

5th Edition Chapter #/Title: Intro / Chapter 1

Name: Bill Cathey/Paul Brooks/Steve Werner/Chuck Allen/Michael Marlow

Division: Northern/Alaska/Central

List and describe changes/differences found between the 4th Edition and the 5th Edition chapter you have been assigned to review. Examples of a change could be the sequencing of treatment for a severe bleed or changes in assessment steps and terminology. Indicate the page number for the 5th Ed. and chapter and page number for the 4th Ed. for comparison.

Note: some changes from the 5th Edition may be found in more than one chapter in the 4th Edition.

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
1-3 to 1-18		Expanded History of NSP, taken from Patroller's Manual
1-19		CPR Changes – Performed in front of CPR Instructor (not just qualified person)
1-33 to 1-34	New	Assumption of Risk – Legal Principle stating that there are inherent risks involved in snow sports activities and protects patrollers while performing their duties from some liability. This principle does not protect patrollers or resorts from liability involving transportation (i.e. chair lifts, toboggans, area vehicles)
1-34 to 1-36	New	Documentation – Concise, thorough, legible incident forms are needed for legal reasons. It is important to include involved party/witness statements.
1-39	New	Joint Statement of Understanding – Understanding between NSP and NSAA that patrollers do not work for the NSP but for the resort that they are patrolling for. Important for patrollers to understand their role as a patroller.
1-44	New	Judgment – OEC technician needs to show proper judgment in what skills are needed in a particular situation
1-46	New	EMS System Regulations Clarification – Understanding of your state laws in respect to the level of care the OEC technician can provide, including area management protocols
1-46	New	Privacy Laws – HIPAA laws are enacted to protect the privacy of an individual's medical information. Even though volunteer patrols are exempt from HIPAA laws, OEC technicians should always be conscious of the privacy of injured skiers and should not use their names or provide any information that could identify them, unless absolutely necessary.

5th Edition Chapter #/Title: Chapter 2: Emergency Care Systems

Name: Bill Cathey/Paul Brooks/Steve Werner/Chuck Allen/Michael Marlow

Division: Northern/Alaska/Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Whole Chapter		Chapter 2 is a lot of new information for OEC text, but usually taught in area training, maybe not refresher worthy
		Explanation of EMS System is thoroughly done. The importance of a team approach is emphasized as is commonality, having common goals, using common language and following practices and procedures. How do you interact with the local system?

5th Edition Chapter #/Title: Chapter 3: Rescue Basics

Name: Bill Cathey/Paul Brooks/Steve Werner/Chuck Allen/Michael Marlow

Division: Northern/Alaska/Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
		Basically the same as Chapter 2 - 4 th Edition "Well Being of the Rescuer" but more in-depth. Some info (Incident, Media) pertains more to area management protocol
3-47		Needle handling – Correct procedure discussed for handling and disposing of needles.

5th Edition Chapter #/Title: Chapter 4: Incident Command and Triage

Name: Bill Cathey/Paul Brooks/Steve Werner/Chuck Allen/Michael Marlow

Division: Northern/Alaska/Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
4-3	New	NIMS – National Incident Management System explained (Multi-agency coordination System) – a new standardized framework for responding to, and managing, emergencies or situations involving multiple jurisdictions. NIMS is a national “all hazard” model, federally mandated for use by all government and civilian organizations which extends to ski patrols and OEC technicians. ICS (Incident Command Systems) is part of NIMS
4-26	New	ID-ME - New name for Triage System, acronym for 4 specific triage categories. Immediate (RED) Delayed (Yellow) Minimal (Green) Expectant (Black)

5th Edition Chapter #/Title: Chapter 5: Moving, Lifting and Transporting Patients

Name: Bill Cathey/Paul Brooks/Steve Werner/Chuck Allen/Michael Marlow

Division: Northern/Alaska/Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
5-34	695	New Bridge Lift Acronym BEAN (Not to be used in case if spinal issues)
5-35	695	New Direct Ground Lift Acronym BEAM
5-53 to 5-58	76	Basic Helicopter Safety – How act around and load a helicopter, setting up an LZ (landing zone) etc.
5-50 to 5-53		Air Transportation Protocols- refer to area management
5-59 to 5-61		Sled CPR Method – discuss in detail how to perform CPR on a sled

5th Edition Chapter #/Title: Chapter 6: Anatomy and Physiology

Name: Ian Archibald, John Nichols, Jane San Romani

Division: Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
60	Not covered	Lymphatic System, new material
19	110	Circulatory system now the Cardiovascular System
55	101	Musculoskeletal system now the Muscular system
57	125	Genital System now the Reproductive System
45	119	Skin System now Integumentary System
7	88	Semi-Fowler and High Fowler Positions added
8	95-98	Body Cavities defined

5th Edition Chapter #/Title: Chapter 7: Patient Assessment

Name: Jane SanRomani, John Nichols, Ian Archibald

Division: PNWD, Rocky Mt., Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
5	Chapter 7	Return to primary and secondary assessment
89,90	205,199,203	New flow of assessment
11, 14		New CPR procedures
18		AAOx4—new terminology
20	147,343,663	New skill in assessment chapter---Glasgow
21, 22		New terminology---Decorticate and Decerebrate posturing
42,6,7,8,10	199	New terminology for exams and assessment
48		Use of stethoscopes for breathing sounds
51		New term and evaluation—tandem gait
57		New BP procedures
61--64		New test—orthostatic BP and new discussions of causes of orthostatic BP
67		New concern—cultural Diversity
92		BSI now covered under Standard Precautions and not introduced until physical exam

