2019 MINE RESCUE, FIRST AID, BENCH AND PRESHIFT RULES QUESTIONS AND ANSWERS

Section I

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MINE RESCUE Q&A

- Q: **Rule 7-** How is it possible to confirm a "visual exam" of a gauge? Is actually touching it needed?
- A: No.
- Q: **Rule 30-**If intersection is just timbered around corner with 3 timbers is the intersection explored now and can vent irrespirable and explosives through it.
- A: Yes.
- Q: **Rule 29-**It was stated that once the captain enters an intersection all objects are considered known. What if a problem designer puts diagonal caved in the intersection with something in it? How is the team expected to know what is in caved or what material will they be given to deal with it?
- A: Team can't see past the cave so nothing in caved or beyond caved is known. No material will deal with caved. Problem designers are not to design problems in which the teams cannot address placards in an intersection that require an immediate action.
- Q: Explain what a ventilation door is? Are you talking about a door in a stopping? Or a regulator?
- A: There is no symbol for a "ventilation door". Do not use in a problem.
- Q: If both sides of a barricade have been made, does an irrespirable atmosphere in front of the barricade have to be removed prior to breaching the barricade?
- A: No.
- Q: Can patient reload stretcher once the team gets him in Fresh Air Base (FAB)?
- A: No. He can take machine off and cut it off, but can't reload.
- Q: **48 D and E-** If water over knee deep is on the imaginary line and a team pumps the water can the team now hang a line curtain from that corner that the water over the knee deep was touching?

- A: Yes.
- Q: **R 32 and R 29-** If team has plenty of timbers and then the comes across a body in an unsafe intersection they should or should not prop to it?
- A: Rule 32 states "if roof support is provided, bodies located under unsafe roof must be examined before the clock is stopped *and after* all missing persons have been accounted for. The emphasis is that bodies will not be timbered to until after all missing persons have been found.
- Q: **Rule 6-** A placard that states "STOPPING" is it a temporary or permanent or an X? We have seen it accepted all ways. I would just like clarification. This does happen at contests.
- A: Problem designer should never just put stopping on placard. If placard does say stopping, map it with an X.
- Q: If all team members have same shirt and all have say black pants. Due to religious belief one doesn't wear shorts. Can the rest of team wear shorts except the one? All members shouldn't be held to one standard of one person.
- A: Yes, this is similar.
- Q: Can the team remove previously installed line curtain and use it in other places in the mine?
- A: Yes, it can be removed and taken from place to place.
- Q: If a problem designer states a section was mining to a bleeder shaft, and the maps are <u>not</u> up to date in area where they are mining to is unknown and in maps in that area are dotted. Do you have to show in maps given to the team and Briefing Officer (BO)?
- A: The shaft must be shown on the maps.
- Q: Placard that says not bolted or unsupported top. Can you travel through area?
- A: Designers should use symbols in legend if intended to stop travel.
- Q: For problem designers: Is the fresh air base considered to be safe for exploration and venting unsafe roof in the fresh air base if it is safe, why was it not timbered

- by the previous team? Is this poor problem design?
- A: Previous team may not have had timbers to support it. Everything in FAB must be shown on maps given to teams.
- Q: What rule is used if an irrespirable atmosphere is moved over the known location of a person? **Rule 30F** addresses if the location of a person is unknown. No other rule appears to address this.
- A: Rule 34
- Q: If a placard is found with the word "BODY" on it, orientation is not required. Does this apply to a placard that reads "Live Person"?
- A: Orientation is not required for live person standing up, but if lying down, position must be indicated.
- Q: Can materials from a partially destroyed or completely destroyed seal be used to build a temporary stopping?
- A: Yes if materials are on field.
- Q: Water over the knee or caved, if smoke is present, does map man draw smoke into the unexplored area? Rule is not clear on how this is interpreted.
 Don't show smoke in unexplored area (caved or water over knee deep).
 If a team tears down a barricade but rebuilds it, if everything the team builds is a temp stopping is mapping the barricade as "UP" sufficient?
- A: Yes, as long as the barricade has not been moved.
- Q: **Rule 6 and 7** Comparing of maps- Can Briefing Officer (BO) and Command Center Attendant (CCA) both get together to work on ventilation on one map and leave other one away from them so they can work together on ventilation or would this be considered as comparing map?
- A: No cannot compare maps. This would be considered comparing maps.
- Q: If a team has a sufficient amount of timbers to timber into a person in an intersection with a wrap-around unsafe roof containing a person in the intersection would the captain finish the roof test before timbering into the person?

- A: R&R in intersection only, timber, then finish R&R outside of intersection.
- Q: What about placards that say unsupported top or top not bolted? Use legend.
- A: Should not have to take a team through that condition. Problem designers should use symbols and wording in rules.
- Q: If the team moves air from a single source over a gas placard would the team need to go to that placard to show it as cleared either on the team map or BO map?
- A: No.
- Q: If in a heading you have a partial face with a face placard and a cut into old works with placard would these conditions require 2 gas tests?
- A: Yes, 2 gas tests would be required.
- Q: Diagonal placard in an intersection with gas in the intersection once we vent is gas cleared or half cleared? We put cleared (meaning intersection completely cleared) and have never been docked for it. What is the rules committee understanding on this?
- A: Ex. Write clear and draw a line to the side cleared.
- Q: **Rule 24-** Required gas (cut into old works, etc.) Can you give more examples of what could be included in the etc.?
- A: Cut into old mine. Cut into abandoned mine.
- Q: When a team finds a person in elongated unsafe roof and has props with them, must the captain stop and prop to the person to D&I him before passing or can the captain finish the team stop first?
- A: The team must stop and prop to the person before passing him.
- Q: Is it a discount if the captain props to a body before all missing persons are accounted for?
- A: Yes.

- Q: If all missing persons are not accounted for at the end of a problem, is the team still required to prop to bodies?
- A: No.
- Q: What will the process be for checking in team radios at the National Contest? Will the correct frequencies be programmed into the radios when they are checked in at the National Contest or will teams be required to have the correct frequencies programmed into the radios prior to the National Contest?
- A: Sunday or Monday before mine rescue days; you can turn them in and have programmed. Not day of contest. Bring them Sunday if possible if not turn in on Monday.
- Q: When an RA is encountered at a team stop can the team complete the team stop prior to going into the RA and if a condition is encountered that requires the team to return to the FAB i.e. apparatus failure, to taking a patient out, may the team return to that stop and enter the RA at that time.
- A: Yes, must before going to next team stop.
- Q: Can an overcast that is air tight be vented with a line curtain?
- A: No.
- Q: If you recover a Live Conscious Patient can his condition change before he reaches the FAB, ie can he become unconscious?
- A: Yes, nothing in the rules to prevent it.
- Q: Regarding "cut into old works" if there is no condition stopping travel such as, caved, unsafe roof, water over knee deep, etc. the team should FPA as it is accessible and not explored.
- A: True.
- Q: If I set 12 timbers through an unsafe intersection can the team go anyway they want? Can they go diagonal corner to corner?
- A: Yes, the team can go anyway it wants. The team cannot build a stopping or hang a line curtain on corners that have unsafe roof, unsafe rib, caved areas, or water over knee deep touching the corner.

