

Note to Scoutmasters:

- (1) Read Part 1-6 for each rank before you conduct the SM Conference.
- (2) Do not give these books to Scouts. They are kept in the file cabinet. Scouts may download a copy from the website.
- (3) Scouts must come to the SM Conference with their Scout Handbook. Have them use the book if they need a quick reference. Scouts need to know how to reference their book.
- (4) Intent of SM Conferences for T/F through 1C is teaching unless the Scout is totally unprepared or clueless. If so, send them back to study. You should be more demanding for Star – Eagle. They must know their T/F – 1C Scout Skills; if not – stop the conference, send them back to study, and reschedule only at your convenience. Chide them for wasting your time. We want the Star-Eagle Scouts in the business of teaching younger Scouts – we cannot do that if they do not know their skills.
- (5) When Scouts request a SM Conference, remind them that it is their job to review the material prior to the SM Conference. If it is apparent that they have not reviewed the material, inform them that you will not begin the Scoutmaster Conference and it will be rescheduled at your convenience.
- (6) This booklet is a guide. The SM May ask additional technical questions from prior ranks (use the Scout Handbook) if warranted by the fact that the Scout does not have a good grasp on ALL T/F – 1C technical skills.
- (7) Finally, use this as an opportunity to get to know the Scout better. Find out what he likes and dislikes about Scouting and the Troop – use that as feedback for the monthly Scoutmaster’s meetings.

Note to Scouts

- (1) It is your job to contact the ASM associated with your patrol to arrange a SM Conference. Any SM may do you SM Conference. However, you should only ask other SMs if the ones associated with you patrol are not available. This means that you have contacted them personally and they said no because of their schedule.
- (2) The questions noted in the booklet are a guide for the SM. He/She may ask you additional questions for past ranks. You are expected to know all Scout technical skills for this rank and your previous ranks. This requirement becomes much more stringent if you are going for Star through Eagle. If the Scoutmaster determines that you have not prepared, he/she will stop the conference and you will reschedule at the convenience of the SM since you have wasted their time once.
- (3) You are required to bring your Scout Handbook to the SM Conference. It is acceptable if you need to **occasionally** refer to your book to answer a question or demonstrate a skill – note the emphasis placed on occasionally.

1st Class

Scoutmaster's Conference Workbook – 1st Class

Scoutmasters – Complete items 1-6. Upon completion of the Scoutmaster Conference, place this workbook back in the Scout's individual file folder in the office filing cabinet. Do not give this book to Scouts. They can download a copy from the website.

1. General Information

(a) Scoutmaster _____

(b) Date _____

2. Scoutmasters must evaluate the Scout on all requirements for the Scoutmaster Conference rank. The intent is **“hands-on”** as much as possible – demonstrate not discuss. Use the Scoutmaster Conference buckets for “hands-on” items. Some items (such as axes, stoves, lanterns, and other equipment) are located in the trailers or shed. Questions starting with the word “demonstrate” mean demonstrate (not discuss) by the Scout.

As discussed at the Scoutmaster Meeting, the purpose of this type of forum is:

- Ensure that our Scouts know the material as we will expect them to be the teachers of the future – this provides a quality check in the
- troop.
- Objectvize the SM Conference – i.e. 85%”Go” rate in paragraph 3.
- Equalize SM Conference among Scoutmasters. It also serves as a memory jogger for Scoutmasters.

Credit should be given for the tasks if the Scout **generally** knows the material – exactness is required for some but not all questions. For instance, they do not need to recite by rote all of the symptoms for a heart attack. However, if it is clear that they do not know the material on a particular subject, move on and have them do that at a later date. Allows Scouts to use their handbook on an infrequent basis - we want ensure that they know how to navigate within their book. The GO/NO GO questions are a guideline. Scoutmasters have the prerogative to ask additional T/F – 1C questions from past ranks if it is clear that the Scouts does not have a grasp on technical skills.

Complete the following spreadsheets as the Scout finishes each part.