5th Edition Chapter #/Title: Chapter 8: Medical Communications and Documentation

Name: Jane SanRomani, Ian Archibald Division: PNWD, Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
	11, 20,21,23	New terminology and acronyms—SOAP, CHEATED, FACTUAL-OEC, SAILER, HIPAA
		NEW MATERIAL ON MEDICAL DOCUMENTATION—REFUSAL OF CARE, COMMUNICATION METHODS
		NSAA Forms

5th Edition Chapter #/Title: Chapter 9: Airway Management & Chapter 10 Shock

Name: Leslie Carter Division: Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Ch 9: 1, 11-13	New	Gravity, finger sweep, cross fingers technique not in 4 th edition
Ch 9: 2	Old chapter 6, pg 179	Face shield in ventilation -- 4 th edition – picture only, 5 th edition discusses use in text
Ch 9: 17-18	172, 88, 683	New name (“haines”) for “recovery position”, and more clearly defined procedure for positioning patient in this position, several synonyms eliminated (e.g., NATO, semi-prone, etc.).
Ch 9: 15	New	Advise preoxygenate patient before suctioning, not in 4 th edition.
Ch 9: 24	New	If patient gags with OPA in place, remove, do not attempt reinsertion – not specifically mentioned in 4 th edition (although intact gag reflex as contraindication for OPA is included in 4 th edition.)
Ch 9: 25	New	Use of OPA as bite block suggested in 5 th , not mentioned in 4 th
Ch 9: 33	New	Local protocol for O2 delivery – legality – not mentioned in 4 th edition
Ch 9: 47	More complete (pg. 177)	Improved, more complete & detailed instructions for application of nasal cannula.
Ch 9: 49	New information beyond pg. 177	Reset flow rate for oxygen w/ nonrebreather mask by observing collapse of bag w/ inspiration – not in old book.
Ch 9: 54	178	Pulse ox - New information and recommendation for indications for supplemental O2 based on pulse ox readings
Ch 9: 57	838	Skill sheet – suction – 5 th ed: advises preoxygenate patient before suction, no specific method advised to open mouth, specifies suction duration FOR ADULT only (nothing re: pediatrics), nothing re: measuring catheter or guidance re: moving catheter while suctioning, added “open mouth” as cpi.
Ch 9: 59	837	Skill sheet – NPA – 5 th edition much more specific and detailed instructions, added some new cpi’s over 4 th edition (insertion, advancing)
Ch 9: 60	837	Skill sheet – OPA – 5 th edition, specifies cross-fingers to open the mouth, more detailed instructions for insertion and adds cpi’s over 4 th edition.
Not in 5 th , chapter 9	839, 840, 841	Skill sheets for oxygen delivery, bag valve mask, & pocket mask use present in 4 th edition, absent in 5 th edition.
10-1	274	5 th edition has 4 types of shock, 4 th edition has 6 – very different terminology and categorization of causes of shock between editions.
10-2	Nothing	New vocabulary – homeostasis
10-3	Nothing	New vocabulary – hypoperfusion
10-5	112	New terminology – cardiac output, stroke volume
10-8	Nothing	New information – hematocrit

10-15 through 10-20	268 - 277	Redistribution of categories and subsets of shock, including new categories of OBSTRUCTIVE and DISTRIBUTIVE – major changes here.
26 – 28	New Information	Entire new section specifically addresses factors that exacerbate evolution of shock, including age, illness, etc., and MEDS/Drugs.
10-31	New Information	Detailed protocols for respiratory support and supplemental oxygen delivery in treating shock (no details in 4 th edition, just advise give O2).
10-32		Management of shock -- 5 th edition focuses on general principles in this chapter and defers discussion of details of shock management for specific types of shock to later chapters (management of each type of shock is discussed in “shock” chapter in 4 th edition).
10-38 - 10-48	847	Check location of skill sheet – sheet for “shock management” occurs on page 38 and again on page 48? New skill sheet (pg 38, 48) made up of last half of old “bleeding control and shock management” skill sheet.

5th Edition Chapter #/Title: Chapter _____ Chapter 11: Altered Mental Status _____

Name: Colin Grissom MD/Bob Brewster Division: Intermountain/Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
11-16 to 11-20	337	New terminology on classification of seizures in OEC 5 th edition
Organization of entire chapter	756	The entire format of the OEC 5 th ed Chapter 11 on Altered Mental Status has been changed from the OEC 4 th ed Chapter 12 on Neurologic Emergencies. The new OEC 5 th edition chapter 11 is organized around AEIOU-TIPS which is only mentioned in the OEC 4 th ed Chapter 30 on Pediatric Outdoor Emergency Care on page 756.
		Diabetic treatment, NIDDM v. Type 1 or 2

5th Edition Chapter #/Title: _____ Chapter 12: Substance Abuse and Poisoning _____