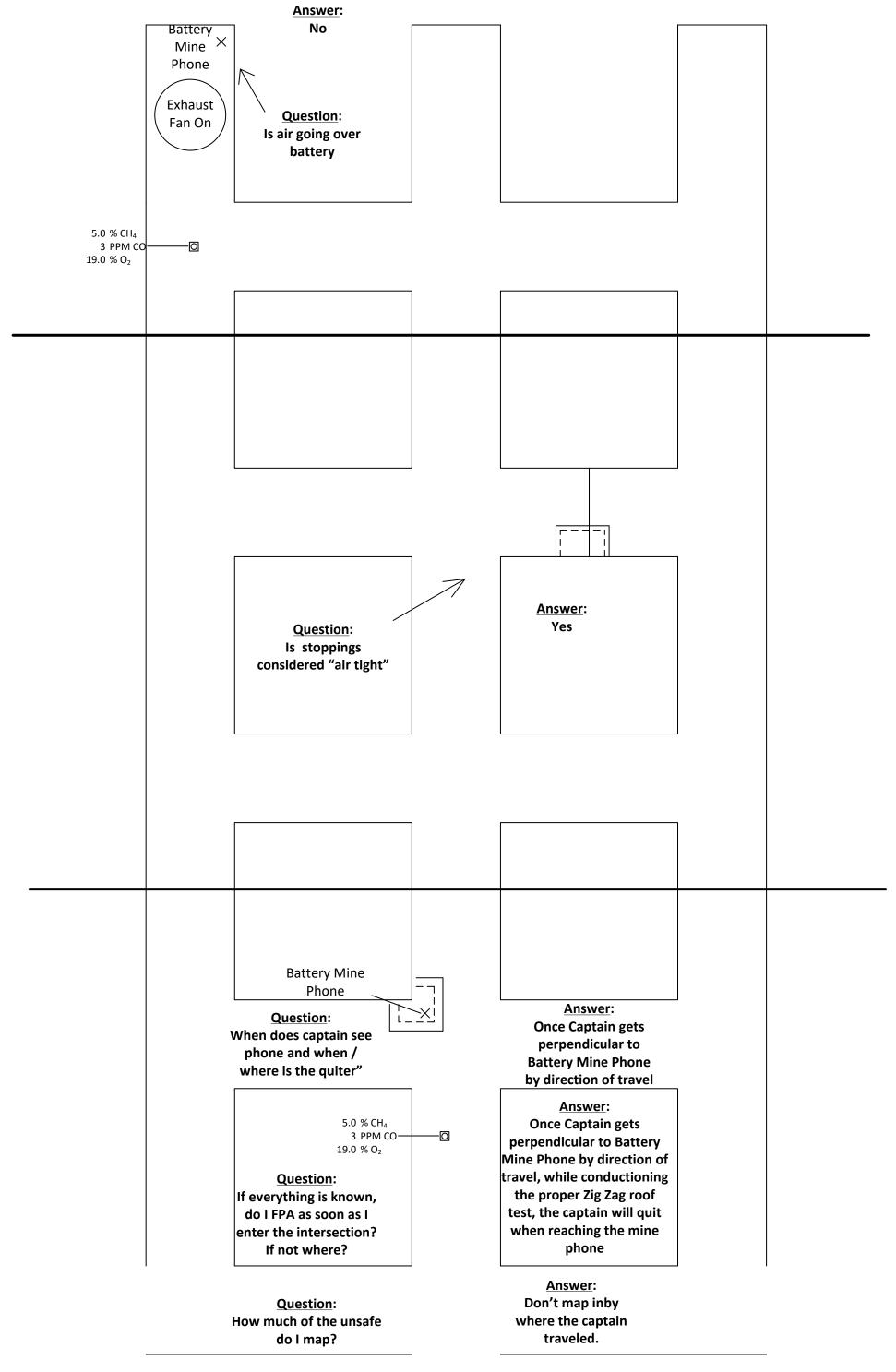
- Q: Rule 24A- Does (if intact and airtight) mean all conditions or areas?
- A: Means ventilation structures only.
- Q: Does a permanent stopping not intact need a gas test?
- A: No.
- Q: Evaluation point walls, is this an X on the team map or is it considered a specific stopping by the legend? I have worked problems and was told it is a permanent stopping or should be noted as that. What is the rules committee's interpretation of this?
- A: Problem designer should use legend.
- Q: If a retreat situation is identified in an intersection would an FPA be required at the object that defines the retreat and at the other openings?
- A: Yes.
- Q: Can a BO show everything up and CCA show everything down?
- A: Yes.
- Q: If a team sets timbers through an unsafe intersection by using 3 timbers to go around a corner, does that comply with Rule 29? Is the team leaving the intersection prior to work being completed in the intersection?
- A: If there is nothing in the intersection that requires an immediate action, teams can comply with Rule 29 by setting 3 timbers to go around a corner.
- Q: Rule 24B Will a gas test at an open borehole in an entry or crosscut count for the gas test for an opening?
- A: Yes, as long as it is within 25 feet of the opening.
- Q: If a team timbers through an intersection that has unsafe roof on all four imaginary lines, can it then hang a line curtain or build a ventilation structure on one of the corners?
- A: No. If a rib corner has unsafe roof, unsafe rib, caved, or water over knee deep

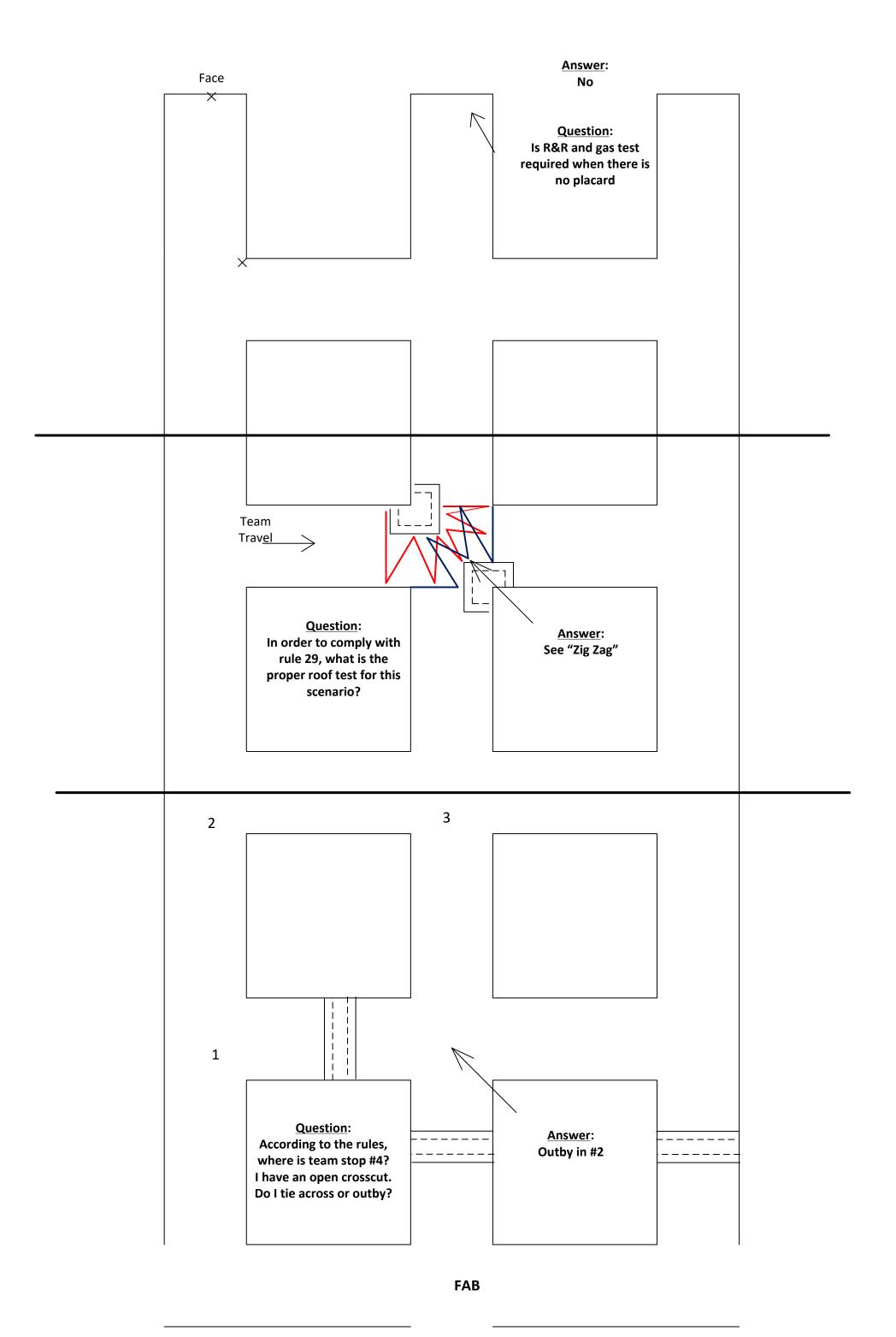
- touching it, it cannot be used to hang a line curtain or build a ventilation structure.
- Q: If a team comes into an intersection and finds an area of water over knee deep, and there is a person in the intersection on the other side of the water over knee deep, does the team have to pump the water before leaving the crosscut into an unexplored opening?
- A: This design should not be used in problems this year.
- Q: Under Rule 29, would a team be required to do a roof test on all four sides of an unsafe intersection (unsafe roof on all four imaginary rib lines) before timbering into the intersection?
- A: No. Rule 30 applies. The required roof tests for the unsafe roof would not be in the intersection, so an immediate action in the intersection is not required.
- Q: Can a line curtain or diagonal ventilation control be hung or built on a rib corner that has a barricade or stopping on the imaginary rib line?
- A: Yes. The only conditions on rib corners that would not allow for the rib corner to be so used would be unsafe roof, unsafe rib, caved areas, or water over knee deep touching the rib corner.
- Q: If a team sets three timbers to go around a corner of an unsafe intersection that has unsafe roof on all 4 imaginary rib lines, is the entire intersection considered explored and safe to ventilate through?
- A: Yes.
- Q: A problem has two elevator shafts. The team goes into the mine through one shaft to start the problem and then uses the other shaft for transport later in the problem. Does the team have to do a 50 foot apparatus check at the bottom of both shafts?
- A: No, only the shaft that the team first entered the mine by.
- Q: Can a patient carry or use his/her own SCSR?
- A: Yes, if it complies with the rules.