Rank	Part	GOs	NO-GOs	TOTAL
Scout	Part I			2
Tenderfoot	Part II			50
2nd Class	Part III			81
1st Class	Part IV			110
Added Questions (If Deemed Necessary)				
Total is 239 w/ No Added Questions				243

Score Recapitulation

Number of GOs	
Number of NO-GOs	
TOTAL	
Number of GOs/Divided by Total*100	

3. Summary. Go needed on all four of following to pass SM Conference.

- (a) Achieved 85% or better on all questions.
- (b) Passed Uniform Inspection within Past Year. Check Scout's individual file folder in the office. (1st Year Scouts will not have a uniform inspection until Nov/Dec of the first year.)
- (c) Shows Tot'em Chit Card
- (d) Shows Fire'em Chit Card

Go	No-Go
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

All GO's, then sign-off Scoutmaster's Conference in Scout Handbook.

4. Have the Scout state three goals that he wants to complete by the next Scoutmaster's Conference.

- (a) _____

- (b) _____

- (c) _____

5. Have the Scout state when he plans to attain the next rank: _____
6. Make a copy of the previous page and give it to the Scout. Place Scoutmaster Conference Workbook in the Scout's individual file folder in the office filing cabinet.

Note: This Scoutmaster Conference Booklet does not address the other subjective rank requirement as shown below:

- Demonstrate Scout Spirit by living the Scout Oath (Promise) and Scout Law in your everyday life.

This requirement is assessed using the criteria defined in the Troop Scout Operations SOP.

Requirements for Sign-Off

On a piece of paper, describe five significant activities that you have accomplished since your last Scoutmaster's Conference that meet the definition of this requirement. Explain these activities to a Scoutmaster/Assistant Scoutmaster. These activities must be significant and require an investment of your time. Record dates and the job that you performed. Examples:

- (a) Opening a door for one person at a supermarket **IS NOT** a significant accomplishment that requires an investment in your time.
- (b) Mowing the yard, for free, for the elderly woman across the street **IS** a significant accomplishment that requires the investment of your time.

PART I (Scout)

Go	No-Go
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

- 1) Demonstrate tying the square knot
- 2) Demonstrate the Scout Salute – must be a smart salute with arm at 90 degrees to side of body – forearm and hand straight.

PART I SUMMARY

Number of GOs	Number of NO-GOs

Total should add up to 2 if no additional questions are asked by the SM. Report GOs and NO-GOs in Paragraph 2.

PART II (Tenderfoot)

- 7) Discuss the first aid for the following:
- a) Larger Cuts
 - i) Use direct pressure to stop bleeding
 - ii) Cover with a sterile gauze or clean cloth folded into pad
 - iii) Hold the pad in place with tape, cravat bandage, or other binder
 - b) Poisonous snakebite
 - i) Get victim to a physician as soon as possible
 - ii) Remove rings and other jewelry that might cause problems if the area swells
 - iii) If the you must wait for medical help, have victim lie down with the bitten part of the body lower than the rest of the body
 - iv) Encourage him to stay calm.
 - v) Possibly treat for shock
 - vi) Do not make any cuts on the bite
 - vii) Do not apply ice.

Go	No-Go
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

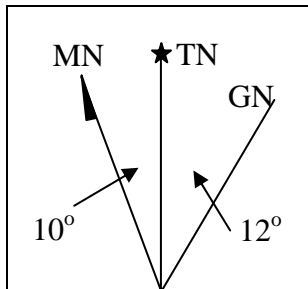
PART II SUMMARY

Number of GOs	Number of NO-GOs

Total should add up to 50 if no additional questions asked by the SM.
Report GOs and NO-GOs in Paragraph 2.

PART III (2nd Class)

- 1) Demonstrate how to orient a map to the compass - Use the Huntsville map sheet. (Note: Rather easy in AL because grid north and magnetic north are within one degree. Uses the edge of the compass and orients the map
- 2) What does the scale on a map mean?
 - a) On the Huntsville map, 1" on the map means how many inches on the ground?
 - b) Use the scale on the map and a ruler (or straight edge) to determine the distance between two points identified by the Scoutmaster.
- 3) What is the difference between true north, magnetic north, and grid north?
- 4) For the declination shown below, what azimuth would you set on your compass to travel a grid azimuth of 210° S



Best Way to Explain This: Assume that the GN at left is lined up with the N-S grid on your map (i.e. grid azimuth of 0 degrees). The MN to the left means that the magnetic north of the Earth (i.e. magnetic azimuth 0 degrees) is to the left of grid north. In order to move on a grid azimuth of x degrees, you will need to add $10 + 12 = 22$ magnetic degrees to the grid degree.

