“An Active Response to Active Shooters”

Seeking ways to improve preparedness and response to mass shootings and natural disasters.
The FAST goal is to train and psychologically prepare students, teachers, and employees to handle public disasters, public shootings, wilderness survival emergencies, and any other unexpected scenarios.

FAST Founder

John Young
- Army Medic
- OEF Rotations to HOA and Afghanistan, JCETs
- 7 years on a Mountain Rescue Team
- PTA Major @ ACC
- Director of the FAST Club
Why Am I Qualified?

- Emergency Medical Training (EMT)
- Paramedic, Basic Life Support (BLS)
- Automatic External Defibrillation (AED)
- Pre-hospital trauma life support (PHTLS)
- Advanced Cardiac Life Support (ACLS)
- Pediatric Advanced Life Support (PALS) training and certification
- Basic and advanced airway management
- Obstetrical (OB) and gynecological (GYN) emergencies, disorders, and examinations
- Medical subjects and case studies including dive, high altitude, heat and cold, and travel medicines
- Trauma surgical skills
- Blast injuries, and high and low velocity wounds
- Endocrine, metabolic, nutritional, psychiatric, cardiovascular, hematological, immune, orthopedic, and allergy principles and disorders
- Clinical preceptorship including theoretical training, experience and evaluation on the ability to apply assessment/management/care skills in various clinical settings including rotations through surgery, emergency rotations, pediatrics, dermatology, pediatrics, orthopedics, radiology, preventive medicine/community health, and the outpatient/family clinics
- Regional, pre-, and post-anesthesia care
- Pain control, pharmacology, fluids, electrolytes and replacement products, infectious diseases, and medical disorders involving body systems
- Medical mission planning, tactical combat casualty care, and trauma surgical laboratory skills
- Basic physical exam techniques
- Surgical, operating room, and glove and gown procedures
- Casting techniques, physical diagnosis, and initial and long term care
- Pharmacology and pharmaceutical calculations
- General anatomy, physiology, pharmacology, medical terminology, radiology, veterinary, dental, preventive medicine, and nursing care topics
- Military Instructor Qualification

Curriculum

Our training curriculum, developed by former Special Forces Medical Operators, Trauma Surgeons, and Public Safety professionals who, through experience have tested and adapted a wide variety of techniques to pro-actively react to emergency situations.
**Curriculum For FAST Level 1 Training**

Exposure, Orientation, and Practical Application of Basic Interventions to respond to public disaster scenarios

**Public violence response**
- Active Shooter Demonstration
- Public violence response/tactics
  - Basic ballistics/Building dynamics
  - Group response tactics and leader
  - EMS/Law enforcement response
  - Information transmission to civil services (5 w’s)

**Regional Anatomy and Medical Training**
- Anatomy
- Circulatory system
- Respiratory system
- Gross Vitals

**Practical Application Exercises**
- Tourniquet
- Chest Injury/Abdominal injury
- Vitals/Patient Assessment
- Pressure dressings/Fractures

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**EMS Response Times In Public Disasters Are Hampered By:**

- Continued threats
- Inability to access disaster location
- Overwhelming number of casualties
Why Not Let The Trained Professionals Handle It?

An Epidemic?

- 52 School Incidents From 1976-2008
- 182 Total Fatalities
- 284 Wounded
- Shooters Range in Age From 6 to 53 Years Old
- Most Shooters Are Less Than 22 Years Old
- Only 10 Incidents Where Less Than 10 Injured
Fort Hood and Virginia Tech: A Brief Comparison

Fort Hood: 43 Soldiers Shot 13 Killed 30 Survived
30% of the Soldiers Shot Died

Virginia Tech: 49 Students Shot 32 Killed 17 Survived
65% of the Students Shot Died

What Accounts for the Difference?

Possible Variables
All Fort Hood soldiers received basic life saving training designed specifically for dealing with trauma so Fort Hood victims all received basic first responder treatment

Fort Hood Shooting

• Confronted Nidal Hasan
• Shot in upper leg, knee and hand
• Attributes survival to quick tourniquet application
The FAST Approach

- Defensive Tactics
- Offensive Tactics
- Basic Medical Interventions
The FAST Approach

We Do Not Want to Make Heroes

- That is the job for law enforcement
- Defensive position until help arrives
- Use tactics if find yourself in a life or death situation
The FAST Approach Teaches People To Utilize Their Strengths

- Surprise
- Strength in Numbers
- Will to Survive

The FAST Approach

SMARCHRV

What is SMARCHRV?

- Security/ Self Aid
- Massive Hemorrhage
- Airway
- Respirations
- Circulation
- Hypothermia
- Recovery Position/ Reassess
- Vitals
Why SMARCHRV?

Primary causes of preventable death in an active shooter scenario:

- Hemorrhage from extremity wounds
- Tension pneumothorax
- Airway problems

Who Have We Taught?

- Colorado National Guard
- University of Colorado Department of Public Safety
- University of Colorado Center for Homeland Security
- Saint Mary’s Kansas Boy Scout Troop 200
- Bravo Arms, Colorado Springs, CO
- Fort Riley Kansas Rescue
- University of Colorado F.A.S.T. Survivor Course
FAST Club Structure
And Schedule

Student Director– John Young
Advisor – Byron Jones

Executive Council:
President – Eli Sepahi
Vice President – Maria Ortega
Secretary – Jesse Garcia
Member Relations Specialists – Amy Linares

Meet every other Wednesday at 3:00PM Room N1180
Thursday at 3:00PM Room A1410