



# Standard Guide for Defining the Performance of First Aid Providers in Occupational Settings<sup>1</sup>

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## 1. Scope

1.1 This guide covers the minimum requirements needed to train a student to assess and manage illness and injury prior to: (1) notification, arrival, or treatment by traditional EMS agencies, or combination thereof, or (2) management of a minor emergency medical incident instead of an EMS response.

1.2 This guide also recommends minimum instructor qualifications, program logistics, and medical oversight considerations.

1.3 This guide does not delineate a new level of formalized education for prehospital medical provision. This guide does not replace or decrease the need for appropriate agencies to seek state or national licensure or certification as an First Responder or Emergency Medical Technician (Basic, Intermediate, or Paramedic).

1.4 Content and skills appropriate to the first aid provider's scope of care and specific to the hazards or risks of particular industries and occupations may be added by program developers, instructors, and employers. These changes should be consistent with the intent and design of this guide.

## 2. Referenced Documents

### 2.1 Related Documents:

[National Guidelines for First Aid Training in Occupational Settings, November 1998, Preface, Course Guide and Curriculum Modules<sup>2</sup>](#)

[National EMS Education and Practice Blueprint<sup>3</sup>](#)

## 3. Terminology

### 3.1 Definitions of Terms Specific to This Standard:

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<sup>2</sup> Available from National Guidelines for First Aid Training in Occupational Settings, [www.ngfatos.net](http://www.ngfatos.net).

<sup>3</sup> Available from the National Highway Traffic Safety Administration's EMS Division, 400 7th St., NW, Washington, DC 20590. Also available from <http://www.nhtsa.dot.gov/people/injury/ems/EdAgenda/final/emstoc.html>.

3.1.1 *first aid provider, n*—a person who has an occupational requirement to be trained in very basic emergency medical techniques and may be designated or expected to provide aid as an initial (pre-EMS) responder.

3.1.2 *initial responder, n*—a person who has an occupational requirement to be trained in very basic initial emergency medical techniques, but responds as a “Good Samaritan.”

## 4. Significance and Use

4.1 Currently, no one body of work exists that contains a comprehensive standard for defining the performance standards for personnel that are initial responders to illness and injury in the occupational setting. Whereby several corporate, state, and national organizations have developed training curricula, no independent consensus standard establishes a national minimum requirement. This guide allows the determination of course equivalency and provides a mechanism to assess regulatory compliance.

4.2 This guide is intended to be consistent with the National EMS Education and Practice Blueprint, thus the first aid provider in an occupational setting in this guide is defined as in 3.1.2. This individual uses a limited amount of equipment to perform initial assessment and intervention while awaiting arrival of EMS.

4.3 The goal of this guide is to provide program developers, institutions teaching first aid courses, consumers of these courses, and regulatory agency personnel who review or approve courses, or both, the essential elements of what is considered safe, helpful, and effective first aid training. The focus and training is similar and, in some cases, largely identical to those standards developed by the National Guidelines for First Aid Training in Occupational Settings (NGFA-TOS) developed by the NGFATOS consensus group referenced in Section 2.

## 5. Instructor Qualification

5.1 Minimum instructor criteria include:

5.1.1 Be knowledgeable in aspects of first aid techniques and basic life support/cardiopulmonary resuscitation (BLS/CPR).

5.1.2 Be knowledgeable in methods of adult education.

5.1.3 Possess basic skills in managing resources and personnel.

5.1.4 Have attended and successfully completed a standardized course of instruction in First Aid, First Responder, or EMT-Basic.

