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Approved:

Dean:

Соз. г-р Лебри



IN

"FIRST AID AT HOME AND OFFICE"

Specialty	DENTAL MEDICINE
Educational - qualification degree	master
Organizational form of education	full-time
Auditorial activity (Lectures/Seminars)	15 (0/15)
Extra-auditorial activity	45
ECTS- credits	2
Discipline type	elective
Semester/s of education	From first to tenth
Semester of examination	From first to tenth
Developer(s) of the Syllabus:	Assoc.Prof. N. Radeva, PhD
	Assoc.Prof. M.Panteleva, MD, PhD

Varna, 2026

ANNOTATION

Aims of the course	The main objective of the course is to provide information about the types of incidents that may occur in everyday life at the home or in the office, as well as students' competencies in determining the right steps to take and decisions to make in order to protect themselves and the people around them.
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Outcomes for students at the end of the course:	
Competences	
Competence group	1. Patient Care that is compassionate, appropriate, and effective for treating health problems and promoting health.
Knowledge	▪ Recognising possible conditions requiring emergency first aid..
Skills	▪ <i>identifying the first aid necessities of the casualties;</i> ▪ <i>interpreting signs and symptoms;</i> ▪ <i>placing the casualty in an appropriate position,</i> ▪ <i>applying basic life support (BLS) techniques</i> ▪ <i>performing cardiopulmonary resuscitation (CPR);</i> ▪ <i>dressings for bleeding or trauma;</i> ▪ <i>immobilization of broken limbs.</i>
Competence group	2. Medical Knowledge about established and evolving biomedical, clinical, and cognate (eg, epidemio-logical and social-behavioral) sciences and the application of this knowledge to patient care.
Knowledge	▪ Knowledge of physiological and pathophysiological processes in the body; ▪ Knowledge of the mechanisms of injury in various accidents.
Skills	▪ <i>determining the influence of various damaging factors on the human organism;</i> ▪ <i>providing first aid for drowning, burning and frostbite at the scene;</i> ▪ <i>elementary anti-shock measures;</i> ▪ <i>recognizing poisonings, administering antidotes and first aid;</i> ▪ <i>use of an automatic external defibrillator.</i>
Competence group	3. Practice-Based Learning and Improvement that involves investigation and evaluation of their own patient care, appraisal, and assimilation of scientific evidence, and improvements in patient care.
Knowledge	▪ orientation to the basic concepts and models of first aid for vital signs ▪ determining the approach to the casualty
Skills	▪ <i>providing emergency and adequate care for the injured;</i> ▪ <i>recognizing and managing a large number of medical conditions in domestic and occupational incidents;</i> ▪ <i>recognising and dealing with a range of emergency medical conditions in sudden illness.</i>
Competence group	4. Interpersonal and Communication Skills that result in effective information exchange and teaming with patients, their families, and other health professionals.
Knowledge	▪ identifying potential risks leading to trauma and injury; ▪ determining the need for psychological first aid;

	▪ implementing measures for their own safety.
Skills	▪ <i>taking safety measures and actions against potential risks leading to injuries.</i> ▪ <i>recognizing the signs of stress and skills to provide psychological first aid;</i> ▪ <i>preparing first aid kits;</i> ▪ <i>use of personal protective equipment (PPE).</i>
Competence group	5. Professionalism , as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.
Knowledge	▪ <i>Identifying vulnerable groups at higher risk of injury</i>
Skills	▪ <i>providing first aid for older people and young children</i> ▪ <i>providing first aid for misuse of household chemicals and toxic substances in the home and office</i> ▪ <i>providing first aid for epilepsy;</i> ▪ <i>providing first aid for acute allergic reaction, poisonous insect bites, etc.</i>
Competence group	6. Systems-Based Practice , as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.
Knowledge	▪ <i>Organising triage when there are a large number of casualties or risk of harm.</i>
Skills	▪ <i>Distribution of casualties into groups - by severity and urgency of first aid.</i>

Key competencies for lifelong learning¹, that the discipline develops:

Literacy competence Literacy is the ability to identify, understand, express, create, and interpret concepts, feelings, facts and opinions in both oral and written forms, using visual, sound/audio and digital materials across disciplines and contexts. It implies the ability to communicate and connect effectively with others, in an appropriate and creative way.	X
Multilingual competence This competence defines the ability to use different languages appropriately and effectively for communication. It broadly shares the main skill dimensions of literacy: it is based on the ability to understand, express and interpret concepts, thoughts, feelings, facts and opinions in both oral and written form (listening, speaking, reading and writing) in an appropriate range of societal and cultural contexts according to one's wants or needs.	X
Mathematical competence and competence in science, technology, engineering A. Mathematical competence is the ability to develop and apply mathematical thinking and insight in order to solve a range of problems in everyday situations. Building on a sound mastery of numeracy, the emphasis is on process and activity, as well as knowledge. Mathematical competence involves, to different degrees, the ability and willingness to use mathematical modes of thought and presentation (formulas, models, constructs, graphs, charts). B. Competence in science refers to the ability and willingness to explain the natural world by making use of the body of knowledge and methodology employed, including observation and experimentation, in order to identify questions and to draw evidence-based conclusions. Competences in technology and engineering are applications of that knowledge and methodology in response to perceived human wants or needs. Competence in science, technology and engineering involves an understanding of the changes caused by human activity and responsibility as an individual citizen. Statistical processing of survey data.	X