- 5) Demonstrate how you would walk a course of 300° magnetic. (Note: Scout must use some type of distant aiming point method on the course to pass this requirement.)
- 6) Demonstrate the safe use of the knife.
 - a) Keep the blade closed except when using the knife.
 - b) Cut away from yourself.
 - c) Close the blade before you pass the knife to someone else.
 - d) Keep your knife sharp and clean.
 - e) Do not carry a knife with the blade open.
 - f) Do not throw a knife.
- 7) Demonstrate making a cravat bandage.

Go	No-Go
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

PART III (2nd Class)

8) Discuss what to do for “hurry” cases of:

a) Stopped breathing

i) Open the airway

(1) If victim unconscious

(a) Place them on their back

(b) Clear the tongue from the airway by pressing on the forehead with one hand and lifting the chin with the other to tilt the head back.

(c) If you suspect that the neck is injured, keep the head still and thrust the jaw forward

(2) Look into the mouth for gum, food, or other obstruction.

(3) Protect the airway. If the victim begins to vomit, turn them on their side so that the vomit comes out of the mouth rather than getting into the lungs.

ii) If the airway appears to be open and the victim is still not inhaling and exhaling, begin rescue breathing.

(1) Place a mouth barrier device over the victim’s mouth.

(2) Maintain head-tilt jaw-thrust position, pinch the nostrils, seal your mouth over the victim’s mouth, and blow into their lungs. (For a child, place your mouth over both the mouth and the nose.)

(3) Remove your mouth and take another breath. Look for the victim’s chest to fall as he/she exhales.

(4) Repeat every 5 seconds for anyone over 9 years of age. 3 seconds for anyone under 9.

(5) If the victim’s chest does not rise and fall, no air is reaching the lungs. Follow these steps:

(a) Reposition the head and jaw so that the tongue does not block the airway.

(b) Check again for obstruction in the mouth.

(c) Perform the Heimlich maneuver to remove anything lodged in the throat.

iii) When do you stop rescue breathing? Ans: When a medic tells you to stop or it becomes physically impossible for you to keep going.

Go	No-Go
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

PART III (2nd Class)

- b) Serious Bleeding
 - i) Direct pressure on the wound will stop most bleeding. If available, put on latex gloves from your first aid kit. With a clean cloth or sterile dressing as a pad, use the palm of your hand to apply firm pressure over the wound. Do not waste time if clean material is not available – use the cleanest thing that you have.
 - ii) While pressing the wound, raise the level of the injury above the level of the victim’s heart.
 - iii) Direct pressure is almost always the treatment of choice. Bleeding can sometimes be further slowed by pressing hard on an arterial pressure point in the victim’s armpit or groin.
 - iv) Do not remove direct pressure pads that become soaked with blood. Place fresh pads over the old ones.
 - v) When the bleeding has stopped, hold the pad in place with a cravat bandage, an athletic wrap, strips torn from clothing, or something else. Bind the pad firmly but no so tightly that circulation is cut off. Periodically check for a pulse in the injured limb. If there is no pulse, the bandage is too tight.
 - vi) If you have touched any blood or other bodily fluids, wash your hands with soap and water or cleanse with an antiseptic as soon as possible. Change out any clothing that might have come in contact with blood.
- c) Internal poisoning
 - i) Immediately take any poison containers to a telephone. Call the poison control center at 1-800-222-1212 or dial 911. Follow instructions that you are given.
 - ii) Treat the victim for shock and monitor breathing. Do not give anything by mouth unless you are told to do so by medical professionals.
 - iii) Save any vomit. It will help the physician identify the poison and give the correct treatment.