5.1.5 Possess appropriate medical education abilities equivalent to the criteria in 5.1.1-5.1.5.

5.1.6 Possess other appropriate medical credentials including, but not limited to, EMT-P, RN, PA, and MD.

## 6. Curriculum

6.1 The typical first aid provider curriculum consists of six major and five optional (or enrichment) areas, as follows:

6.1.1 *Major Areas:*

6.1.1.1 Basic Preparatory,

6.1.1.2 Airway,

6.1.1.3 Assessment,

6.1.1.4 Circulation,

6.1.1.5 Medical Emergencies, and

6.1.1.6 Trauma Emergencies.

6.1.2 *Optional Areas:*

6.1.2.1 Enhanced Preparatory,

6.1.2.2 Infants and Children,

6.1.2.3 Oxygen Administration,

6.1.2.4 Automatic External Defibrillator (AED) (see **Note 1**), and

6.1.2.5 Industry specific medical/traumatic disorders.

**NOTE 1**—If an AED is available in the workplace, AED training shall be required.

## 7. Curriculum Objectives

7.1 Curriculum objectives are classified using the following legend:

C

C = *Cognitive*

C-1 = Knowledge level

C-2 = Application level

C-3 = Problem-solving level

A = *Affective*

A-2 = Application level

A-3 = Problem-solving level

P = *Psychomotor*

P-1 = Knowledge level

P-2 = Application level

P-3 = Problem-solving level

7.2 At the completion of the Basic Preparatory section, the student will be able to:

7.2.1 Discuss the components of Emergency Medical Services (EMS) systems. (C-1)

7.2.2 Differentiate the roles and responsibilities of the first aid provider from other out-of-hospital care providers. (C-3)

7.2.3 Accept and uphold the responsibilities of a first aid provider in accordance with the generally recognized standards of care. (A-3)

7.2.4 Explain the need to determine scene safety. (C-2)

7.2.5 Discuss the importance of body substance isolation (BSI). (C-1)

7.2.6 Describe the steps the student should take for personal protection from bloodborne pathogens. (C-1)

7.2.7 Describe the personal protective equipment necessary for exposure to bloodborne pathogens. (C-1)

7.2.8 Appropriately use personal protective equipment, given a scenario with potential infectious exposure. At the completion of the scenario, the first aid provider will properly remove and discard the protective garments. (P-1, P-2)

7.2.9 Define the first aid provider's scope of care. (C-1)

7.3 At the completion of the Airway section, the student will be able to:

7.3.1 Describe the major structures of the respiratory system. (C-1)

7.3.2 Describe determining the presence of breathing. (C-1)

7.3.3 Describe the steps in the head-tilt chin-lift (and the chin-lift without head-tilt). (C-1)

7.3.4 Relate mechanism of injury to opening the airway. (C-3)

7.3.5 Describe how to ventilate an ill or injured adult (with a resuscitation barrier device). (C-1)

7.3.6 Describe the steps in providing mouth-to-mouth and mouth-to-stoma ventilation. (C-1)

7.3.7 Describe how to clear a foreign body airway obstruction in a responsive adult. (C-1)

7.3.8 Describe how to clear a foreign body airway obstruction in an unresponsive adult. (C-1)

7.3.9 Explain why airway protective skills and basic life support ventilation take priority over all other basic life support skills. (A-3)

7.3.10 Demonstrate a caring attitude towards ill or injured persons with airway problems who request emergency medical services. (A-3)

7.3.11 After rescuer safety is ensured, place the interests of the ill or injured person with airway problems as the foremost consideration when making any and all emergency care decisions. (A-3)

7.3.12 Demonstrate the steps in the head-tilt chin-lift. (P-1, P-2)

7.3.13 Describe the steps in the chin-lift without head-tilt. (P-1, P-2)

7.3.14 Demonstrate the steps in mouth-to-mouth ventilation with body substance isolation (barrier shields) in the unresponsive adult. (P-1, P-2)

7.3.15 Demonstrate how to clear a foreign body airway obstruction in a responsive adult. (P-1)

7.3.16 Demonstrate how to clear a foreign body airway obstruction in an unresponsive adult. (P-1)

7.4 At the completion of the Patient Assessment the section, the student will be able to:

7.4.1 Describe the components of scene assessment. (C-1)

7.4.2 Describe common hazards found at the scene. (C-1)

7.4.3 Determine if the scene is safe to enter. (C-2)

7.4.4 Describe common mechanisms of injury or nature of illness, or both. (C-1)

7.4.5 Describe the reason for determining the total number of ill or injured persons at the scene. (C-1)

7.4.6 Describe methods of assessing responsiveness. (C-1)

7.4.7 Describe methods used for assessing if an ill or injured person is breathing. (C-1)

7.4.8 Distinguish between an ill or injured person with adequate breathing and an ill or injured person with inadequate breathing. (C-3)