Name: Jessica Suess and Larry Bost Division: Northern and Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
12-6	379	Transdermal now was absorption
12-7		New discussion Bodily distribution and elimination related to medication usage in the body. Blood-brain barrier new.
12-12		New acid/base discussion
12-13	385	Sedative hypnotics now it is antianxiety and sedatives
12-13		New section of antipsychotics and antidepressants
12-14		New section on designer drug/club drugs i.e. Ecstasy, GHB, Special K
12-20		New aspirin section overdose info
12-21		New iron overdose section
12-21		New section on methane poisoning
12-35		Poison control and HAZMAT numbers, CHEMTREC numbers

5th Edition Chapter #/Title: _____ Chapter 13: Respiratory Emergencies _____

Name: Jessica Suess and Larry Bost Division: Northern and Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
13-14	137	Child respiration rates new 15-20, Infant 20-25
13-30	296	2 new med listed Aminophylline and several that have been left out. Serevant has been left out as well
13-33		The use of stethoscope and pulse oximeter
13-40	300	Transport Respiratory IP head up hill. Much more specific description
13-40	296	Removal of discussion hypoxic drive and COPD
13-48		Skill page for use of stethoscope
13-50		Skill demo on use of inhaler.

Name: Karen Hadden & John Fradette Division: Central and Northern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
I(antigen)	293 (allergen)	4 th defines allergen which is a specific antigen, 5 th defines antigen.
1	None	Hypersensitivity not defined in 4 th
11	365	4 th discusses allergic reactions, 5 th defines mild, moderate and severe.
14	None	5 th edition discusses prevention 4 th edition does not.
17, 26, 27		ABCD's are referenced. Review against AHA updates.
19	None	5 th edition discusses S & S of mild, moderate and severe. 4 th edition does not.
27	None	Remove tight fitting articles from around neck and extremities.
28	None	5 th addresses epi dosing, 4 th does not
29	None	5 th more detailed regarding epi administration

Name: Colin Grissom MD/Bob Brewster Division: Intermountain/Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
15-38 to 15-47	316	OEC 5 th edition follows Guidelines for BLS CPR published in 2010 by the American Heart Association. Key Points: OEC emphasizes ABCD, after opening the airway simultaneously check for breathing and pulse, if no pulse is detected after 10 seconds, then start chest compressions, perform 30 chest compressions at a rate of 100 per minute alternating with 2 breaths. NOTE: AHA emphasizes CAB (circulation, airway, breathing) approach to sudden cardiac arrest (SCA)
15-47 to 15-51	319	OEC 5 th ed follows the new BLS AED defibrillation guidelines which call for application of the AED as soon as possible, then deliver shock if indicated, then start chest compressions immediately after one shock and continue for 5 cycles or 2 minutes until re-checking pulse and evaluating if further shocks with the AED are recommended
15-38	320	OEC 5 th Edition describes 5 links in the CPR chain (in OEC 4 th edition there were 4 links in the chain). 1. immediate recognition SCA, activate EMS 2. Early CPR, chest compressions 3. Rapid defibrillation 4. Early ALS care 5. Post cardiac arrest care
15-18, 15-38		New Term: Sudden cardiac arrest (SCA)
15-39		New Term: Return of spontaneous circulation (ROSC)
15-10		New Term: Cardiovascular disease (CVD)
15-12, 15-31		New Topic: Hypertension
15-19, 15-35		New Topic: Thromboembolism and Pulmonary embolism
15-21		New Topic: Abdominal aortic aneurysm (AAA) and Thoracic aortic aneurysm
15-12		New Topic: Heart Valves
15-53 to 15-58		New emphasis on assisting patients with taking the cardiac medications nitroglycerin and aspirin, including new information relating to indications and side effects of these drugs.

5th Edition Chapter #/Title: Chapter 16: Gastrointestinal and Genitourinary Emergencies

Name: Karen Hadden/John Fradette Division: Central/Northern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
P 2	None	5 th covers hematochezia 4 th does not use this clinical term
P13	None	5 th covers pyelonephritis 4 th does not
P14	None	5 th covers nephrolithiasis 4 th does not
P 15	None	5 th covers bowel obstruction and perforated bowel, 4 th does not in specific terms.
P17	None	5 th edition covers AAA, the 4th does not. Hematochezia discussed on pg 17 5 th edition.
P 28		ABCD's reference AHA
P30	None	Palpating above bladder. 4 th edition does not reference.

5th Edition Chapter #/Title: Chapter 17: Principles of Trauma

Name: Keith Tatsukawa, Karen Hadden Division: Far West /Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Ch 17		New Term: Index of Suspicion
Ch 17		New Term: Kinematics
Ch 17	Ch 18 486-487	The change is that the chapter focus is on helping the OEC technician think about potential level of trauma / combining MOI with low suspicion vs. high suspicion
Ch 17		Three Phases of Injury (great addition) i.e. Post Injury Phase. Addressed the fact that sometimes we have no control over the outcome - leading to better prevention planning.
Ch 17	n/a	Trauma system Role / Knowledge should be addressed as change
17-1		Kinematics new term in the 5 th edition
17-6, 7		"Stopping Distance" is a new concept in the 5 th edition including force on different type of tissue, i.e. hollow (air) dense, and solid (water) dense.
17-9		Pathophysiology is a new term in the 5 th edition
17-2		Blast injury is new to the 5th edition
17-13,14,15		"Three phases of injury" is a new concept introduced in the 5 th edition.
Ch 17: 16-19		Trauma centers and levels are described in detail. This is new to the 5 th edition.