	Go	No-Go
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

PART III (2nd Class)

- 9) Discuss first aid for the following:
- a) Bite of a suspected rabid animal
 - i) Scrub the wound with soap and water to remove saliva.
 - ii) Cover the bandage with a sterile gauze and get the victim to a doctor.
 - iii) Do not put yourself at risk by trying to catch the animal. Call police, rangers, or animal control.
 - b) Serious burns (2nd Degree)
 - i) Place the injury in cool water until the pain goes away.
 - ii) Let the burn dry then protect it with a sterile gauze.
 - iii) Do not break blisters as this open a passage way for bacteria through the skin.
 - c) Heat exhaustion
 - i) What is it? – Body’s cooling system is overworked
 - ii) Symptoms – may have some or all of the following:
 - (1) Pale skin that is clammy from heavy sweating
 - (2) Nausea or fatigue dizziness and fainting
 - (3) Headaches, muscle cramps, and weakness.
 - iii) First Aid
 - (1) Have the victim lie in a cool, shady place with their feet raised. Remove excess clothing.
 - (2) Cool the victim by applying cool, wet cloths to their body and by fanning them.
 - (3) If the victim is alert, let them sip from a glass of water which contains a pinch of salt.
 - (4) Recovery should be rapid. If symptoms persist, call for medical help.

Go	No-Go
<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

PART III (2nd Class)

- d) Shock
- i) What is it? If a person is injured or under great stress, their circulatory system might not provide enough blood to all parts of the body.
 - ii) Symptoms – may have some or all of the following:
 - (1) A feeling of weakness
 - (2) Confusion, fear, dizziness
 - (3) Skin that is moist, clammy, cool, and pale.
 - (4) Quick weak pulse
 - (5) Shallow, rapid, and irregular breathing.
 - (6) Nausea and vomiting
 - (7) Extreme thirst
 - iii) First Aid
 - (1) Eliminate the cause of shock by restoring breathing and heartbeat, controlling bleeding, relieving severe pain, or treating wounds.
 - (2) Make sure that the airway stays open for breathing.
 - (3) Have the injured person lie down. Raise his feet ten to twelve inches to move blood from his legs to his vital organs.
 - (4) Keep him warm by placing plenty of blankets, coats, or sleeping bags under and over them.

Go	No-Go
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

PART III (2nd Class)

	Go	No-Go
e) Heatstroke		
i) What is it? Victims cooling system is so overworked that it stops.	<input type="checkbox"/>	<input type="checkbox"/>
ii) Symptoms – may have some or all of the following:		
(1) Very hot skin	<input type="checkbox"/>	<input type="checkbox"/>
(2) Red skin, can be either dry or damp with sweat	<input type="checkbox"/>	<input type="checkbox"/>
(3) Rapid and quick pulse, noisy breathing	<input type="checkbox"/>	<input type="checkbox"/>
(4) Confusion and irritability, unwillingness to accept treatment	<input type="checkbox"/>	<input type="checkbox"/>
(5) Unconsciousness	<input type="checkbox"/>	<input type="checkbox"/>
iii) First Aid		
(1) Move victim to a cool, shady spot.	<input type="checkbox"/>	<input type="checkbox"/>
(2) Cool then any way that you can. Remove outer clothing and sponge them with cool water. Cover with wet towels or wet clothing. Fan. Place victim	<input type="checkbox"/>	<input type="checkbox"/>
(3) Keep the victim lying down with the head and feet slightly raised.	<input type="checkbox"/>	<input type="checkbox"/>
(4) Monitor the victim closely. Victim’s temperature might go up again, might vomit, might require rescue breathing.	<input type="checkbox"/>	<input type="checkbox"/>
(5) Call for medical help right away.	<input type="checkbox"/>	<input type="checkbox"/>
f) Dehydration		
i) What is it? Person has given off more water than he/she takes in.	<input type="checkbox"/>	<input type="checkbox"/>
ii) Symptoms – may have some or all of the following:		
(1) Fatigue	<input type="checkbox"/>	<input type="checkbox"/>
(2) Headache and body aches	<input type="checkbox"/>	<input type="checkbox"/>
(3) Confusion	<input type="checkbox"/>	<input type="checkbox"/>
iii) First Aid – Drink plenty of fluids.	<input type="checkbox"/>	<input type="checkbox"/>
10) Explain why swimming rescue methods should not be attempted when reaching or throwing rescue is possible. Ans: Use the least dangerous rescue methods to you – reach, throw, row, then go.	<input type="checkbox"/>	<input type="checkbox"/>
11) Explain the three R’s of personal safety and protection.		
▪ Recognize situations that place him at risk of being molested, how child molesters operate, and that anyone could be a molester.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Resist unwanted and inappropriate attention. Resistance will stop most attempts at molestation.	<input type="checkbox"/>	<input type="checkbox"/>
▪ Report attempted or actual molestation to a parent or other trusted adult. This prevents further abuse of himself and helps to protect other children. Let the Scout know he will not be blamed for what occurred.	<input type="checkbox"/>	<input type="checkbox"/>