7.4.9 Describe how to assess circulation. (C-1)

7.4.10 Describe the how to obtain a pulse in an adult. (C-3)

7.4.11 Determine the need for assessing external bleeding. (C-1)

7.4.12 Describe the components of on-going assessment. (C-1)

7.4.13 Explain the reason for assessment of scene safety prior to entering. (A-2)

7.4.14 Explain the value of initial assessment. (A-2)

7.4.15 Explain the value of questioning the ill or injured person and bystanders. (A-2)

7.4.16 Explain the value of an on-going assessment. (A-2)

7.4.17 Demonstrate a caring attitude when performing initial and physical assessments. (A-3)

7.4.18 Demonstrate the ability to distinguish potential hazards. (P-1)

7.4.19 Demonstrate the techniques for assessing responsiveness. (P-1, P-2)

7.4.20 Demonstrate the techniques for assessing the airway. (P-1, P-2)

7.4.21 Demonstrate the techniques for assessing breathing. (P-1, P-2)

7.4.22 Demonstrate the techniques for assessing circulation. (P-1, P-2)

7.4.23 Demonstrate the techniques for assessing external bleeding. (P-1, P-2)

7.4.24 Demonstrate the techniques for assessing skin color, temperature, and moisture. (P-1, P-2)

7.4.25 Demonstrate the techniques for physical assessment. (P-1, P-2)

7.4.26 Demonstrate the on-going assessment. (P-1, P-2)

7.5 At the completion of the Circulation section, the student will be able to:

7.5.1 Explain the reasons the heart stops beating. (C-1)

7.5.2 Describe the components of basic life support/cardiopulmonary resuscitation (BLS/CPR). (C-1)

7.5.3 Describe each link in the chain of survival. (C-2)

7.5.4 Describe the steps of one-rescuer adult. (C-1)

7.5.5 Describe the technique of external chest compression on an adult. (C-1)

7.5.6 Explain when the first aid provider is able to stop BLS/CPR. (C-2)

7.5.7 Demonstrate a caring attitude towards persons in cardiac arrest. (A-3)

7.5.8 After rescuer safety is ensured, place the interests of the ill or injured person in cardiac arrest as the foremost consideration when making emergency care decisions. (A-3)

7.5.9 Demonstrate the proper technique of chest compression on an adult. (P-1, P-2)

7.5.10 Demonstrate the steps of adult (one rescuer) BLS/CPR. (P-1, P-2)

7.6 At the completion of Medical Emergency section, the student will be able to:

7.6.1 Identify the person who complains of a medical problem. (C-1)

7.6.2 Describe the steps in providing first aid to a person who complains of a medical problem. (C-1)

7.6.3 Describe the ill or injured person with a decreased level of responsiveness. (C-1)

7.6.4 Describe the steps in providing first aid to an ill or injured person with a decreased level of responsiveness. (C-1)

7.6.5 Describe a person having a seizure. (C-1)

7.6.6 Describe the steps in providing first aid to a person with seizures. (C-1)

7.6.7 Describe a person with medical problems resulting from exposure to cold. (C-1)

7.6.8 Describe the steps in providing first aid to a person with an exposure to cold. (C-1)

7.6.9 Describe a person with medical problems resulting from exposure to heat. (C-1)

7.6.10 Describe the steps in providing first aid to a person with an exposure to heat. (C-1)

7.6.11 Demonstrate a caring attitude towards a person who complains of a medical problem. (A-3)

7.6.12 After rescuer safety is ensured, place the interests of the person with a medical problem as the foremost consideration when making emergency care decisions. (A-3)

7.6.13 Demonstrate the steps in providing first aid to a person who complains of a medical problem. (P-1, P-2)

7.6.14 Demonstrate the steps in providing first aid to an ill or injured person with a decreased level of responsiveness. (P-1, P-2)

7.6.15 Demonstrate the steps in providing first aid to a person with seizures. (P-1, P-2)

7.6.16 Demonstrate the steps in providing first aid to a person with an exposure to cold or heat. (P-1, P-2)

7.6.17 Distinguish between minor and major bleeding. (C-3)

7.6.18 Describe the first aid for external bleeding. (C-1)

7.6.19 Explain the importance of body substance isolation. (C-3)

7.6.20 Describe the signs of internal bleeding. (C-1)

7.6.21 Describe first aid for an injured person with signs and symptoms of internal bleeding. (C-1)

7.6.22 Define shock. (C-1)

7.6.23 Describe the first aid for an ill or injured person in shock. (C-1)

7.6.24 Describe types of open soft tissue injuries. (C-1)

7.6.25 Describe the first aid for a soft tissue injury. (C-1)

7.6.26 Describe the functions of dressing and bandaging. (C-1)

7.6.27 Describe the reason for body substance isolation when dealing with bleeding and soft tissue injuries. (A-3)

7.6.28 Demonstrate a caring attitude towards injured persons with a soft tissue injury or bleeding. (A-3)

7.6.29 After rescuer safety is ensured, place the interests of the person with a soft tissue injury, bleeding, or shock as the foremost consideration when making emergency care decisions. (A-3)