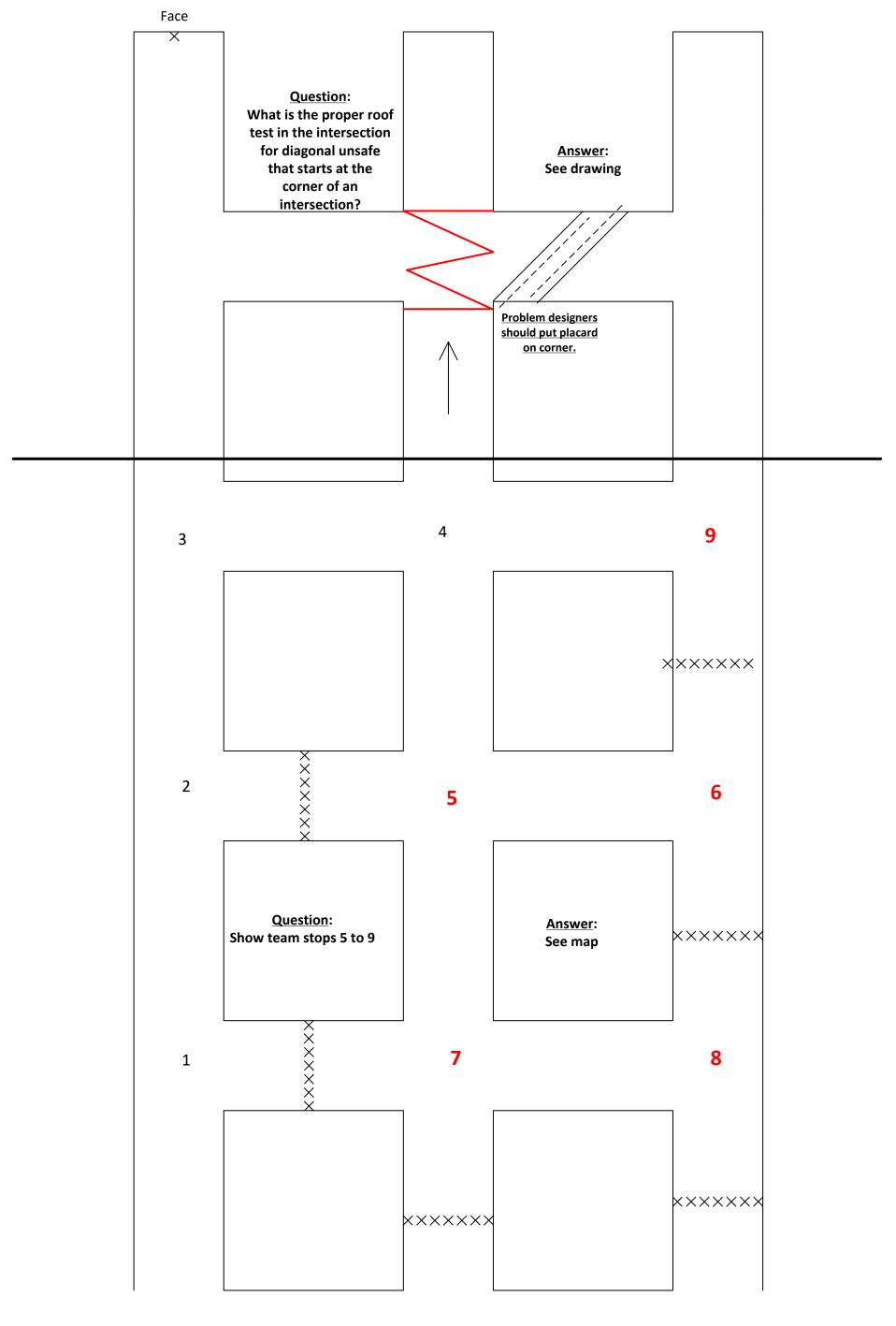
- Q: What size font must be used for letters on placards?
- A: Mine rescue rules don't address the size of font. Problem designers should make the letters large enough to easily read.
- Q: If a placard on the field states "Hand Held Battery Radio" versus a placard that states "Battery for Hand-Held Radio", are they both considered ignition sources?
- A: The Hand Held Battery Radio, if MSHA approved is not an ignition source. A battery for a hand held radio is an ignition source, if not in the radio as approved.
- Q: Can a placard for a "Battery for Hand-Held Radio" be moved, such as an "Operable Battery Scoop"?
- A: Yes, much like a battery mine phone can be moved.
- Q: If there is an area of unsafe roof on a corner of an intersection (a wrap-around), can the team post correctly to the corner and use that corner to extend a line curtain or build a diagonal stopping?
- A: Yes, as long as there is not any unsafe roof, unsafe rib, caved area, or water over knee deep touching the rib corner itself.
- Q: How do you "examine" a gas detector in the fresh air base? If you refer to the procedures described in the rules for gas detecting equipment there is no mention of an exam, but there are "checks".
- A: "Examine" and "check" means the same thing in this instance. Examine or check the gas detector according to the procedures listed in the rules for the type of detector used.
- Q: For a live person or body that is prone to the ground what is the center point of that symbol for mapping purposes?
- A: The center point of the placard will be the center point for mapping purposes. The center point for the symbol on the map will be used to determine the 6-foot accuracy.
- Q: If a team enters an intersection and there is a diagonal barricade across the intersection, under Rule 29, do they have to address the barricade before breaking the inby imaginary lines? What if the person behind the barricade is