5th Edition Chapter #/Title: Chapter 18: Soft Tissue Injuries

Name: Keith Tatsukawa, Karen Hadden Division: Far West /Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
	18 p506	Pressure Point Removed
18-35		Tourniquet used quicker / 0 pressure point
18-10, 11		Physiology of Bleeding and clots "Blood thinning medications such as ASA, Cumadin and Plavix
18-14		Subungual hematoma special type of hematoma beneath a nail bed
18-23		New topic- High Pressure injection- Mechanical Tattooing
18: 32-37		Management of Bleeding- topic different in principal and practice
18-39		Providing wound care- new introduced material
18-51		Hemostatic Dressing- new topic

5th Edition Chapter #/Title: Chapter 19: Burns

Name: Keith Tatsukawa, Karen Hadden Division: Far West /Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
19: 6-11	511	5th edition expands on different types of burns->thermal, chemical, electric, radiation. 4th edition only addresses general burns vs. electrical burns vs. chemical
19-9	517	4th edition does not mention DC/AC current or mention anything about voltage/amps
19-11	511	4th edition classifies burns into subcategories: critical burns, moderate burns, minor burns.

		5th ed does not
Ch 19	Ch 19	5th edition puts burns in a separate chapter; 4th edition combines burns with soft tissue
19-19	n/a	4th edition does not mention inhalation injuries
19-20	n/a	5th edition mentions CO poisoning; 4th does not
19-24	n/a	5th edition lists criteria for sending a pt to a burn center
19-28	n/a	5th edition states no creams, etc on burns; 4th edition does not
19-28	n/a	5th edition mentions C-spine precautions in burn pts, 4th does not
19-29	n/a	5th edition mentions not breaking blisters; 4th does not
19-32	516	5th edition elaborates in more detail the treatment of chemical burns
19-6 to 19-11		OEC 5 th ed defines four categories of burns: thermal, chemical, electrical, and radiation. OEC 4 th ed does not make this specific classification, but does discuss thermal, chemical and electrical burns. The inclusion of radiation burns is a new category.
19-11, 19-13 to 19-14	512	OEC 5 th ed includes the category of 4 th degree burns under full thickness burns. OEC 4 th ed has 3 rd degree burns (full thickness burns) as the highest level.
19-18, 19-20	514	OEC 5 th ed includes a more extensive discussion of airway management and specifically describes indications for early ALS intubation. In OEC 4 th ed the importance of the airway is mentioned, but there is nothing stated about early intubation, and the specific indicators for early intubation are not described.
19-11, 19-20 to 19-21		OEC 5 th ed includes a discussion of carbon monoxide poisoning associated with burns. This is not included in the OEC 4 th edition under burns, nor is it included anywhere in the textbook.
19-24	511	OEC 5 th ed specifically lists criteria for transport to a burn center. OEC 4 th ed lists different severity of burns in Table 19-1, but does not completely clarify who should be transported to a burn center.
19-27	513	OEC 5 th ed recommends complete immersion in water of small area burns and then applying a dry sterile dressing to all burns. A wet cool dressing is only used for burns <5% BSA. OEC 4 th ed recommends a wet cool dressing for all burns.

5th Edition Chapter #/Title: Chapter 20: Musculoskeletal Injuries

Name: Keith Tatsukawa, Karen Hadden Division: Far West /Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
20		Address the Tension vs. Traction
20	102-103, 105	Advise the pounds are only a guide vs. rule / patient comfort as a time measure
20, pg 69		4th line from top "Pelvic Exam" seems to be misleading
20, pg 69		Consider moving pt indoor before removing footwear
	25, pg 628	Placement of Tourniquet under traction splint in case it was needed was discouraged
20, 102-103	24, pg 596	Use of traction splints. Traction vs. tension.
20, 105	24, pg 589	General principles of splinting: key principles and fractures of long bone fractures are different: traction & tension
20, 107		Wilderness rescue tip: bone end protruding through shin with no access to higher level of care within 8h, place back into bone
20, 116-117		Figure eight splint for clavicle fracture Management of a posterior sternoclavicular dislocation with vascular or respiratory threat to life
20, 125	25, pg 621	Only try to realign deformed elbow if physician if more than 2 hours away (used to be 1 hour)
20, 143		Distal femur fracture: single attempt to realign if definitive care is more than 2 hr away
20, 154		Replacing quick splint with cardboard splint
Ch 20, 161	Ch 24, pg 606	Boot removal: leave boot on in outdoor environments
Ch 20, 201-202		Skill Sheet Posterior Scapula-clavicle dislocation/reduction
Ch 20, 158	639	Ankle - recommends single axial pull if CMS is compromised no matter if definitive care is immediately available or not. No time constraints.
20-151	633	For a knee dislocation the OEC 5 th ed recommends one attempt at to axially align the knee joint if there are no distal pulses, regardless of the transport time to a hospital. In OEC 4 th ed the recommendation is based on transport time to a hospital, if under one hour and there is no pulse, splint and transport, if greater than one hour and there is no distal pulse, provide longitudinal traction.
20-157, 20-158	635	More extensive discussion of management of a floating knee is included in OEC 5 th ed.

