



**FCCS: Resource Limited  
Sample Agenda**

<b>DAY 1</b>	
<b>7:00 a.m. – 7:15 a.m.</b>	<b>Welcome and Course Announcements</b> <b>FCCS: Resource Limited Overview</b>
<b>7:15 a.m. – 7:30 a.m.</b>	<b>Introduction to Austere and Operational Environments</b> <ul style="list-style-type: none"> <li>• Discuss the application of core concepts of FCCS in resource-limited settings</li> </ul>
<b>7:30 a.m. – 7:45 a.m.</b>	<b>Recognition and Assessment of the Seriously Ill Patient</b> <ul style="list-style-type: none"> <li>• Recognize the early signs of impending airway compromise</li> </ul>
<b>7:45 a.m. – 8:00 a.m.</b>	<b>Telemedical Support in Austere and Operational Environments</b> <ul style="list-style-type: none"> <li>• Define telemedicine and highlight available technology options and the need for planning</li> </ul>
<b>8:00 a.m. – 9:00 a.m.</b>	<b>Scenario 1: Diarrhea</b> <ul style="list-style-type: none"> <li>• Review infectious diarrhea in the austere and operational environment</li> <li>• Discuss precautions and isolation</li> <li>• Discuss preventive health and epidemics</li> <li>• Discuss alternate methods of fluid resuscitation</li> </ul> <b>Hands-On Patient Management</b> <ul style="list-style-type: none"> <li>• Identify key nursing skills for hands-on patient management in austere settings</li> </ul>
<b>9:00 a.m. – 9:15 a.m.</b>	<b>BREAK</b>
<b>9:15 a.m. – 11:30 a.m.</b>	<b>Scenario 2: Fever in the Tropics</b> <ul style="list-style-type: none"> <li>• Review recognition and assessment of shock</li> <li>• Review early management of different types of sepsis</li> </ul> <b>Life-Threatening Infections</b> <ul style="list-style-type: none"> <li>• Identify common infections associated with field conditions and endemic threats</li> <li>• Outline antimicrobial empiric therapy and management of specific infections</li> </ul> <b>Diagnosis and Management of Shock</b> <ul style="list-style-type: none"> <li>• Discuss management strategies for critically ill or injured patients in shock</li> </ul> <b>Airway Management With Noninvasive Positive Pressure Ventilation</b> <ul style="list-style-type: none"> <li>• Recognize signs of a threatened airway</li> <li>• Describe techniques for establishing a definitive airway and for manual ventilation</li> </ul>
<b>11:30 a.m. – 12:30 p.m.</b>	<b>LUNCH</b>
<b>12:30 p.m. – 1:15 p.m.</b>	<b>Mechanical Ventilation I</b> <ul style="list-style-type: none"> <li>• Describe indications for mechanical ventilation</li> </ul> <b>Analgesia and Sedation</b> <ul style="list-style-type: none"> <li>• Identify indications, risks, and monitoring for patients undergoing elective sedation</li> </ul> <b>Preparation for Evacuation or Transfer</b>

	<ul style="list-style-type: none"> <li>Recognize safety risks at transition times</li> <li>Identify best practices for preparing patients for transport</li> </ul>
1:15 p.m. – 3:15 p.m.	<p style="text-align: center;"><b>SKILL STATIONS</b></p> <p><b>A. Transport Ventilator Setup</b></p> <ul style="list-style-type: none"> <li>Demonstrate setup of a transport ventilator</li> <li>Discuss adequate medication supply, analgesia and sedation, access points, and stabilization of tubes and lines</li> </ul> <p><b>B. IV Infusion Set Without a Pump</b></p> <ul style="list-style-type: none"> <li>Demonstrate calculation and setup of an IV infusion without a pump</li> </ul> <p><b>C. Packaging the Patient</b></p> <ul style="list-style-type: none"> <li>Demonstrate key steps for packaging a critically ill patient on a stretcher for transport</li> </ul>
3:15 p.m. – 3:30 p.m.	<b>BREAK</b>
3:30 p.m. – 4:00 p.m.	<p><b>Pediatric Critical Care Overview</b></p> <ul style="list-style-type: none"> <li>Identify physiologic differences when approaching the pediatric airway, breathing, and circulation</li> <li>Compare differences in the incidence of conditions, consequences, and complications between critically ill or injured pediatric and adult patients</li> </ul>
4:00 p.m. – 4:15 p.m.	<p style="text-align: center;"><b>SKILL STATION</b></p> <p style="text-align: center;"><b>Scenario 3: Pediatric Burn Event</b></p> <ul style="list-style-type: none"> <li>Discuss initial assessment and management of burns and chemical injury</li> <li>Demonstrate total body surface area burn and fluid calculations</li> <li>Review pediatric medication dosing and fluid management</li> </ul> <p><b>Burn Calculation Tabletop Exercise</b></p> <ul style="list-style-type: none"> <li>Discuss interventions, including access, initial fluids, and airway</li> </ul>
4:15 p.m. – 5:15 p.m.	<p><b>Principles of Chemical, Biological, Radiologic, and Nuclear Injury</b></p> <ul style="list-style-type: none"> <li>Describe typical presenting toxidromes for chemical, biological, radiologic, and nuclear exposure</li> </ul> <p><b>Burn Injury</b></p> <ul style="list-style-type: none"> <li>Discuss treatment and airway, breathing, and circulation (ABCs) of life-threatening burn injury</li> </ul> <p><b>Ethics and Palliative Care</b></p> <ul style="list-style-type: none"> <li>Review ethical principles guiding decision-making under resource-limited constraints</li> <li>Explore ethical dilemmas involving triage and foreign national cultural norms and customs</li> </ul>
5:15 p.m. – 5:30 p.m.	<b>Review of Diarrheal Case Status and Ventilated Patient Status</b>