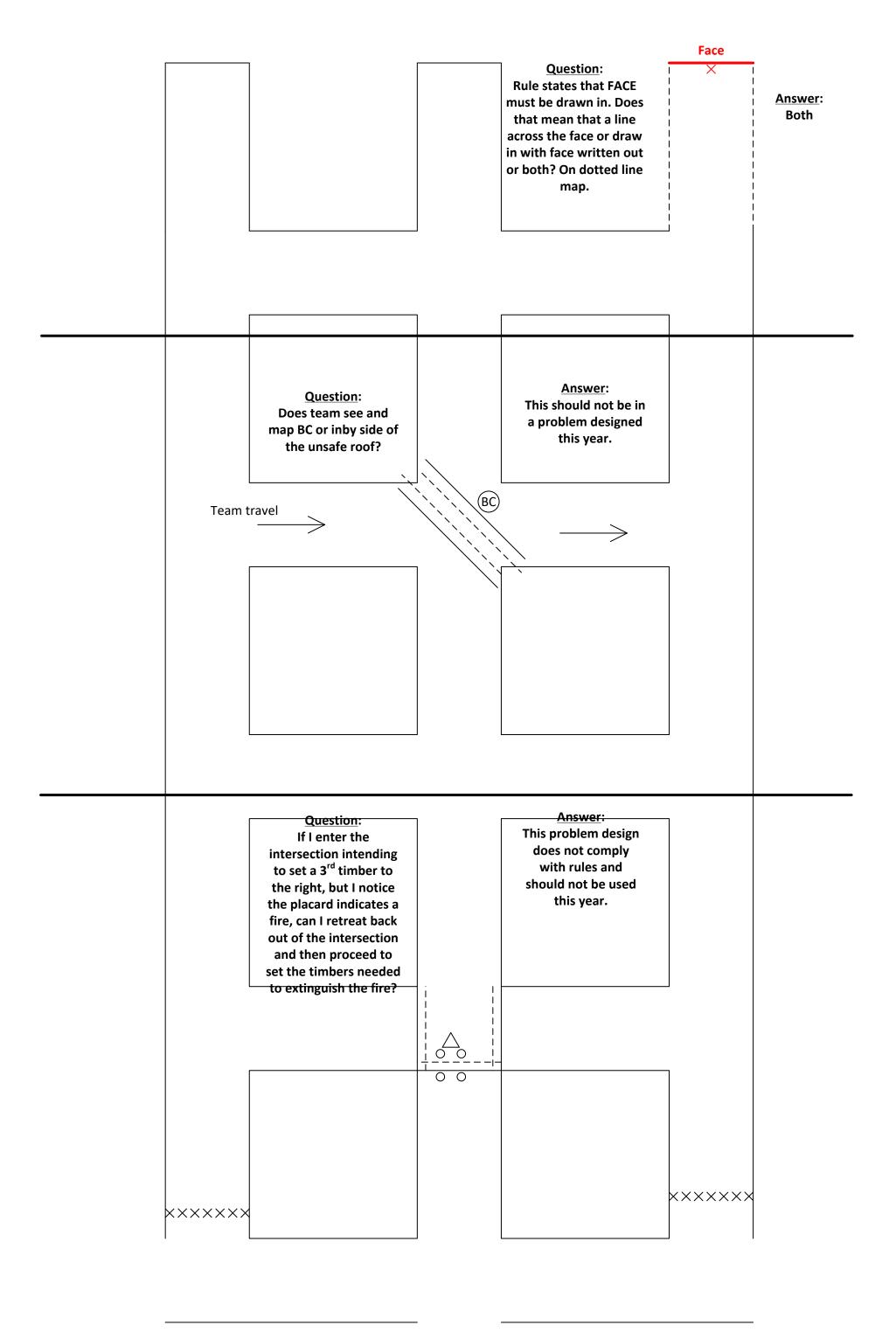
yelling as they enter the intersection?

A: The barricade does not require an immediate action. Rule 41 will apply. However, problem designers should not place the patient in the same intersection behind a barricade, as the teams cannot "see" the patient behind the barricade to know his/her exact location.