PART III (2nd Class)

PART III SUMMARY

Number of GOs	Number of NO-GOs

Total should add up to 81 if no additional questions asked by the SM.
Report GOs and NO-GOs in Paragraph 2.

PART IV (1st Class)

	Go	No-Go
e) Demonstrate the diagonal lashing		
i) Used to bind together poles that <u>do not touch</u> and cross each other at an angle between 45 and 90 degrees.	<input type="checkbox"/>	<input type="checkbox"/>
ii) Start with a timber hitch around both poles. Pull it tight so both poles are snug.	<input type="checkbox"/>	<input type="checkbox"/>
iii) Make three tight wrapping turns on the opposite diagonal of the timber hitch.	<input type="checkbox"/>	<input type="checkbox"/>
iv) Make three tight wrapping turns in the same direction as the timber hitch.	<input type="checkbox"/>	<input type="checkbox"/>
v) Add two tight frapping turns	<input type="checkbox"/>	<input type="checkbox"/>
vi) Finish with a clove hitch. Work the clove hitch tight against the lashings.	<input type="checkbox"/>	<input type="checkbox"/>
10) Demonstrate tying the bowline knot and describe several ways that it can be used.		
a) Demonstrate tying the knot	<input type="checkbox"/>	<input type="checkbox"/>
b) Scout knows uses - the bowline is useful because it will not slip		
i) Rescue situations	<input type="checkbox"/>	<input type="checkbox"/>
ii) Tying a non-slip rope to anything	<input type="checkbox"/>	<input type="checkbox"/>
11) Demonstrate bandages for a sprained ankle and for injuries on the head, the upper arm, and the collarbone.		
a) Sprained ankle		
i) If you need to keep walking		
(1) Don't remove your boot - it will support your ankle	<input type="checkbox"/>	<input type="checkbox"/>
(2) Reinforce the ankle by wrapping it, boot and all, with a triangular bandage	<input type="checkbox"/>	<input type="checkbox"/>
(3) Demonstrate wrapping the triangular bandage	<input type="checkbox"/>	<input type="checkbox"/>
ii) As soon as you do not need to walk:		
(1) Take off your shoe	<input type="checkbox"/>	<input type="checkbox"/>
(2) Rest you leg raised	<input type="checkbox"/>	<input type="checkbox"/>
(3) Reduce swelling with cold, wet towel or ice	<input type="checkbox"/>	<input type="checkbox"/>
(4) Compression of an athletic bandage may help	<input type="checkbox"/>	<input type="checkbox"/>
b) Injuries to the head		
i) Head injuries may be very serious and cause extreme bleeding. Call for help immediately if it looks serious.	<input type="checkbox"/>	<input type="checkbox"/>
ii) If the victim is conscious, have him/her hold a clean cloth over the wound and apply pressure	<input type="checkbox"/>	<input type="checkbox"/>
iii) Keep the victim as comfortable as possible	<input type="checkbox"/>	<input type="checkbox"/>
iv) Demonstrate tying a triangular bandage over the head.	<input type="checkbox"/>	<input type="checkbox"/>

PART IV (1st Class)

