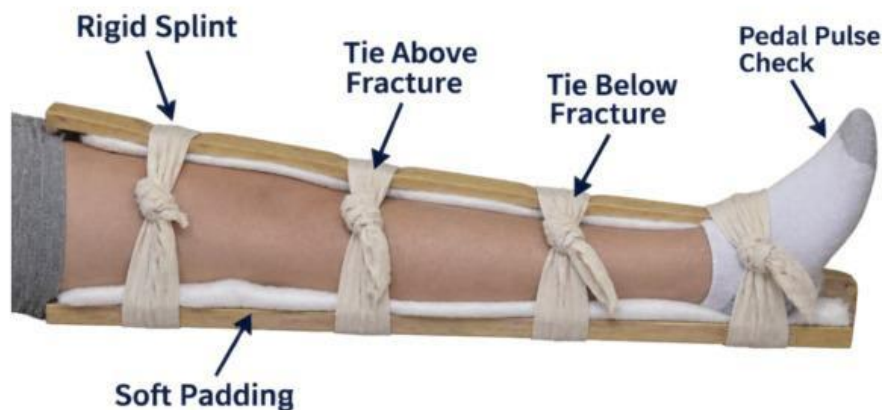


Section 1: Fracture Assessment and Splinting

Learning Objective: Learn signs of lower leg fractures and master the proper techniques for rigid splinting and circulation monitoring.

Key Vocabulary: **fracture** (a break, crack, or rupture in a bone), **immobilization** (keeping an injured limb completely still to prevent further tissue damage), **rigid splint** (a firm, unbending device used to support and immobilize a broken bone), **circulation** (the continuous movement of blood through arteries and veins).

When you suspect a lower leg fracture, never attempt to push, straighten, or realign the broken bone. Forcing the limb back into position can sever nerves, puncture skin, or tear major blood vessels. Instead, immobilize the joint above the knee and the joint below the ankle by applying rigid supports with soft padding to fill any hollow spaces.



3. When you suspect someone has a lower leg fracture, what should you do with the injured leg?

- ☐ A. Gently straighten it before adding support.
- ☐ B. Keep it still and do not try to push or realign the bone.
- ☐ C. Ask the person to stand so you can check the leg.
- ☐ D. Press on the injured area to find the exact break.

4. Where should rigid supports extend when splinting a suspected lower leg fracture?

- ☐ A. Only across the spot that hurts.
- ☐ B. From the toes to the middle of the calf.
- ☐ C. Past the knee and ankle, with the joints above and below the injury kept still.
- ☐ D. Only above the knee.

5. Why should soft padding be placed between the leg and rigid supports?

- ☐ A. It fills hollow spaces and cushions the leg.
- ☐ B. It makes the ties tighter over the fracture.
- ☐ C. It helps straighten the broken bone.
- ☐ D. It replaces the need to check circulation.

6. After securing a splint, a person's toes feel colder than before and their pedal pulse is harder to detect. What is the best response?

- ☐ A. Add another tight tie across the injured area.
- ☐ B. Ignore the change because the splint is already secured.
- ☐ C. Recheck the ties and get help, since the splint may be affecting circulation.
- ☐ D. Remove all support and straighten the leg.

Section 2: Emergency Response and Safe Evacuation

Learning Objective: Compare emergency medical response steps, communication protocols, and safe movement decisions in urban versus wilderness survival settings.

Key Vocabulary: **triage** (the rapid process of prioritizing patient care based on injury severity), **EMS** (Emergency Medical Services, professional urban ambulance and rescue teams), **evacuation** (the planned movement of an injured patient to a medical facility), **survival signal** (a standardized distress sign used to alert search teams).

In an urban setting, your primary task after stabilizing a fracture is dialing 911 so trained EMS personnel can handle transport with specialized equipment. In a backcountry survival setting without cellular coverage, you must signal search-and-rescue teams or organize an improvised litter evacuation only when staying in place is unsafe.

Urban Emergency Setting	Wilderness Survival Setting
• Call 911 immediately and state your precise address. • Report patient age, conscious level, and visible deformity. • Keep the patient calm, warm, and resting in place. • Wait for EMS paramedics to transfer the patient to an ambulance.	• Check for cellular service, then activate a satellite distress beacon. • Use standardized signals: three whistle blasts or three smoke fires. • Construct an improvised litter using branches and jackets if shelter is far. • Decide whether to shelter in place or begin a team carryout.

1. Scenario: You are hiking on a remote trail three miles from the trailhead when a hiker fractures their lower leg. Your mobile phone has zero reception bars. Describe the specific sequence of communication and signaling steps your team must take to summon help.

2. Scenario: Compare an urban fracture event at a community sports complex with a backcountry fracture during an approaching winter storm. Explain how your decision to move or shelter the patient changes between these two environments.

3. In an urban emergency, what should you do after stabilizing the suspected fracture?

- ☐ A. Call 911, share the location and the patient's condition, and wait for EMS.
- ☐ B. Move the patient to a car and drive them to a hospital.
- ☐ C. Ask the patient to walk to the nearest road.
- ☐ D. Wait to call until the patient's pain gets worse.

4. If you are in the wilderness without cellular service, which signal does the chart recommend using to attract rescuers?

- ☐ A. One whistle blast or one smoke fire.
- ☐ B. Three whistle blasts or three smoke fires.
- ☐ C. A single shout every hour.
- ☐ D. Four whistle blasts only after dark.

5. In a backcountry setting, when does the chart say an improvised litter may be needed?

- ☐ A. Whenever a person has any leg pain.
- ☐ B. Only after the patient has walked to a safer place.
- ☐ C. If shelter is far away and staying in place is unsafe.
- ☐ D. As the first step, before checking the surroundings.