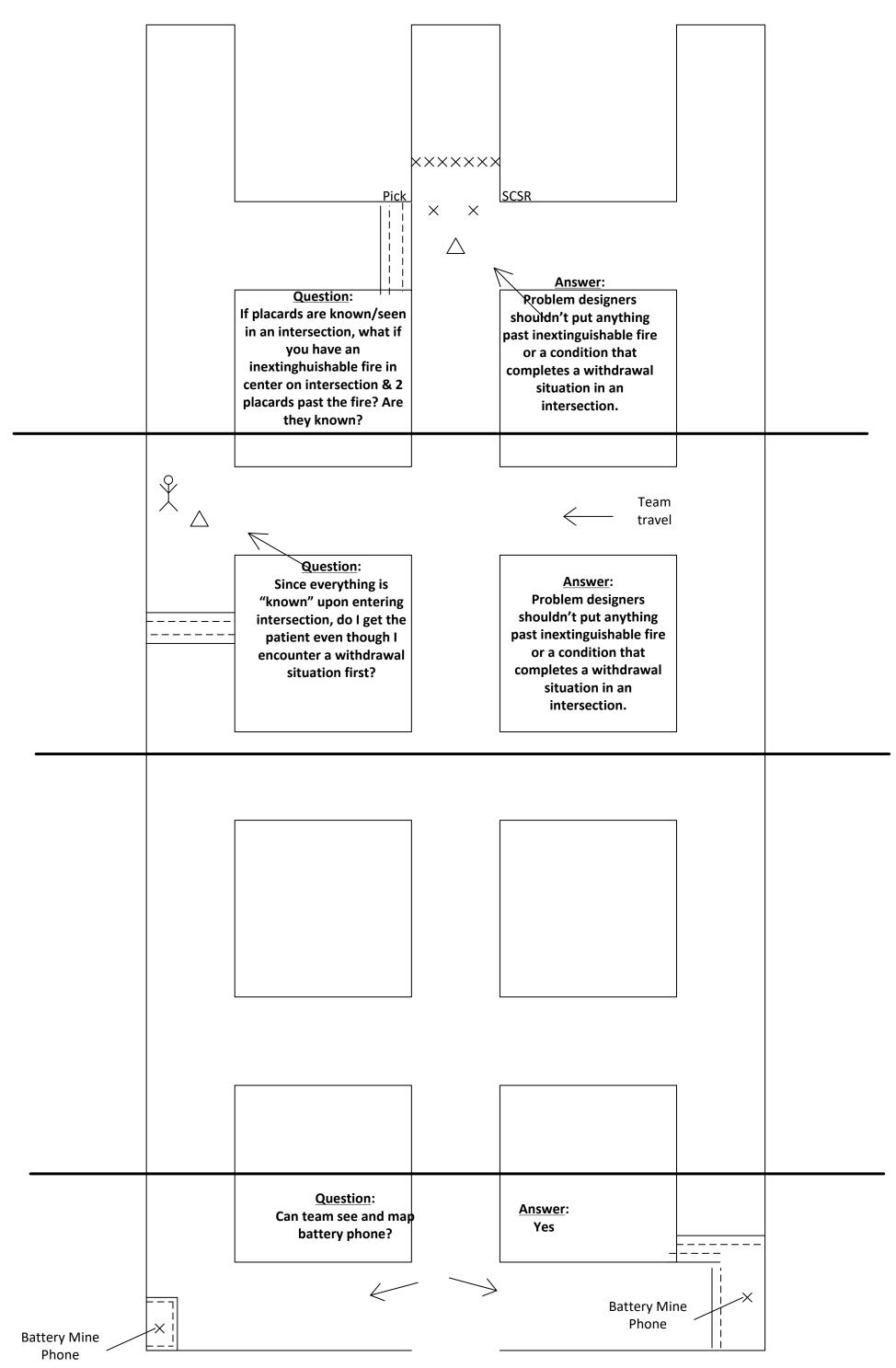


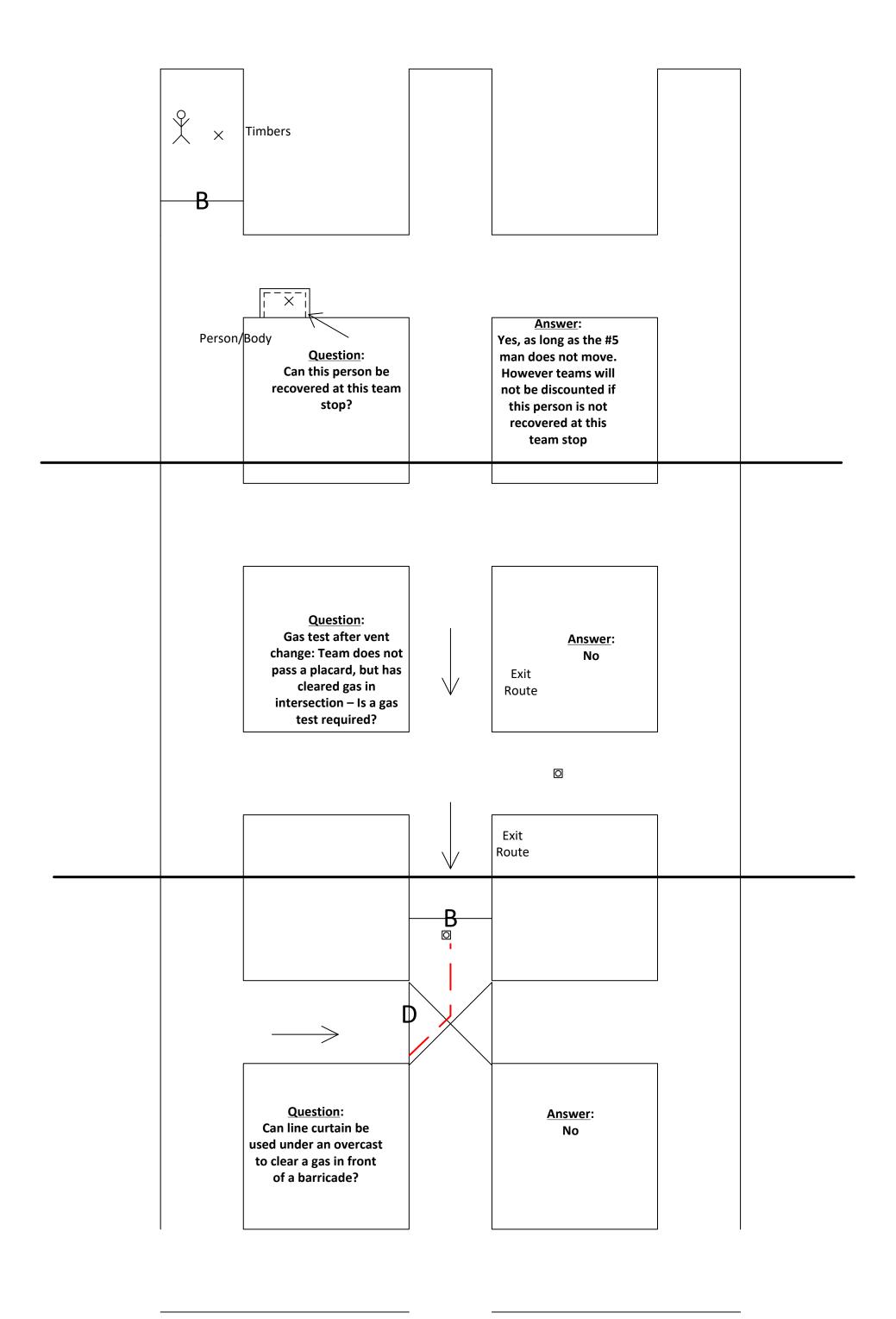


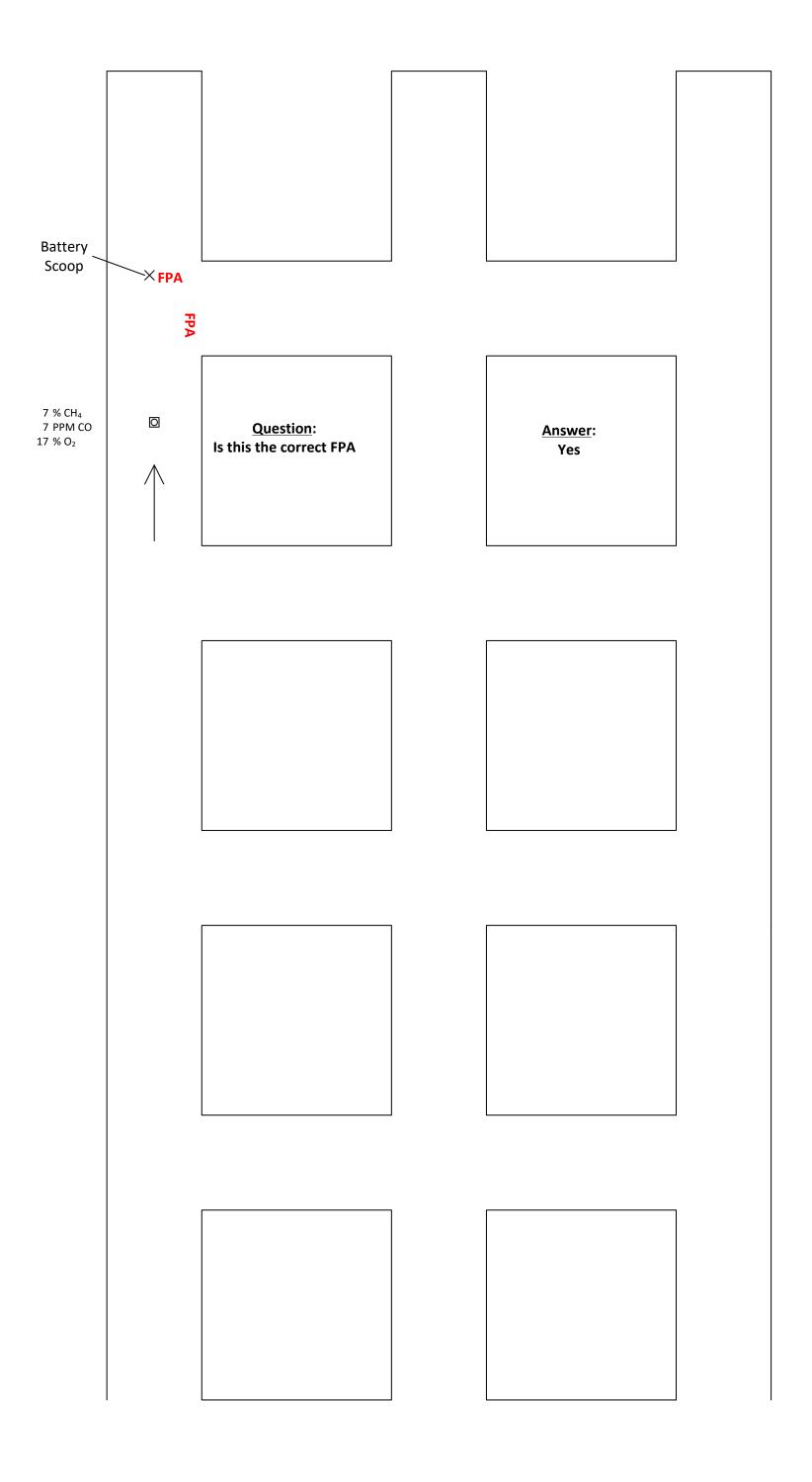


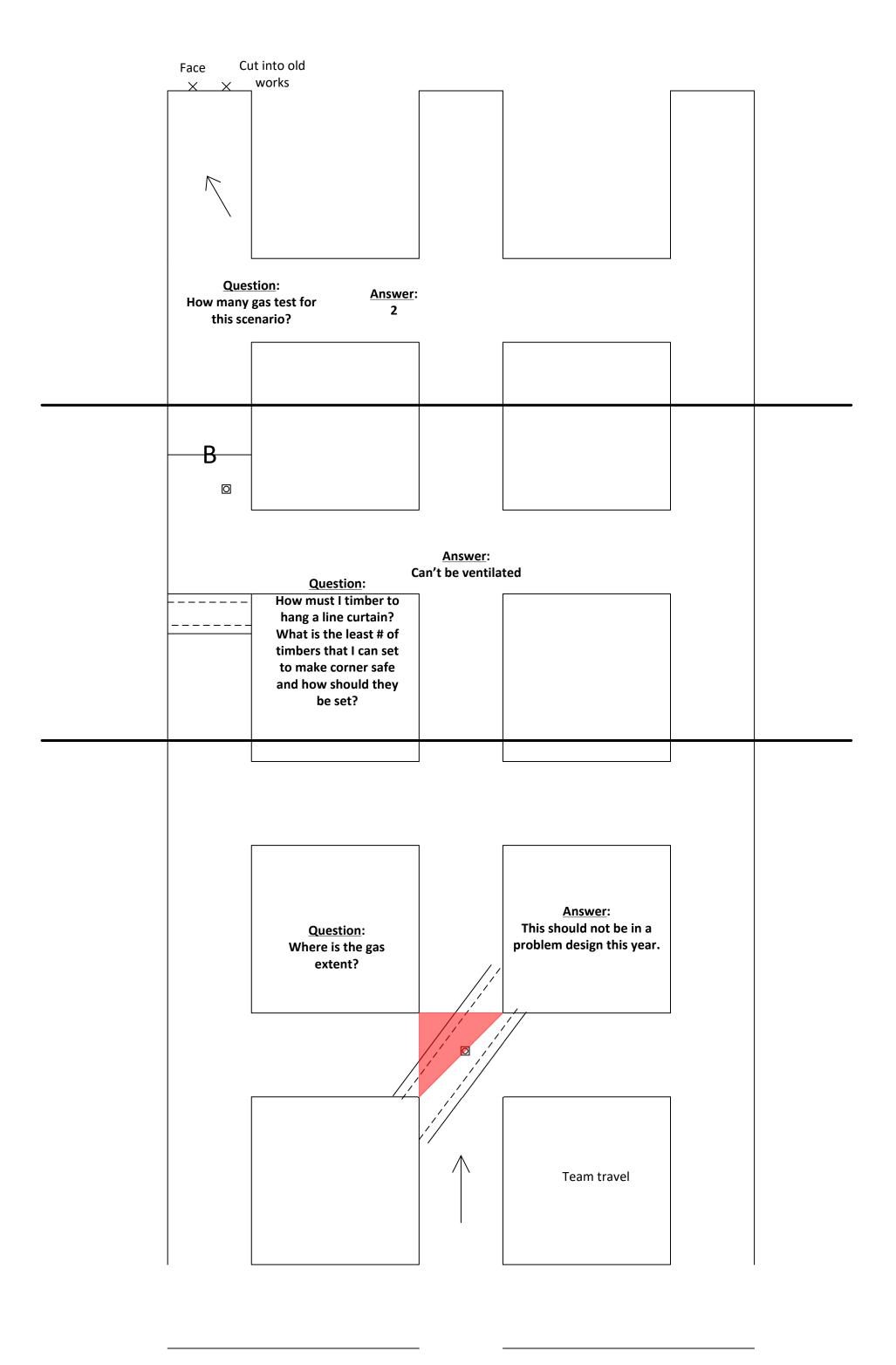
1	Question: Under rule 48, teams will not be able to hang curtain or build a diagonal stopping? Figure 1 team can't even if timbered? Figure 2 team can if pumped.	2	Answer: If pumped team can use curtain in #2, however in #1 & #3 NEVER	3
	Question: How must a team recover patient and comply with rule 29? How would remaining timbers be set? Must leave intersection to do so.	