	Go	No-Go
c) Injures to the upper arm		
i) Tie a splint to the outside of the upper arm.	<input type="checkbox"/>	<input type="checkbox"/>
ii) Place the arm in a sling with the forearm raised about three inches above level.	<input type="checkbox"/>	<input type="checkbox"/>
iii) Use a cravat to hold the upper arm against the side of the body.	<input type="checkbox"/>	<input type="checkbox"/>
d) Injuries to the collarbone		
i) Place the forearm in a sling with the hand raised higher than the elbow.	<input type="checkbox"/>	<input type="checkbox"/>
ii) Tie the upper arm against the side of the body with a wide cravat bandage. No splint is necessary.	<input type="checkbox"/>	<input type="checkbox"/>
12) Show how to transport yourself, and with one other person, a person:		
a) From a smoke filled room		
i) With both hands, grasp their clothing and drag them toward you.	<input type="checkbox"/>	<input type="checkbox"/>
ii) Roll them into a coat, blanket, tablecloth, or whatever is handy to and drag them on that.	<input type="checkbox"/>	<input type="checkbox"/>
iii) Get behind the victim, reach under his arms, grab his wrists, and haul him out of the room.	<input type="checkbox"/>	<input type="checkbox"/>
b) With a sprained ankle, for at least 25 yards.		
i) Walking Assist		
(1) Bring one of his arms over your shoulder and hold onto his wrist.	<input type="checkbox"/>	<input type="checkbox"/>
(2) Place your free arm around his waist.	<input type="checkbox"/>	<input type="checkbox"/>
ii) One-Person Carry		
(1) Kneel in front of the victim with your back to his belly.	<input type="checkbox"/>	<input type="checkbox"/>
(2) Grasp his hands over your chest and carry them piggyback	<input type="checkbox"/>	<input type="checkbox"/>
(3) Avoid straining your back by keeping it straight and lifting with your legs.	<input type="checkbox"/>	<input type="checkbox"/>
iii) Four- Handed Seat Carry		
(1) Each bearer grabs his own right wrist with his left hand	<input type="checkbox"/>	<input type="checkbox"/>
(2) Two bearers then lock hands with each other.	<input type="checkbox"/>	<input type="checkbox"/>
(3) Patient sits on their hands and places his arms around their shoulders	<input type="checkbox"/>	<input type="checkbox"/>

PART IV (1st Class)

	Go	No-Go
iv) Two Person Carry		
(1) Bearers kneel on either side of the patient.	<input type="checkbox"/>	<input type="checkbox"/>
(2) Bearer slides one arm under the victim's back and one under his thighs	<input type="checkbox"/>	<input type="checkbox"/>
(3) Bearers grab each others wrists and shoulders.	<input type="checkbox"/>	<input type="checkbox"/>
(4) Rise from the ground with the patient supported between them.	<input type="checkbox"/>	<input type="checkbox"/>
13) Tell the five most common signs of heart attack. Explain the steps in cardiopulmonary resuscitation.		
a) Signs of a heart attack.		
i) Uncomfortable pressure, squeezing, fullness, or pain in the center of the chest. The feeling might spread to the shoulders, arms, and neck.	<input type="checkbox"/>	<input type="checkbox"/>
ii) Unusual sweating even though the room might be cool.	<input type="checkbox"/>	<input type="checkbox"/>
iii) Nausea - stomach distress with an urge to vomit	<input type="checkbox"/>	<input type="checkbox"/>
iv) Shortness of breath	<input type="checkbox"/>	<input type="checkbox"/>
v) A feeling of weakness	<input type="checkbox"/>	<input type="checkbox"/>
b) Procedures for cardiopulmonary resuscitation.		
i) See if there is a CPR qualified person in your group. If not, do the following:	<input type="checkbox"/>	<input type="checkbox"/>
ii) Using heels of both hands, compress the breastbone midway between the nipples approximately 1-1/2 to 2 inches in depth.	<input type="checkbox"/>	<input type="checkbox"/>
iii) Compress at a rate of 100 compressions per minute.	<input type="checkbox"/>	<input type="checkbox"/>
iv) Repeat cycles of 30 compressions and two ventilations.	<input type="checkbox"/>	<input type="checkbox"/>