5th Edition Chapter #/Title: Chapter 21: Head and Spine Injuries

Name: Paula Knight Division: Eastern Division

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
21-7		Neuron- vocabulary not found in 4 th edition
21-11		Added to Common Medical Injury Bullet list Electrical injury/ including lighting strike
21-12		Coup-countre-coup Injury- could not find information about this in the 4 th edition
21-22		New Material Diffuse Axonal Injury
21-23		Pediatric Considerations Not in 4 th edition
21-24		Jefferson Fracture, Hangman's No reference to this in 4 th
21-25		Atlas-axis injury and injuries from c1-c5 No reference in 4 th edition
21-36		Could not found references to "hallo test and bull's eye" in 4 th only reference that there will be characteristic staining with CSF
21-51		No reference to shoulder pad removal in 4 th edition
21-60		Vocabulary- Patent not found in 4 th edition
Ch 21, P2	None	Diffuse axonal injury new term
Ch 21, P2	None	Lucid period new term
Ch 21, P2	None	Neural ischemia new term
Ch 21, P2	None	Recurrent traumatic brain injury new term, as well as traumatic brain inj
Ch 21, P3-4	None	ER visits/sports injuries not listed in 4 th
Ch 21, P4-5	None	Long term deficits from TBI not listed in 4 th
Ch 21, P5	None	Cost and indirect costs of TBI
Ch 21, P11	p486-488	5 th addresses MOI in spine 4 th addresses in MOI chapter 18
Ch 21, P12	None	Coup-Contrecoup Injury new term
Ch 21, P13	None	4 th edition no mention of peds and/or geriatric considerations.
Ch 21, P14	None	Common injuries diffuse axonal injury
Ch 21, P15	P657-659	Skull fx mentioned in the 4 th edition, but defined in the 5 th edition
Ch 21, P16	P659-650	5 th defines concussion mild, moderate severe, 4 th does not
Ch 21, P17	None	Post concussive syndrome new term
Ch 21, P17	None	Recurrent TBI defined, not in 4 th
Ch 21,P21	None	Lucid period defined
Ch 21, P22	None	Axonal Injury defined
Ch 21, P23	None	Peds considerations
Ch 21, P24	None	Hangman's fx new term
Ch 21, P25	None	Atlas-axis injuries new term
Ch 21,P25		Why are spine and rib fx mentioned in this chapter
Ch 21, P26	None	Neural ischemia defined
Ch 21, P31	None	What is the definition of AOx4?
None	P 644	4th addresses short board 5th doesn't list that objective

5th Edition Chapter #/Title: Chapter 22: Face, Eye and Neck Injuries

Name: Keith Tatsukawa, Karen Hadden Division: Far West /Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
22-17	542	5th edition defines epitaxis; 4th does not
Ch 22, 27-31		Eye assessment not part of 4th edition. Neck, face, mouth assessment not detailed in 4th ed.
Ch 22, 34-36		Management of facial (nose, tooth) not part of 4th edition. Hank's solution not mentioned in 4th ed. Hank's not defined as saline solution.
22-39	529	4th edition states to irrigate eye for at least 5 min-20 min; 5th edition does not mention now long to irrigate
22-47	532	4th ed states to remove contact lenses in unresponsive patient who are more than 3 hrs from hospital. 5th ed does not state this.

22-48		Only 5th ed talks about prosthetic eyes
22-49	545	5th ed states to not apply direct pressure to both sides of neck; 4th ed does not
22-19		Anisocoria – new term in the 5 th edition.
22-13		In the assessment of the ear the 5 th edition mentions looking in the ear for “gray/green fluid” an indication of an ear infection. The 4 th edition only talks about trauma.
22-45		MSDS sheet is mentioned as part of the information gathering on chemical exposure. This is a record of all toxic chemicals in the workplace.

5th Edition Chapter #/Title: Chapter 23: Thoracic Trauma

Name: Keith Tatsukawa, Karen Hadden Division: Far West /Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Ch 23, pg 23		LAP: Look, auscultate, palpate pelvic binding
Ch 23, 25-27		New Terms: Pulsus Paradoxus; Commotio Cordis

5th Edition Chapter #/Title: Chapter 24: Abdominal and Pelvic Trauma

Name: Keith Tatsukawa, Karen Hadden Division: Far West /Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Ch 24, 16-18		Straddle injuries - new
Ch 24, 17		Assessment for abdominal & pelvic injury. Skill guide: "Pelvic Binding"
Ch 24, 19		Kehr's sign - spleen / liver pain with ipsilateral shoulder
Ch 24, 30		MOI of suspect fractured pelvis -> must perform full spinal immobilization
Ch 24, 20-31		Pelvic Binder - described & protocol of use
Ch 24	563	4th ed categorizes abdominal injuries as "open" and "closed" but the 5th ed does not
Ch 24, 10		5th ed goes into more specifics about types of abdominal/pelvis injuries like spleen, pancreas, vascular, etc. 4th ed does not
Ch 24, 14,15	569	5th ed states more about mechanism of injury of pelvis, hip and lower urinary injuries than 4th ed
Ch 24, 18		5th ed has more detail on abdominal/pelvis assessment
Ch 24, 19		4th ed does not mention Kehr's sign
Ch 24, 20		5th ed states that genital injuries should only be examined with a second assistant the same gender of patient
Ch 24, 30		5th ed talks about managing pelvic trauma with a pelvic binder; 4th ed does not
Ch 24		5th ed mentions shock in management of abdominal/pelvic trauma and states that patients should not be given anything by mouth