Team travel	Answer: Keep timbers in intersection and touch patient. Problems must be designed such that teams can address placards while staying in the intersection.	
	Question: The intersection would require a Zig Zag roof and rib before the small triangle area has a roof test. Is this a triangular area a zig zag R&R tes?		Answer: This should not be in a problem design this year.	

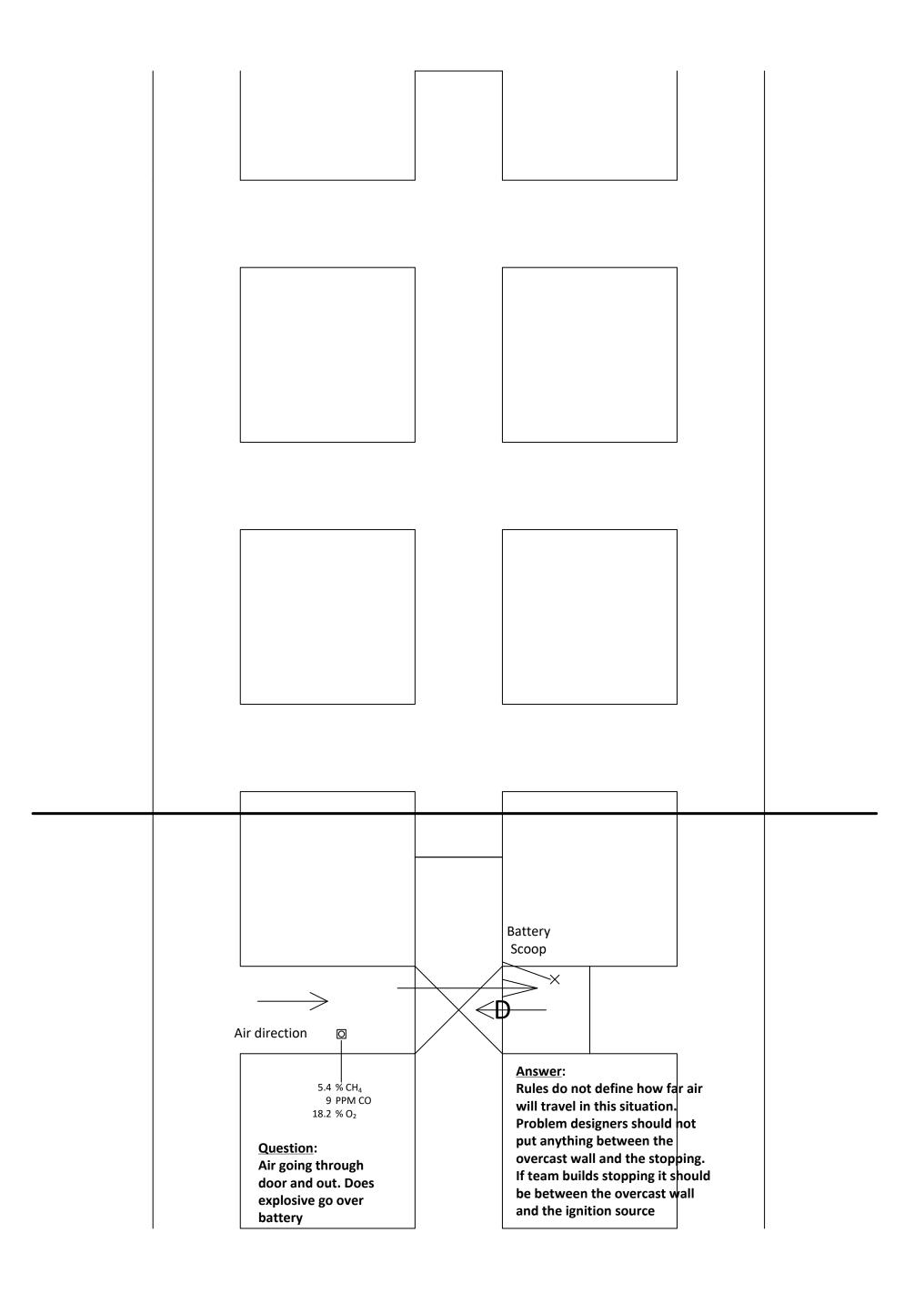
Team tra	vel Question:	BC	Question:	
	Does team map BC (unsafe not on corner) Answer: Yes		Is intersection considered explored? <u>Answer:</u> Yes	