¹ As defined in 2018 r. by the European Union Council ([https://eur-lex.europa.eu/legal-content/BG/TXT/HTML/?uri=CELEX:32018H0604\(01\)&from=EN](https://eur-lex.europa.eu/legal-content/BG/TXT/HTML/?uri=CELEX:32018H0604(01)&from=EN))

Digital competence Digital competence involves the confident, critical and responsible use of, and engagement with, digital technologies for learning, at work, and for participation in society. It includes information and data literacy, communication and collaboration, media literacy, digital content creation (including programming), safety (including digital well-being and competences related to cybersecurity), intellectual property related questions, problem solving and critical thinking.	X
Personal, social and learning to learn competence Personal, social and learning to learn competence is the ability to reflect upon oneself, effectively manage time and information, work with others in a constructive way, remain resilient and manage one's own learning and career. It includes the ability to cope with uncertainty and complexity, learn to learn, support one's physical and emotional well-being, to maintain physical and mental health, and to be able to lead a health-conscious, future-oriented life, empathize and manage conflict in an inclusive and supportive context.	X
Citizenship competence the ability to act as responsible citizens and to fully participate in civic and social life, based on an understanding of social, economic, legal and political concepts and structures, as well as global developments and sustainability.	X
Entrepreneurship competence Entrepreneurship competence refers to the capacity to act upon opportunities and ideas, and to transform them into values for others. It is founded upon creativity, critical thinking and problem solving, taking initiative and perseverance and the ability to work collaboratively in order to plan and manage projects that are of cultural, social or financial value.	
Cultural awareness and expression competence Competence in cultural awareness and expression involves having an understanding of and respect for how ideas and meaning are creatively expressed and communicated in different cultures and through a range of arts and other cultural forms. It involves being engaged in understanding, developing and expressing one's own ideas and sense of place or role in society in a variety of ways and contexts.	X

Methods of education
▪ seminars ▪ practical exercises, ▪ practical and creative problem solving and case studies, ▪ consultations, ▪ discussions, ▪ work with scientific literature, ▪ presentations.

Links with other courses from the curriculum of the specialty
▪ Builds upon knowledge acquired in/Depends on: ○ Disaster medicine

THEMATIC PLAN OF SEMINARS

№	I. I. THEMATIC PLAN OF THE SEMINARS	ACADEMIC HOURS	SEMESTER
1.	Safety first. The role of the rescuer at the scene. Emergency response. Basic principles of first aid. Chain of survival. Assessment of the scene of the incident. Assessment of the casualty step by step.	1	
2.	First aid for restoring respiratory activity. Choking adult. Choking child. First aid for choking. Shock. Shock position of the body. Electric shock. Lightning.	1	
3.	Incidents in swimming pools – risk of infectious and traumatic complications. First aid.	1	
4.	Wounds and types of wounds. Soft tissue injuries. Dressings.	1	
5.	Trauma and injury to the locomotor system. Immobilization and displacement of an injured person.	1	
6.	Household burns. Emergency assistance in exposure to very high and very low temperatures.	1	
7.	Food and medicinal poisonings at home and the office. Antidotes. First aid.	1	
8.	Biological agents, preventive measures and first aid.	1	
9.	Transport incidents. Assessment of the casualty.	1	
10.	First aid kits at home and in the office. Content and application of medicines.	1	
11.	Seizures. Epilepsy. Low blood sugar. Diabetes. Asthma. Renal colic.	1	
12.	Sudden cardiac arrest. Heart attack. Stroke. First aid.	1	
13.	Incidents at home. Household poisoning with ethylene glycol, carbon dioxide, cleaning agents and others. Acute alcohol poisoning. Insect bites, spiders and others.	1	
14.	Acute allergic reaction. Anaphylactic shock. Bee and wasp sting. First aid kits.	1	
15.	Level of consciousness (LOC) changes after an accident. Psychological support for the victims and the family.	1	
TOTAL ACADEMIC HOURS:		15	

MONITORING AND ASSESSMENT OF KNOWLEDGE, SKILLS AND COMPETENCES

The quality and volume of the acquired knowledge, skills and competences is established by:

- **continuous assessment of practical activity:** answering oral questions during the training process.
- **semester control:** summative assessment at the end of the course. Development and presentation of a topic based on questions from the conspectus.

The final grade is formed from the results of the continuous assessment and the semester control in ratio 20% : 80% and is registered as a rounded integer in the student's record.

