



3

Characteristics of skiers and snowboarders Passionate Athletic Risk takers Adventurous Fun loving 5

Characteristics of skiers and snowboarders with a disability Passionate Athletic Risk takers Adventurous Fun loving





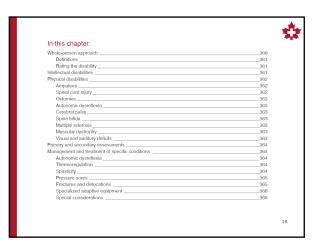












The difference in the terms, although subtle, seems to

independence. If a person requires an aide or a guide in

order to participate in an activity, he may have both a

describes any person with an impairment or disability

who is active in sports. The equipment that is used is

and a physical deformity). An $\underline{\text{\bf adaptive participant}}$

achieve certain tasks. This can reveal his level of

indicate the level of assistance the person may require to

disability and an impairment (example: cognitive disability

called adaptive equipment. It is highly specialized, custom

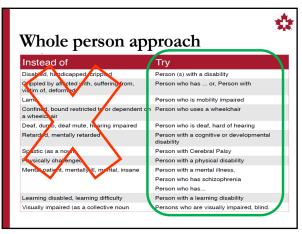
13 14

Definitions

A disability includes any physical or intellectual condition that hinders normal functions or daily activities. Persons with disabilities, whether inherited though genetics or acquired through trauma, prefer the term disability to handicap. The word impairment has a broader definition. This can be a loss of a physical, physiological, or psychological ability and/or the inability to perform daily tasks. A person may have impairment but not a disability. For example, a person with an amputation above the knee (impairment) may not have any problems reading, preparing meals, or driving a vehicle (disability). The person is able to wear a prosthetic, fit into alpine gear, and load the chairlift without any assistance. His impairment is not restrictive; it is adaptive.

built, and very expensive.

15 16



Primary and secondary assessment

When treating persons with disabilities, <u>ask what a person's normal is.</u> This will help to <u>establish a baseline</u> for further care. The fascinating and complex thing about a disability is that <u>everyone is different</u>. Thorough collection of vital signs and a thorough secondary assessment will likely uncover some deficits. Patrollers should <u>monitor injured persons with disabilities frequently and carefully in order to detect changes in their current condition.</u>

18

17



Pressure sores



Pressure sores can develop when skin suffers from friction or shear stress, when bony parts of the body press against a hard surface, or the sheath of a prosthetic, for long periods of time. Skin damage may also be caused by abrasions from clothing such as buttons, bulky seams, boots, objects placed in pockets, catheter connections, clamps, tight stockings, and some adaptive equipment. Blisters are a common annoyance and should not be neglected. Patrollers need to take all skin conditions seriously in order to alleviate pain and discomfort, and avoid future loss of mobility and/or infection.

Signs and symptoms of pressure sores

- · redness and swelling
- joint pain
- bleeding
- · infection and abscess

20

19

20

Management of pressure sores



- 1. Remove the offending object(s).
- 2. Protect the skin against further abrasion or irritation.
- 3. Pad the affected area well with sterile non-stick dressings.
- 4. Do not break blisters.

21

AFA modules File/Folder Name File Comments/Description Previous folder
FA241 Persons with Disabilities Go back to previous folder Current folder ☐ 1 eFA241 Persons with disabilities.pptx eFA241 Persons with disabilities Powepoint □ \$\ FA241 Persons with disabilities.pdf FA241 Persons with disabilities Document ■ FA241 Persons with disabilities Advanced, pdf

FA241 A Persons with disabilities Advanced, pdf

FA241A Persons with disabilities Advanced, pdf

EA241B Persons with intellectual disabilities Advanced, pdf

FA241B Persons with intellectual disabilities Advanced, pdf FA241A Persons with disabilities Advanced Document FA241A Persons with disabilities Advanced Powerpoint FA241B Persons with intellectual disabilities Advanced Payaragint ☐ M FA241X Sit ski removal.pptx FA241X Sit ski removal Powerpoint

21 22

eFA241 Persons with disabilities



On scene - Treatment

- If splinting, anticipate muscular spasticity. Patient may react to rigid supports – do not force an extremity into a fixed position.
- · Double pad all immobilization splints if possible
- Clean and bandage wounds paying attention to patient's possible heat loss from additional exposure
- Ask patient for feedback
- Gently load patient for transport

23

On Scene – Conscious Ask patient if assistance is needed and/or wanted Recognition of a person's intellectual disability can be fast

FA241B Persons with intellectual

- □ Recognition of a person's intellectual disability can be fast under normal circumstances not so fast if injured
- □ Patient may be unable to explain his problem
- □ Look for a nearby coach / guide / assistant / friend
- □ Involve companion in patient's assessment and treatment
- Perform a careful primary assessmentUpgrade call if indicated

2

23 24

2024-05-19





25 26





27 28





29 30