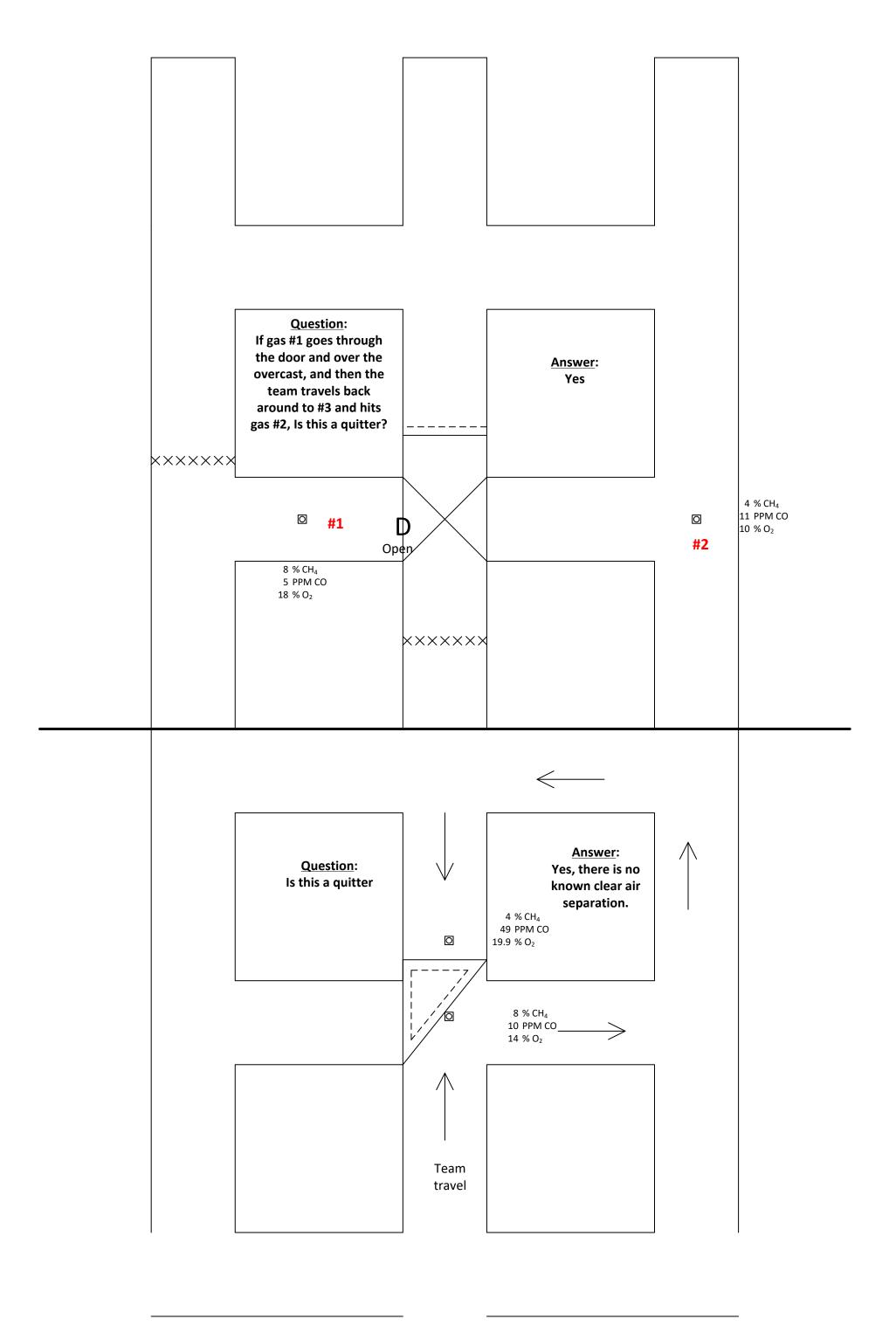












FIRST AID Q&A

- Q: The written tests needs to be taken from the questions at the end of each chapter in the Brady book. This is a much better way of testing first responder knowledge and skills. This will also get responders to read the book.
- A: The questions and answers were taken from the questions at the end of each chapter. Some questions were eliminated due to the fact they did not apply to coal mining or the practice associated with mining.
- Q: Time docks need to be eliminated. Average time is influenced by teams working problems incorrectly or skipping skills or verbiage making their working time a lot faster, which in turn gives other teams docks for doing the problem correctly.
- A: You are correct this on very few occasions will affect the scoring of the teams that conduct the first-aid problem as it was intended. This is as with all of the other disciplines, it is unfortunately a part of the game. This may be something we look at in the future as a major rule change.
- Q: New rule on immediate patient: if transportation is delayed prior to or during the rapid assessment a complete detailed patient assessment only will be required: if we are in the middle of rapid patient assessment can we finish? Then go back to the head treating all of the non-life threatening injuries? Or do we need to stop rapid assessment go back to the head and start over?
- A: No need to stop rapid assessment, a team can continue to perform the rapid assessment, then once completed they can go back to the head for the detailed assessment.
- Q: If instructions are given that transportation is delayed prior to or during a rapid assessment a complete detailed patient assessment only will be required. What is the purpose of this statement?
- A: The purpose of this statement was an attempt to clarify what exactly was to be performed as it pertains to patient assessment, if given that the transportation is delayed.
- Q: Where does the patient assessment start if rapid assessment is half completed when the envelope is given?

- A: The team can complete the Rapid Assessment then begin the Detailed Patient assessment or they can stop where they are in the Rapid Assessment and begin the Detailed Assessment.
- Q: What is required to be done during the patient assessment in these cases, full treatment?
- A: If transportation is delayed a Detailed Assessment will be conducted including the treatment of all wounds that require a treatment.
- Q: Will you be docked if you do both Rapid and Detailed Assessment if transport is delayed during Rapid Assessment?
- A: No you will not.
- Q: When is three person log roll required, opposed to a two-person log roll?
- A: Three person log roll is NOT required but if you have a bystander it may be the best treatment for the patient to utilize the three-person log roll. Of course if you only have two people (no bystander) you would be required to use the two person log roll.
- Q: What is the difference between Patient Assessment and a Detailed Patient Assessment?
- A: No difference these are the same.
- Q: If your CPR mannequin times out and goes off before you start doing CPR, but you have already started the problem, can you check and make sure it's on right before you start CPR?
- A: Yes
- Q: If there is only one Patient is Triage necessary? Would the problem designer be required to even put the Respirations, Pulse, and Mental Status on the patient?
- A: No need for Triage but signs and symptoms are still required on the patient or in an envelope handed to the team by the problem designer.
- Q: The whole opened or unopened for the dressings are confusing to me if my team opens bandages and dressings will we be docked?

- A: No.
- Q: The Immediate Rule reads "To perform a rapid assessment, teams will examine each area of the body in its entirety, verbalizing critical skills and injuries/conditions found. No treatment is required for non-life threatening conditions/injuries found during the rapid assessment. If transportation is delayed (detailed patient assessment required to be conducted) does the verbalizing of the critical skills and injuries/conditions found have to be repeated or do teams have to treat the conditions/injuries as per the skill sheets?
- A: If it is determined that a patient is to be an Immediate Patient (signs/symptoms), and a Team begins a Rapid Assessment of the patient, then a team is given an envelope or is told by the Judges that transportation is delayed, the team could continue the Rapid Assessment, then the detailed assessment (treating all non-life threatening injuries until notified that transportation is available). The team could stop the Rapid Assessment once notified that transportation is delayed and begin the Detailed Assessment. If a complete Rapid Assessment was conducted, then notified of transportation delayed, the team would only be required to verbalize the items for each skill sheet addressing the treatment the team is performing for each injury treated.
- Q: The statement of fact number 31) reads-"It is appropriate to use a nasopharyngeal airway on unresponsive patient who has suffered head and facial trauma. (Ch. 9 pages 162 & 164) It has never been appropriate to use a naso airway on a patient who has suffered head or facial trauma. The wording of this statement should be changed to "inappropriate".
- A: If you read the pages associated with this question it is appropriate to use a nasopharyngeal airway on a patient who has suffered head and facial trauma but it is not for an "unresponsive patient" the question should read "who is not totally unresponsive or has a gag reflex". (Ch. 9 pages 162 & 164) PROBLEM DESIGNERS SHOULD NOT USE THIS QUESTION, IF USED AS WRITTEN AND THE TEAM PROTESTS IT SHOULD BE GRANTED.
- Q: A delayed patient the team is conducting a full assessment and treating all injuries. The team is given an envelope that states my patient is no longer breathing and does not have a pulse. Is the patient now an immediate patient that would require me to identify them as such and then after CPR/AED my patient is now breathing and has a pulse would he then be considered a delayed patient and I would resume full assessment and treatment of all injuries or a rapid assessment and transport?