<b>DAY 2</b>	
7:30 a.m. – 7:45 a.m.	<b>Welcome and Scenario Introduction (Move into small groups)</b>
7:45 a.m. – 11:45 a.m.	<p style="text-align: center;"><b>Scenario 4: Mass Casualty Incident Introduction (10 min)</b></p> <ul style="list-style-type: none"> <li>Describe triage in austere environments</li> <li>Discuss initial trauma care in operational environments</li> <li>Describe resource utilization during a mass casualty incident</li> </ul> <p><b>Triage (25 min)</b></p> <ul style="list-style-type: none"> <li>Define triage categories and the sort, assess, lifesaving interventions, treatment/transport (SALT) algorithm</li> </ul> <p><b>Trauma and Blast Injury Care (30 min)</b></p> <ul style="list-style-type: none"> <li>Prioritize and initiate treatment of life-threatening traumatic injury</li> </ul>

	<p><b>Damage Control Resuscitation (30 min)</b></p> <ul style="list-style-type: none"> <li>List the key principles of damage control resuscitation</li> </ul> <p><b>Crush Injury (20 min)</b></p> <ul style="list-style-type: none"> <li>Describe the pathophysiology and treatment of crush injuries</li> </ul> <p><b>Neurologic Support (35 min)</b></p> <ul style="list-style-type: none"> <li>Review principles of brain insult and mechanisms of neuronal injury</li> </ul> <p><b>Severe Hypoxia (30 min)</b></p> <ul style="list-style-type: none"> <li>Review definition of acute respiratory distress syndrome and its treatment options in the austere and operational environment</li> </ul>
11:45 a.m. – 12:00 pm.	<b>Case Conclusion</b>
12:00 p.m. – 1:00 p.m.	<b>LUNCH</b>
1:00 p.m. – 1:30 p.m.	<p><b>Management of Pregnancy</b></p> <ul style="list-style-type: none"> <li>Describe the physiologic and metabolic alterations unique to pregnancy</li> <li>Discuss management strategies for the critically ill or injured pregnant patient</li> </ul>
1:30 p.m. – 2:00 p.m.	<p><b>Environmental Injuries</b></p> <ul style="list-style-type: none"> <li>Review risk factors, clinical features, and management of heat-related injury</li> <li>Discuss the diagnosis and management of cold weather injury</li> </ul>
2:00 p.m. – 2:30 p.m.	<p><b>Chest Pain</b></p> <ul style="list-style-type: none"> <li>Discuss the differential diagnosis of chest pain</li> <li>Identify characteristics of patients with acute coronary syndrome</li> </ul>
2:30 p.m. – 2:45 p.m.	<b>BREAK</b>
2:45 p.m. – 3:15 p.m.	<p><b>Management of Life-Threatening Metabolic Disturbances</b></p> <ul style="list-style-type: none"> <li>Review the emergent management of severe electrolyte disturbances in the austere and operational environment</li> <li>Discuss management of severe hyperglycemic syndromes</li> </ul>
3:15 p.m. – 3:45 p.m.	<p><b>Safety and Security</b></p> <ul style="list-style-type: none"> <li>Discuss personal safety and security of medical personnel</li> </ul>
3:45 p.m. – 4:00 p.m.	<b>WRAP-UP DAY 2</b>