The objectivity of the assessment is guaranteed by the application of common criteria for determining the level of knowledge and skills acquired in the discipline, as follows:

Six-point evaluation system	CRITERIA FOR DETERMINING THE LEVEL OF KNOWLEDGE, SKILLS AND COMPETENCES	Degree of acquired theoretical and practical skills
Excellent 6	VERY HIGH LEVEL excellent results with minor gaps in the demonstration of knowledge, skills, and competences	91-100 %
Very Good 5	HIGH LEVEL very good results with minimal gaps in the demonstration of knowledge, skills and competences	81-90 %
Good 4	INTERMEDIATE LEVEL satisfactory results with a number of significant errors in the demonstration of knowledge, skills and competences	71-80 %
Satisfactory 3	MINIMAL REQUIRED LEVEL demonstration of knowledge, skills and competences within the scope of the compulsory minimum mastery of the discipline	60-70 %
Poor 2	UNDER THE MINIMAL REQUIRED LEVEL demonstration of knowledge, skills and competences below the specified minimum where additional work is required to meet the minimal criteria	< 60 %

LITERATURE and other sources of information

Compulsory literature:

1. First Aid Guide for School Emergencies
https://www.bgecentralappalachia.com/wp-content/uploads/2022/06/first_aid_emergencies.pdf
2. Basic and Advanced Life support 2020 Edition. American heart association guidelines for cardiopulmonary resuscitation and emergency cardiovascular care.
https://sofia.medicalistes.fr/spip/IMG/pdf/part_3_adult_basic_and_advanced_life_support_2020_american_heart_association_guidelines_for_cardiopulmonary_resuscitation_and_emergency_cardiovascular_care.pdf
3. International Trauma Life Support for Emergency Care Providers – 2020
<https://www.itrauma.org/product/itls-for-emergency-care-providers-9th-edition-ebook-pdf-format-vitalsource/>
4. ACEP First Aid Manual, 5th edition
<https://kuiyem.ku.edu.tr/wp-content/uploads/2016/12/American-College-of-Emergency-Physicians-ACEP-First-Aid-Manual.pdf>
5. First Aid for the family medicine boards, 3rd edition.
<https://www.yumpu.com/en/document/view/63126795/download-pdf-first-aid-for-the-family-medicine-boards-third-edition-1st-aid-for-the-family-medicine-boards>

Recommended literature:

1. European Resuscitation Council
[https://www.resuscitationjournal.com/article/S0300-9572\(17\)30776-1.pdf](https://www.resuscitationjournal.com/article/S0300-9572(17)30776-1.pdf)
2. American Red Cross First Aid/CPR/AED Participant's Manual, 2014
<http://safetytrainingpros.com/wp-content/uploads/2015/10/American-Red-Cross-First-Aid-CPR-AED-Participants-Manual.pdf>
3. First Aid to the injured
http://neuron.mefst.hr/docs/katedre/klinicke_vjestine/Dr%20Lojpur%20FIRST%20AID%20TO%20THE%20INJURED.pdf
4. First Aid Manual
<http://firstaid-cpr.net/manualpdf.html>
5. Comprehensive Guide for First Aid & CPR
https://cdn.redcross.ca/prodmedia/crc/documents/Comprehensive_Guide_for_First_Aid_CPR_en.pdf

CONSPECTUS

For semester control

1. Safety. Incident scene assessment.
2. Role of the first responder at the scene.
3. Basic principles of first aid.
4. Chain of survival.
5. Assessment of the victim's condition.
6. Actions in the absence of respiratory activity.
7. Strangulation of adults and children. Choking behaviour.
8. Shock. Anti-shock body position.
9. Electric shock. Shock from lightning.
10. Pool accidents - risks of infectious and traumatic problems. First aid.
11. Wounds - types. Soft tissue injury. Dressings.
12. Musculoskeletal injuries. Immobilisation and repositioning of an injured person.
13. Domestic burns. Emergency care for exposure to very high and very low temperatures.
14. Food and drug poisoning at home and in the office. Antidotes.
15. Biological agents, precautions and first aid.
16. Transport accidents. Casualty assessment.
17. First aid kits at work and home. Medication equipment and application.
18. Seizures. Epilepsy. Low blood sugar. Diabetes. Asthma. Renal colic.
19. Sudden cardiac arrest. Myocardial infarction.
20. Stroke.
21. Domestic poisoning with ethylene glycol, carbon monoxide, cleaning substances, etc.
22. Acute alcohol poisoning.
23. Insect bites, spider bites, etc.
24. Acute allergic reaction. Anaphylactic shock. Bees and wasps sting.
25. Psychological support to the victim and family.

The syllabus is approved by:

- Department Council of the Department of Disaster Medicine and Maritime Medicine
- Program board of the Faculty of Medicine
- Faculty Council

Protocol № 117/12.01.2026

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Protocol № 02124.05.26r.

Developer of the Syllabus:

(Asoc. Prof. Nikolina Radeva, PhD)

Approved by Chair of the Department:

(Asoc. Prof. Nikolina Radeva, PhD)