- A: Once an immediate patient always an Immediate Patient, the team would resume at the point they were given the envelope a rapid assessment only treating life threats, UNLESS transportation is delayed.
- Q: Is it appropriate for a bystander to be found in a condition which is defined as "immediate" such as requiring CPR and then after treatment is given to upgrade the patient to a condition that you can use them as a bystander?
- A: This should never happen it is a problem design issue. Bystanders are for holding support and assisting teams in treatment once trained/instructed.
- Q: Would a factory pelvic splint be acceptable for the first-aid competition?
- A: Yes, as per rule it would be acceptable.
- Q: Statement of Fact number 32. One function of the regulator on an oxygen tank is to reduce tank pressure. (Ch. 10 page 176) Isn't the function of the regulator to reduce the "line" pressure instead of the "tank"?
- A: One function of the regulator on an oxygen tank is to reduce "line" pressure BUT another function is to reduce the "tank" pressure, so this question is correct.
- Q: If a statement says a patient is unconscious and cannot be "woken" up. Should he be treated as an immediate since you cannot follow commands if you are unconscious?
- A: Yes.
- Q: Do all patients get treated for shock?
- A: Yes.
- Q: If all patients are treated for shock how do we do that with one backboard?
- A: Normally a PROBLEM DESIGN ISSUE but you don't need to have a backboard to treat for shock.
- Q: Item 10 on CPR skill sheet states rescuer delivers chest compressions after shock delivered (2 cycles) then rescuer delivers breaths. Does this mean that they will do 2 cycles of compressions and breaths and then be given an envelope outlining

- additional CPR or return of pulse and breathing?
- A: Instructions will be given, when the area of the AED has been completed as to shock, no shock recommended then continue CPR or if not directed until as per 2019 First-Aid Rules a maximum of 3-sets.
- Q: On the open neck wound and the open abdominal wounds skill sheet on page 36, it reads "serious or life threatening bleeding". Should this be listed under life threats?
- A: It is if this injury is indicated then it should read "life threatening bleeding".
- Q: Do all life threats have to be on a backboard? Such as an amputated arm with life threatening bleed. The patient in this case could sit up and ride in a seat once the life threat is controlled.
- A: The treatment of life threats would include the patient to be treated for shock the recommended treatment and as per Shock Treatment Skill Sheet the patient would be kept in a "supine position". The **supine position means** lying horizontally with the face and torso facing up. Just the treatment of shock would not require a backboard but at the point of transportation a patient with life threats would be required to be on a backboard.
- Q: Rule number 15 states: "After stopping the timing device, team members will remain with the patient(s) until released by the judges. Any physical treatment(s) not performed, i.e. bandage, splint not correctly placed or utilized will be pointed out to team at this time". If a judge does not point out "physical treatment" to the team and the team is docked for not performing that "physical treatment" is this justification that the dock will be removed if protested by the team?
- A: No.
- Q: What is Rapid Assessment?
- A: As per rule 12-"Rapid Assessment consists of Initial Assessment and Patient Assessment, during Rapid Assessment only life threatening condition(s) listed as Life threatening conditions will be considered a patient having any one or more of the following conditions: breathing difficulties, no pulse, spinal injury, skull fracture, a sucking chest wound or life threatening bleeding) are treated (if transportation is available). See skill sheets Initial Assessment (page 18 of 1st Aid Rules) and Patient Assessment (page 19 of 1st Aid Rules).

- Q: Can you have a delayed patient with a life threat?
- A: Yes, Triage is determined by the table from Chart 27.5-Start Triage System. The immediate, delayed, minor, or deceased patients are determined from the signs/symptoms listed in this chart and on the patient. Life threatening conditions does not determine if immediate, delayed, minor or deceased but signs/symptoms will.
- Q: Will or can my team's equipment be checked for compliance with the Materials List in the 1st Aid Rules?
- A: Yes, equipment can be checked and the minimum equipment required if lacking this condition would be docked under Rule Number 1.
- Q: On severe hyperthermia it states procedures box 4 critical skill *F "transport immediately". If skill sheets superseded first aid rules and first aid rules supersede Brady Text, then aren't we supposed to stop all treatment except life threats and transport immediately?
- A: Once given the condition of hyperthermia or found during the Patient Assessment UNLESS transportation is delayed YES you would transport immediately once life threats are treated.
- Q: Can my team be docked for something that a "bystander" does or does not do while assisting my team to treat a patient, if not a member of my team?
- A: If instructed properly (shown techniques) the team will not be docked for something a "bystander" does incorrectly.

PRESHIFT Q&A

- Q: In the past we have verbalized the roof and rib test for each entry. Will that still be acceptable, or will the contestant have to simulate a physical sound and vibration test with the sounding device he is required to carry?
- A: Contestant must only verbally state his/her visual examination of the mine roof at least one time in each entry. Rule 18 Interpretation of field scorecard. Failure to examine all accessible areas that can be safely traveled.
- Q: Concerning belts entries, is it necessary for contestants to travel both sides of the conveyor or is a visual examination from one side sufficient?
- A: Traveling one side should be sufficient unless a hazard/condition requires contestant's presence or the plans/statement requires both sides of conveyor to be traveled.
- Q: Rule 12 Page 2. "Placards, objects, mine plans and/or maps will be used to indicate equipment, conditions or potential hazards" We are seeing preshift problems with plans that include, for example, a 150 ft. limit for cutting and welding equipment from the face. A torch set and cylinders may be placed a break and half from the face on the field problem yet there are no pillar sizes or entry widths in the plan or a placard noting the distance to the face. Without this information, contestants cannot be expected to see a violation of the plan and should not be discounted for failure to find and/or correct the hazard.
- A: This would be a problem design issue. Problem designers should provide sufficient information in the plans, statement or field layout to address all conditions or potential hazards to be addressed by the contestant.

Mine Rescue Skills Q&A

- Q: Will the Mine Rescue Field Problem be a Part 49 complaint problem?
- A: Yes, if it meets all of the requirements of Part 49 with the listed exceptions.
- Q: Will there be First Aid in the Mine Rescue Field Problem?
- A: That is up to the Problem Designer and if there is it must be only 1 life threatening injury.
- Q: Will the Mine Rescue Field time be included in total time of a Skills Contest?
- A: As far as discounts added to the team score, No.
- Q: In the First Aid segment will there be any maps graded?
- A: No.
- Q: What is the discount for not exploring in the 2-2-1 method for Skills Problems?
- A: Rule 10 in the Mine Rescue Skills Rules, Failure to follow exploration procedures will result in a 2 point discount with a maximum of 10 points.
- Q: Can the Briefing Officer assist with First Aid Treatments at the Fresh Air Base (FAB)?
- A: No.
- Q: If a Fracture is serious, it must be treated inby the FAB, why not also be in Red like Life threats?
- A: Fractures that must be treated inby the FAB are identified with the word "Serious".
- Q: Mine Rescue Skills First Aid Skills Sheets, Can they be changed to match the Skill Sheets for traditional First Aid? Could confuse teams that do both.

A: The asterisks on the Initial Assessment located beside of: If while assessing breathing you identify a Sucking Chest Wound if there only to bring attention to the sentence: Team does not have to verbalize