7.6.30 Demonstrate direct pressure for external bleeding. (P-1, P-2)

7.6.31 Demonstrate the use of pressure dressings for external bleeding. (P-1, P-2)

7.6.32 Demonstrate the use of pressure points for external bleeding. (P-1, P-2)

7.6.33 Describe the function of the muscles and bones. (C-1)

7.6.34 Describe an open and a closed painful, swollen, or deformed extremity. (C-1)

7.6.35 Describe the first aid for an injured person with a painful, swollen, or deformed extremity. (C-1)

7.6.36 Explain the mechanism of injury as a possible cause of head and spine trauma. (C-3)

7.6.37 Describe signs and symptoms of a possible spine injury. (C-1)

7.6.38 Describe the first aid for an injured person with a possible spine injury. (C-1)

7.6.39 Describe signs and symptoms of head injury. (C-1)

7.6.40 Describe the first aid for head injuries. (C-1)

7.6.41 Demonstrate a caring attitude towards ill or injured persons with a muscle or bone injury, or both. (A-3)

7.6.42 After ensuring rescuer safety, place the interests of the person with a muscle or bone injury as the foremost consideration when making emergency care decisions. (A-3)

7.6.43 Demonstrate first aid for a painful, swollen, or deformed extremity. (P-1, P-2)

7.6.44 Demonstrate opening the airway when spinal cord injury is suspected. (P-1, P-2)

7.6.45 Demonstrate manual stabilization of the cervical spine. (P-1, P-2)

## **8. Optional (Enrichment) Curriculum Objectives**

8.1 At the completion of the Enhanced Preparatory section, the student will be able to:

8.1.1 Discuss possible emotional reactions that the first aid provider may experience when faced with trauma, illness, death, and dying. (C-1)

8.1.2 Discuss the possible reactions that others may exhibit when confronted with death and dying. (C-1)

8.1.3 Help others to understand the importance of personal protection from bloodborne pathogens. (A-2)

8.1.4 Demonstrate compassion when caring for any person with illness or injury. (A-2)

8.1.5 After rescuer safety is ensured, place the interests of the ill or injured person as the foremost consideration when making any and all emergency care decisions. (A-3)

8.1.6 Be familiar with statutes and regulations in your state regarding first aid provider. (C-1)

8.1.7 Define consent and discuss the methods of obtaining consent. (C-1)

8.1.8 Differentiate between expressed and implied consent. (C-3)

8.1.9 Discuss the issues of abandonment, negligence, and battery and their implications to the first aid provider. (C-1)

8.1.10 State the first aid provider's moral and ethical obligation to provide assistance. (C-1)

8.1.11 Explain the importance of the ill or injured person's confidentiality. (C-1)

8.1.12 Describe the first aid for a penetrating chest injury. (C-1)

8.1.13 Describe the first aid for an impaled object. (C-1)

8.1.14 Describe the first aid for an amputation. (C-1)

8.1.15 Describe the first aid for burns. (C-1)

8.1.16 Define body mechanics. (C-1)

8.1.17 Discuss the guidelines and safety precautions that need to be followed when lifting an ill or injured person. (C-1)

8.1.18 Describe the indications for an emergency move. (C-1)

8.1.19 Explain the reason for properly lifting and moving ill or injured persons. (A-3)

8.1.20 Explain the reasons for an emergency move. (A-3)

8.1.21 Demonstrate an emergency move. (P-1, P-2)

8.2 At the completion of the Infants and Children section, the student will be able to:

8.2.1 Describe differences in anatomy and physiology of the infant and child. (C-1)

8.2.2 Describe assessment of the infant and child. (C-1)

8.2.3 Describe distressed breathing in the infant and child. (C-1)

8.2.4 Describe the causes of seizures in infants and children. (C-1)

8.2.5 Describe first aid for infants and children with trauma. (C-1)

8.2.6 Describe the signs and symptoms of child abuse. (C-1)

8.2.7 Understand the first aid provider's own emotional response to caring for infants and children. (A-1)

8.2.8 Demonstrate a caring attitude towards infants and children with illness and injury. (A-3)

8.2.9 After rescuer safety is ensured, place the interests of the ill or injured infant or child as the foremost consideration when making emergency care decisions. (A-3)