5th Edition Chapter #/Title: Chapter 25: Cold Related Environmental Emergencies

Name: Bill D. Division: Eastern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Ch 25, Pg. 5	Chapter 2 Pg. 29	Respiration is omitted in the 5 th Ed., the 4 mechanisms of heat loss are conduction, convection, evaporation and radiation
Ch 25, Pg. 13	Chapter 15 (Table 15-1) Pg. 415	Temperature differences for Hypothermia (some temperatures have been crossed out in the 5 th Ed.) Signs/Symptoms more in depth in 5 th Ed.
Ch 25, Pg. 6-7	Chapter 15 Pg. 423-424	Change in terminology of Frostbite, Frostnip and Deep Frostbite to Frostnip, partial thickness and full thickness
Ch 25, Pg. 17	Chapter 15 Pg. 424	Temperature change for rapid re-warming of frostbitten area – it went from 102 to 108 in 4 th Ed. To 102 to 104 in 5 th Ed.
Ch 25, Pg. 17	Chapter 15 No reference	Application of Aloe Vera in 5 th Ed.; severe pain requires ALS services
Ch 25, Pg. 1		The word “Type” should be used rather than “Classification” on objective 25-4
Ch 25, Pg. 1	Chapter 15 Pg. 416	Three types of Hypothermia – acute, sub-acute and chronic have changed to primary and secondary in 5 th Ed.; primary and secondary has no correlation in 4 th Ed.
Ch 25, Pg. 8-9, 14	Chapter 15 Pg. 416	Classification-Stages are different, 5 th Ed. adds “moderate”

Ch 25, Pg. 8-9		4 different terms used to describe the severity of Hypothermia – mild, moderate, severe. Pg. 8 called “classification” and “category”, pg. 9 called “stage” and pg. 14 called “severity”. Can’t get the objective – it’s not clear.
Ch 25, Pg. 9,19		Addition of the term “afterdrop” not found in 4 th Ed. Afterdrop prevention is not very clear!
Ch 25, Pg. 16-20	Chapter 15 Pg. 419	4 th addition mentions core warming in advance of the shell that cannot be found in 5 th Ed.
Ch 25, Pg. 17-20	Chapter 15 Pg. 419-421	4 th Ed. 2 methods of re-warming – rapid & slow, 5 th Ed. 2 types of re-warming – active & passive; 4 th Ed. Pg. 20 talks about full body immersion which is not acceptable and should not be attempted according to 5 th Ed.
Ch 25, Pg. 13, 16-17	Chapter 15 Pg. 424	5 th Ed. does not talk about assessment of Frostnip in text (it does in the table 25-1 pg. 13)
Ch 25, Pg. 21	Chapter 15 Pg. 441	Treatment differences for mild hypothermia time frames for a patient buried less than a hour (sugary sweet liquids).
Ch 25 No reference	Chapter 15 Pg. 431	Environmental injuries - Snow blindness (4 th Ed.) - moved to chapter 22 (Face, Eye and Neck Injuries) in the 5 th Ed.

5th Edition Chapter #/Title: Chapter 26: Heat-Related Emergencies

Name: Bill D Division: Eastern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Ch 26, Pg. 5		Heat index not mentioned in 4 th Ed.
Ch 26, Pg. 10		Objective 26-2 & 3 has 4 types of heat related illness, heat-related syncope is not mentioned in 4 th Ed.
Ch 26, Pg. 30-33		Assessment of heat related illnesses is in 5 th Ed. but not 4 th Ed.
Ch 26, Pg. 11	Chapter 15 Pg. 431-432	The addition of stretching to treat heat cramps in 5 th Ed.
Ch 26, Pg. 34-35	Chapter 15 Pg. 433	Difference in the amount of table salt in a quart of water for a heat exhaustion patient to drink. 1 t. (4 th Ed.) ¼ to ½ t. (5 th Ed.) Same for heat cramps.
Ch 26, Pg. 12	Chapter 15 Pg. 434	There is a difference in the reference points for core body temperature – min./max. – for heat stroke. Addition of table 26-2 differentiating heat exhaustion and heat stroke.
Ch 26, Pg. 37	Chapter 15 Pg. 434	5 th Ed. added full body immersion in cold water under medical supervision and continued core body temperature checking. Taper off treatment when core body temperature reaches 101 F, give patient fluids when responsive, monitor rebound temperature increase.
Ch 26, Pg.23-27	Chapter 15 Pg. 434-435	Information on Lightning expanded in 5 th Ed. More content.
Ch 26, Pg.16-17		Addition of heat related illness prevention in 5 th Ed.
Ch 26, Pg. 19	Chapter 15 Pg. 430	The use of sunscreen greater than SPF 15 (4 th Ed.), greater than SPF 30 (5 th Ed.)
Ch 26, Pg. 19		The use of SPF 15 on pediatric patients in limited areas of the body if there is not adequate shade or clothing available.

