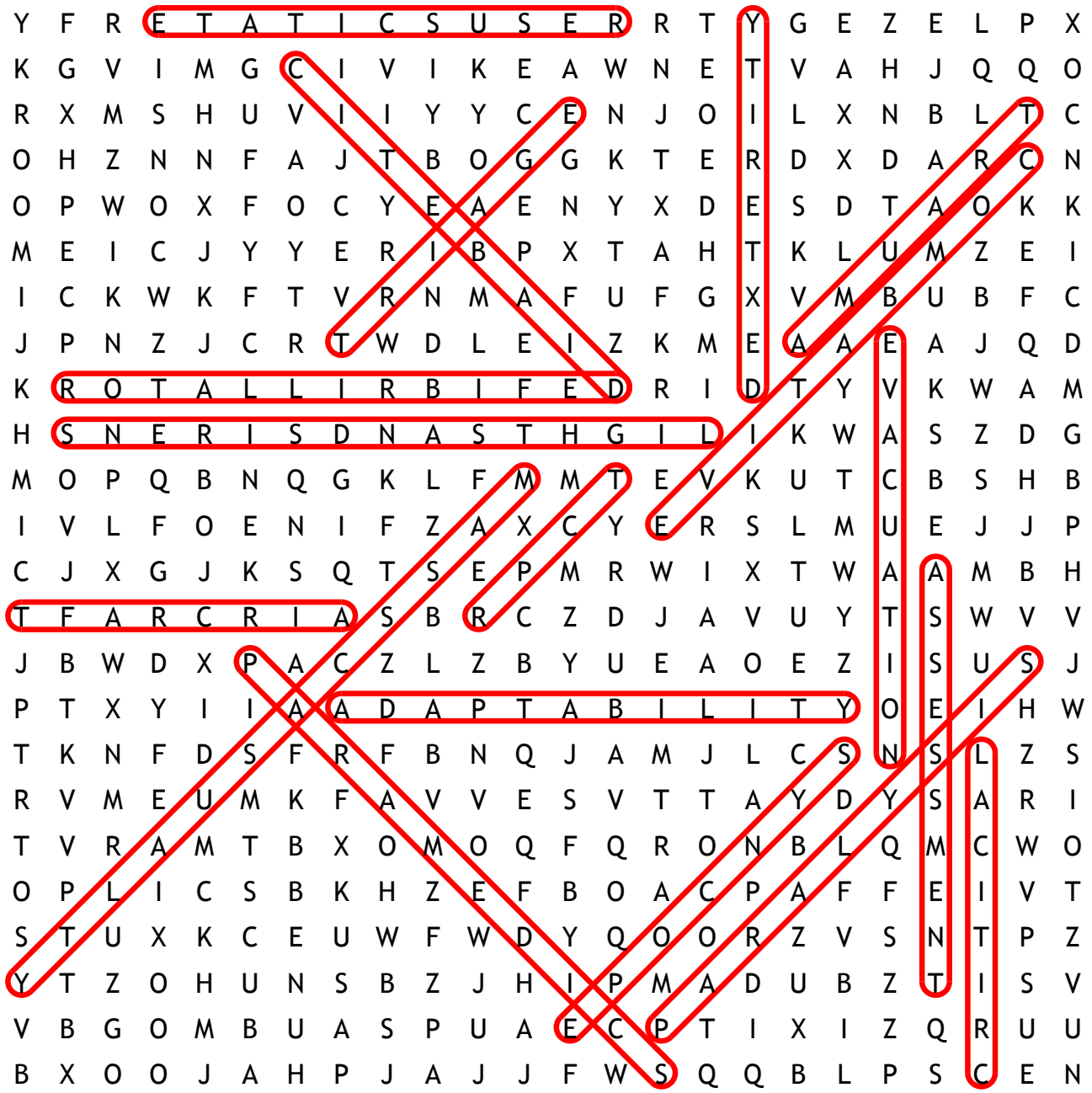
Name: _____ Date: _____

DOH PST WORKBOOK SECTION 9



ASSESSMENT
ADAPTABILITY
AIRCRAFT
COMBATIVE
CRITICAL
DEFIBRILLATOR
DEXTERITY
DIABETIC
EVACUATION
LIGHTS AND SIRENS
MASS CASUALTY
PARALYSIS
PARAMEDICS
RESUSCITATE
SYNCOPE
T-CPR
TRAUMA
TRIAGE