8.2.10 Demonstrate differences in the assessment of infants and children. (P-1, P-2)

8.2.11 Demonstrate the steps in mouth-to-mouth ventilation with body substance isolation (barrier shields) in the unresponsive infant and child. (P-1, P-2)

8.2.12 Describe the steps of infant and child BLS/CPR. (C-1)

8.2.13 Describe the technique of external chest compression on an infant and child. (C-1)

8.2.14 Demonstrate the proper technique of chest compression on an infant and child. (P-1, P-2)

8.2.15 Demonstrate the steps of infant and child (one rescuer) BLS/CPR. (P-1, P-2)

8.3 At the completion of the Oxygen section, the student will be able to:

8.3.1 Describe the importance of oxygen delivery by the first aid provider. (C-1)

8.3.2 Describe the indications for using portable oxygen. (C-1)

8.3.3 List the components and functions of a portable oxygen device and delivery system. (C-1, C-2)

8.3.4 Describe the use of a nasal cannula. (C-1)

8.3.5 Describe use of a simple mask. (C-1)

8.3.6 Describe the use of a non-rebreather mask. (C-1, C-2)

8.3.7 Describe the use of a demand inhalator valve. (C-1, C-2)

8.3.8 Describe the components of a barrier mask with oxygen inlet. (C-1)

8.3.9 Describe how to ventilate an ill or injured person with a barrier mask. (C-1, C-2)

8.3.10 Discuss the important first aid issues associated with the use of oxygen in an emergency. (C-1, C-2, C-3)

8.3.11 Discuss the important issues associated with the regulatory labeling, safe handling, maintenance, and storage of oxygen. (C-1, C-2, C-3)

8.3.12 Explain the value of providing emergency oxygen to breathing ill or injured persons. (A-2)

8.3.13 Explain the value of providing emergency oxygen during rescue breathing. (A-2)

8.3.14 Demonstrate a caring attitude towards ill or injured persons who require emergency oxygen and request emergency medical services. (A-3)

8.3.15 After rescuer safety is ensured, place the interests of the ill or injured person as the foremost consideration when making any and all emergency care decisions. (A-3)

8.3.16 Demonstrate the proper safe handling and storage procedures associated with oxygen cylinders and other components. (P-1, P-2)

8.3.17 Demonstrate the assembly and set-up of a portable oxygen device. (P-1, P-2)

8.3.18 Demonstrate how to connect and use oxygen delivery systems in conjunction with oxygen regulators and flow controllers. (P-1, P-2)

8.3.19 Demonstrate the administration of emergency oxygen using a nasal cannula or a simple mask, or both. (P-1, P-2)

8.3.20 Demonstrate the administration of emergency oxygen using a non-rebreather mask. (P-1, P-2)

8.4 At the completion of the AED section, the student will be able to:

8.4.1 Discuss the local medical-legal requirements for lay person AED. (C-1)

8.4.2 Describe the signs of sudden cardiac arrest. (C-1)

8.4.3 Explain the relationship between sudden cardiac arrest and ventricular fibrillation. (C-1)

8.4.4 Describe the components of an automated external defibrillation program. (C-1)

8.4.5 Explain the role of CPR when delivering emergency care with an AED. (C-2)

8.4.6 Identify the age and weight requirements for using an AED on a person in cardiac arrest. (C-1)

8.4.7 Describe the basic steps of emergency care with an AED. (C-1)

8.4.8 List the four steps for operating an AED. (C-1)

8.4.9 Describe how an AED is integrated into basic life support. (C-3)

8.4.10 Differentiate between single rescuer and multi-rescuer emergency care with an AED. (C-3)

8.4.11 Discuss the maintenance required for AEDs. (C-1)

8.4.12 Understand the importance of rescuer safety and teamwork when providing emergency care with an AED. (A-3)

8.4.13 Demonstrate a caring attitude towards persons in cardiac arrest. (A-3)

8.4.14 After rescuer safety is ensured, place the interests of the person in cardiac arrest as the foremost consideration when making emergency care decisions. (A-3)

8.4.15 Demonstrate the steps for verifying a person is in cardiac arrest. (P-1, P-2)

8.4.16 Demonstrate preparation of the chest and proper electrode pad placement. (P-1, P-2)

8.4.17 Demonstrate the application and operation of the AED. (P-1, P-2)

8.4.18 Demonstrate a periodic maintenance check for an AED. (P-1, P-2)

8.5 At the completion of the Special Requirements section, the student will possess the cognitive, affective, and psychomotor knowledge related to specific occupational requirements.