5th Edition Chapter #/Title: Chapter 27: Plant and Animal Emergencies

Name: Karen Hadden/John Fradette Division: Central/Northern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
6	n/a	Bullae – new term defined
4	n/a	Necrosis – new term defined in relation to this section
5 through 15	390	Plant descriptions have been and their toxic effects have been given. New plants are also introduced include Monkshood and other plants have been removed such as Mistletoe and Tree Tobacco
19 through 22	N/A	Mushrooms and morels are a new section
37	N/A	Alligators and Crocodiles are new to the 5 th edition
38 through 41	377-378	Additional marine animals are described
44-48	376	Expanded terrestrial mammals section.

5th Edition Chapter #/Title: Chapter 28: Altitude Related Emergencies

Name: Karen Hadden/John Fradette Division: Central/Northern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
2 and 19		New term Chilblains is defined
17		New term Khumbu cough defined
18		New term Radial Keratotomy Blindness
18		New term Solar Keratitis
17		New term Peripheral edema
30		ABCD's referenced review with AHA guidelines
32		Gamow bag new term defined
33		Khumbu cough treatment is new

5th Edition Chapter #/Title: Chapter 29: Water Emergencies

Name: Bob Brewster Division: Southern

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
		The water emergencies section of edition 4 is very limited and running from pages 437 to 441. The material is minimal and my recommendation is this a chapter that will be needed to be taught in it's entirety. Edition 4 does have good information on water spinal immobilization which it is hard to determine (not sure what will be in figures) whether the 5 th will include (see pages 438, 439 and figure 15-2
29-3		5 th has a detailed introduction, 4 th has none
29-6	437 figure 15-17	Wet and dry drowning defined in 5 th where as it just labeled in figure 15-17 in the fourth
29-7		Mammalian diving reflex defined
29-7,8		Description of atmospheres
29-8,9		Description of Boyles Law
29-9,10		Description of Henrys Law and partial pressure
29-10		Description of Daltons Law
29-13,14		Common Water Emergencies
29-17		Water conditions, water temperature role in morbidity
29-18		Water salinity, tonicity
29-19		Barotrauma
29-19,20		Decompression sickness (DCS)
29-20		DCS subcategories
29-21		Arterial Gas Embolism(AGE)
29-21		Squeeze and reverse squeeze
29-22,23		Nitrogen Narcosis
29-23		Swimmers Ear
29-23,24		Breath Holding
29-24	438, 439	Trauma. Edition 4 reviews water related spinal trauma and treatment, 5 th edition gives overview of all traumas and treatment
29-25		Injuries by aquatic animals
29-25,26		Aggravation of existing medical conditions
29-26		Preventing water emergencies
29-30		Patient assessment in a water related emergency
29-31,32		Patient assessment in a water emergency
29-32		AGE signs and symptoms
29-32		DCS signs and symptoms
29-34,35	438,439	Patient management of a water related injury. 4 th edition has management of management of spinal patient only.
29-36		Divers Alert Network
29-36		Cold water submersion, unresponsive
29-40		Chapter Summary

5th Edition Chapter #/Title: Chapter 30: Pediatric Emergencies

Name: Kathy Glynn scott rockefeller Division: Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
P 1 and 2	Pg736	Objectives #2, 3, 4, 5, 6, 7, 8, 9, 10 and 12 new to 5th
Pg 2	P 736	Objective 11, 5 th assess using pediatric triangle Objective 7, 4 th demo assess of infant, toddler, and school-age
none	Ch 5 p 132	Describe the method to assess skin color, temp, and condition (cap. Refill in infant and children)
None Chart?	Ch 5 p 140	Normal range VS infant toddler, child
P 5	Ch 4 p 108, P 739	A and P larynx of child 5 th \edition 6/15
P 6	P 738-740	Head and brain size as it relates head injuries and TBI in children new info
P 7	Ch 24 p 581	Greenstick fx
P 7	P 739 chart 743 Heatloss No other reasons given	Body surface, thinner skin, less muscle mass, body fat greater risk for heat loss, faster absorption of toxins, morbidity from burns, multi organ injuries
P 8	none	Higher metabolism fewer energy reserves
P 14	None peds or OB	Surfactant-without it newborn survival is decreased
p 16	none	Verbal skills begin at one year, 18-20 speaks up to 20 words
P 17	none	Preschool child gross motor skills continue to development, social development.
P 17	none	Age 5 generally earliest age to begin skiing/snowboarding Expanded section on development
P 18-19	Ch 30 p 742-3	5 th ed expanded growth and development, right from wrong, acceptable behavior
P 19-20	Ch 30 p 743	Adolescence expanded growth and development-hormones, incomplete understanding of actions, law and government
P 20	None	Small airway, immature immune systems, resp emergencies are common
P 21- 24	Ch 30 p 745,752	Expanded info croup, tonsillitis, FBAO, bronchiolitis, pneumonia, asthma, (Epiglottitis more in 4 th)
P 24, 25	Ch 30 745	Expanded resp failure and cardiac arrest info
P 29	None in ch 30 Ch 12 p 347	Expanded info gastroenteritis, appendicitis, nausea vomiting, diarrhea
30	Ch30/754	Status epilepticus definition changed
31	none	Meningitis
31	Ch 30 756, 757	4 th basic info and questions to ask care giver 5 th more info about substances
37	None	SIDS
38	none	Leading cause of death from accidental trauma vehicle crashes, followed by firearms and drowning, blunt trauma leading MOI
P 39	Ch 30 761	Expanded info on head injuries
P 40	Ch 30 p 761	Chest and abd injuries expanded info- commotio cordis, pelvic injuries
P 41	none	Ped trauma for any given MOI, children are more likely than adults to have more severe injuries and injuries to more than one body system
P 42	Ch 30 p 763	Burns electrocutions; more in 4 th on burns No electrocution in 4 th
P 49	none	Reporting suspected child abuse
P 50	Ch 30 p 758	Shock, now info in 5 th .
P 54 P55	Ch 30 743, 744 none	Assessment process, expanded in 5th Pediatric assessment triangle
P 69-72	Ch 30 739	Honesty, trust, and communication, expanded info in 5th
P 73-80	Ch 30 743, 744	Physical exam expanded in 5 th
P 81-86	Ch 30 746,755	Management expanded info in 5th

