at the discretion of the drill committee.
- 2. Field evaluators will watch the entire competition to ensure all of the drill rules and procedures are met.

## **Section 2g. Drill Committee**

1. Selection for the drill committee will be determined by the hosting agency/committee for local competitions.
2. Selection of the committee chair will be completed by the NYSVA & RA. The committee chair will then select their committee. As stated in other sections, at least one member of the committee must be a current NYS Certified Instructor Coordinator for the NYS Drill to ensure NYS Protocols and Policy and Procedures are followed.
3. The drill committee will have final word on all matters concerning the drill.
4. The Drill Rules and Procedures Chairperson will assure that the drill committee adheres to all Drill Rules and Procedures.
5. Teams not satisfied with the actions of the drill committee may file a protest to the Drill Rules Chairperson and the NYSVA & RA who will then review if the committee should continue to run drills for the association.

## **Section 2h. Protests**

1. **Protests during the competition** will be made as outlined in **section 2b**. Protests after the competition will be made first to the drill committee, and the Drill Rules and Procedures Chairperson. Protests can be made in writing to the NYSVA & RA for the NYS Drill if the team is not satisfied with the results of their initial protest. Protests will be evaluated and a written response will be provided to the team with any actions taken.
2. Actions taken by the drill committee, the Drill Rules and Procedures Chairperson, or the NYSVA & RA can be in the form of removal of the evaluators or committee, change the rules and procedures, or additional supervision to correct the situation.

## **Section 3a. Entries: Youth Provider Drill**

1. This division will be open to Youth Squads only.
2. All youth squad members must be at least thirteen years of age. A youth squad member who reaches 18<sup>th</sup> birthday during the drill season will be permitted to complete the season as a youth member as long as he/she does not compete as a senior member at any time during the drill season.

3. The team will have a letter typed on Squad stationary and signed by an officer of the senior squad stating the names, ages, and membership status of all team members.
4. All persons must have valid proof of age if requested before, during or after the competition.
5. **The team member in charge of patient care must be trained to the level of a NYS Emergency Medical Technician- Basic.**

### **Section 3b. Entries: Adult Provider Drill**

1. All members must have proof of eighteen years of age or older.
2. **The team member in charge of patient care must be trained to the level of a NYS Emergency Medical Technician-Basic.**

### **Section 4. Drill: Youth and Adult Provider Drill**

1. The team shall consist of a captain, co-captain, two workers and a victim for the youth provider drill.
2. The team shall consist of a captain, co-captain, one worker and a victim for the adult provider drill.
3. Reference authority for all drills shall be the current New York State Emergency Medical Technician Basic Life Support Provider Protocols, the New York State Emergency Medical Technician-Basic Student Reference Manual, and the New York State EMT-B Curriculum. All protocols, policy and procedures effective prior to January 1<sup>st</sup> of the current year will be utilized. All protocols in effect after January 1<sup>st</sup> of the current year will apply the following year.
4. Any Emergency Medical Technician-Basic textbook may be utilized to enhance the education of the team members but will not be the reference authority.

### **Section 5. Equipment List: Floor Competition**

1. Teams will provide their own equipment as listed.
2. No equipment may be added to kits once they have been checked and sealed.
3. All kits for the teams will be inspected prior to the start of the first drill problem.
4. Any equipment in excess of the list will be removed and penalty points will be assessed. No team will be penalized for lack of equipment.

5. Sizes of equipment required will be able to accommodate any member of the team.
6. Any additional equipment required for a drill problem will be provided by the host committee.
7. Sterile material may only be used once as such.
8. After equipment has been check at the start of the drill, items may be re-distributed to members of the team for use in their individual buff belts.
9. Since buff belts are part of the equipment list, all buff belts must remain in the confines of the drill area at all times or the belt will be removed from the problem.

## Equipment List

### Immobilization Equipment

1	Patient conveyance device capable of supporting patients in the Fowlers position.
1	Full backboard with at least 3 straps
1	Device or straps necessary to properly immobilize a recumbent patient to a spine board.
1	Short backboard or KED type device or half length spinal immobilization device with necessary straps capable of immobilizing the spine of a sitting patient.
1	Head immobilization device with necessary straps or tape to properly immobilize a recumbent patient to a spine board.
1	Set of adult and pediatric rigid extrication collars (Pediatric, No-neck, Short, Regular, Tall) which permits access to the patients anterior neck area.

### Splints

4	18 inch padded board splints (at least 3/8 inches thick padding).
4	30 inch padded board splints (at least 3/8 inches thick padding).
2	60 inch padded board splints (at least 3/8 inches thick padding).
1	Traction splinting device ( Hare, Sager, etc.)

### Bandaging

1	Carrying case for essential emergency care equipment and supplies.
50	Sterile 4x4 gauze compresses (50 single or 25 double wrapped).
36	Triangular bandages
6	2" conforming roller bandage
6	4" conforming roller bandage
4	6" conforming roller bandage
3	Sterile universal dressings approximately 10x30 inches
10	5x9 sterile dressings
3	Bandage or EMT scissors

2	Sterile bed-size burn sheets
4	Eye dressings
3	Rolls of adhesive tape in two or more sizes
1	Roll of plastic or equivalent sterile occlusive dressings

### Oxygen and Suctioning

1	Manually operated self-filling adult size bag valve mask ventilation device capable of operating with oxygen enrichment with an adult mask.
1	Manually operated self-filling pediatric size bag valve mask ventilation device capable of operating with oxygen enrichment with a mask for a pediatric and an infant.
5	Oro-pharyngeal airways to accommodate adult, pediatric and infant patients.
4	Nasal-pharyngeal airways to accommodate adult and pediatric patients.
4	Adult Non-Rebreathing masks
2	Pediatric Non-Rebreathing masks
2	Adult Nasal cannulas
1	Portable suction device
2	Plastic Yankauer-type wide bore pharyngeal tips, individually wrapped

### Other

1	Sealed Emergency Childbirth Kit
2	500ml of sterile normal saline in a plastic bottle within the manufacturer's expiration date (or simulated).
5	Blankets
2	Pillows with pillow cases
2	Cloth towels
1	Adult size Blood Pressure Cuff with gauge
1	Pediatric Size Blood Pressure cuff with gauge
2	Stethoscopes
4	Chemical cold packs (simulated)
4	Chemical heat packs (simulated)
3/4	Communicable disease kits (one for each team member not including patient)
1	Liquid glucose or equivalent
1	Bottle of Baby Aspirin (empty, expiration date simulated)
1	Adult Nebulizer Mask
1	Pediatric Nebulizer Mask
2	Vials of Albuterol (empty, expiration date simulated)
1	Epi-Pen Trainer
20	Pairs of disposable gloves
1	Penlights
1	Battery lantern or flashlight with 3 cells
3	Pens with blue or black ink
3/4	Watch with second hand may be worn by each team member

**Each member may carry a “Buff Belt” but may not have additional supplies beyond the amount listed.**

## **Section 7 Ambulance Drill**

Rules to be determined.