8.5.1 Special requirements include, but are not limited to:

8.5.1.1 Confined Space.

8.5.1.2 Petro-Chemical Processing.

8.5.1.3 Electrical/Telephone/Cable Utilities.

8.5.1.4 Radiation.

8.5.1.5 Construction.

8.5.1.6 Logging.

8.5.1.7 Textiles.

8.5.1.8 Electronics.

8.5.1.9 Agriculture.

8.5.1.10 Food Processing.

8.5.1.11 Manufacturing.

## 9. Recommended Course Hours

9.1 The time to complete each lesson will vary according to factors such as instructional design, the varying nature of adult learners, and their number in a given class. The recommended time to complete all lessons and present cognitive, affective, and psychomotor objectives of the core guidelines is between four to eight hours. However, it is important to recognize that first aid provider training can be both general and specific to the unique hazards of the particular industry or process.

9.2 Programs of greater length (more than eight hours) and depth in knowledge or skill components, or both, may be necessary to ensure compliance with state or federal regulations, to provide training for specific occupational risks, or to prepare for extended EMS response times. These programs will contain the core program as well as additional supplemental or enrichment information, or both, germane to the industry served. The length of these extended programs is determined by the scope and depth of the additional information and skills presented.

## 10. Medical Oversight

10.1 Medical oversight is paramount in ensuring the highest quality out-of-hospital care. Program developers should work with medical professionals to review first aid training program curriculum in order to achieve a sound method of continuous quality improvement.

10.2 First aid provider training does not require a medical director.

## 11. Audio-Video Aids

11.1 In recent years, high-quality video materials have become available for occupational safety, EMS, and first aid training. If appropriate, these materials should be used as an integral part of the instruction in this guide. The course coordinator should ensure in advance that the necessary types of AV equipment are available for the class. If possible, the course administrator should have a video library available for the students.

## 12. Program Evaluation

12.1 On-going evaluation of the program should be conducted to identify instructional or organizational deficiencies affecting student performance. The evaluation process should be two-fold in nature: objective and subjective.

### 12.1.1 *Objective Evaluation:*

12.1.1.1 How well do students measure up to evaluation?

12.1.1.2 How well does the student perform?

### 12.1.2 *Subjective Evaluation:*

12.1.2.1 What is the perceived value of the course?

## 13. Maintaining Records

13.1 It is recommended that the program developer/administrator or instructor, or both, maintain, as a minimum, records on the following:

13.1.1 Student attendance and performance,

13.1.2 Results of evaluation,

13.1.3 Number and qualifications of the instructional team,

13.1.4 Student's evaluation of the instructor and course, and

13.1.5 Lists of enrichments and optional sections taught in conjunction with the program.

## 14. Keywords

14.1 buddy care; bystander care; emergency medical services (EMS); first aid provider; illness; injury; workplace injury

## APPENDIX

### (Nonmandatory Information)

## XI. RELATED MATERIALS

(1) American Heart Association, BCLS Training Programs (latest version). Available from the American Heart Association, 7272 Greenville Ave., Dallas, TX 75231.

(2) American Red Cross, CPR and First Aid Training Programs (latest versions). Available from the American Red Cross, P.O. Box 37243, Washington, DC 20013.

(3) National Highway Traffic Safety Administration (NHTSA), National Standard Curriculum for Bystander Care, DOT HS 807 872, October 1992. Available from NHTSA, 400 7th St., NW, Washington, DC 20590.

(4) National Safety Council (NSC), Good Samaritan and Initial Care Training Programs (latest versions). Available from National Safety Council, 1121 Spring Lake Dr., Itasca, IL 60143-3201.

(5) Unpublished ASTM draft for Industrial First Aid Kits.

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