5th Edition Chapter #/Title: _____ Chapter 31: Geriatric Emergencies

Name: Scott Rockefeller/ Kathy and Scott Division: Eastern _____

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Ch 31 Pages 1-69	Does not exist	No geriatrics info in the fourth edition
		Unable to find any reference to geriatrics other than ch 15, page 418 hypothermia refers to "old age"

31-9	n/a	New terms such as-Osteoporosis, Scoliosis, Kyphosis, Lordosis
31-32		Elder abuse discussed

5th Edition Chapter #/Title: Chapter 32: Outdoor Adaptive Athletes

Name: Chip Woodland/Kathy Glynn Division: Professional/ Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Pg 11	None	Autonomic dysfunction- new info
Pgs 27, 28		Listing of 2010 paralympic adaptive sports- new info
Pgs 28-38	Ch 31 pg 777	Expanded list with increased detail on "Adaptive Athlete Equipment"
P 1	Ch 31 page 772	Expanded objectives 1, 4, 5, 6, 7, 8
P 3 terms	none	Intellectual disabilities, ski bra, sliding board
P 29	Ch 31 p 777	General equipment; prosthetics/amputations, crutches expanded in 5th
P 32	none	Tether
P 36	none	Warm weather sports equipment
P 42-50	none	Assessment intellectual and physical disabilities expanded in 5th
P 51	none	Getting a disabled athlete out of specialized equipment
P 52	none	Cost of adaptive equipment and prosthetic limbs
P 52	none	Service animals

5th Edition Chapter #/Title: Chapter 33: Behavioral emergencies and Crisis Response

Name: Scott Rockefeller/Chip Woodland Division: Eastern/Professional

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
P 9	None	Chemical exposures-how drugs can mimics behavioral emergency
P 9	Ch 12 p 337	Medical exposures
P 10	None Ch 31 p 776	Neurosis, psychosis (behavioral conditions)
P 11	Ch 13 p 383	Hallucinations
P 11	Ch 2 p 47	Anxiety
P 12	None	Paranoia
P 13	Ch 31 p 776	Schizophrenia
P 13	none	Dipolar disorder
P 15	30 765	Abuse
P 21	None Ch 2, p 44	Livor mortis Dependant lividity (secondary terminology)
P 21	none	DNR
P 41	None Ch 16 p 457	Restraints Found very similar info
P 44	none	Positional asphyxia

5th Edition Chapter #/Title: Chapter 34: Obstetric and Gynecologic Emergencies

Name: Scott Rockefeller/Kathy Glynn Division: Eastern/Central

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
P 13	None	Cystitis
P 13	None	Ovarian cysts
P 13	None	PID
P 16	None	Sexual assault
P 45-47	None, p 479 One statement	Trauma during pregnancy, expanded in 5th
P 7- 9	None	Gestation, gestational period
P 12	None	Dysmenorrhea
P 14	None	Vaginal bleeding, normal and abnormal
P 22	Ch 17 p 463	Expanded-Pregnancy, normal physiologic changes

P 41	Ch 17 p 473	4 th If heart rate is less than 80bpm or between 80 and 100 not coming up with ventilations, continue vent, and start cardiac compressions. 5 th states Infants with a pulse rate lower than 60 bpm or pulse rate remaining between 60 and 100 bpm, despite adequate vent, should be given chest compressions
Insert figure 34-6,7	Ch 17 p 474	Breech presentations/deliveries
None	Ch 17 p 476,	Twins, none in 5 th
None	Ch 17 p 477	Premature infant, none in 5 th 5 th Premature delivery only (p 7 and 22)
P 48- 53	Ch 17 p 465	First steps in treating a pregnant pt and Assessment of Expanded in 5 th ed.

5th Edition Chapter #/Title: _____ Chapter 35: Special Operations and Ambulance Operations _____

Name: Scott Rockefeller/Kathy and Scott Division: Eastern _____

5 th Ed. Pg #	4 th Ed. Ch./Pg #	Please TYPE/PRINT Specific Changes
Ch 35		All new info
	Ch 3	EMS interface doesn't mesh or compare with chapter 35