NREMT EMT Patient Assessment 2014 - TRAUMA

DCAP BTLS



SCENE SIZE-UP

Scene safe?

BSI (gloves, mask etc.)

mechanism of injury rature of invest." MOL& NOL

Number of patients?

EMS assistance needed?

Mello, my some is: I'm an EMT, we're here to help you.

Consider Manual C-spine Application Here!

PRIMARY SURVEY RESUSCITATION

Verbalize general impression of the patient

(What do you see?)

L.O.C level of consciousness?

KO "What's your name?"

x O "Where are you right new?"

XO "What day is 87"

KO "Tell me what banconed?"

Alert -responsive Verbal - responds to verbal Pain - responds to pain Unresponsive - to all stimulation

What is/ are the Chief Complaint or Apparent Life-threats?

Check Airway

Opens & assess airway Section Needed? Inserts advoct as edicated

Check Breathing

Assess breathing Assures adequate vensioner Oxygen therapy (Os-15LPM) Manage inturies that compromise broadbing/vertibilities ave POS Pressure Out

Check Circulation

Checks pulse - Rate & Quality Assess skin Color, Tomp, Condition Assess & control major bleeds. Blood sweep Now!

Shock?

Initiate shock management (positions patient - conserves body heat): (Mylar Space Blanket Wrop Here)

Transport?

Patient Priority (critical/ stable)(contact hospital)

Identifies patient priority & makes treatment? transport decision (trased on calculated GCS)

3 History

Signs & Symptoms - What can you see? What is the Chief Complaint?

Events - What were you doing when you started to feel this way?

Altergies - What have you come in contact with? Meds, Insects, Pollen, Food, Latex? Medications - S.M.O.P. - Street, Herbal, OTC, Prescriptions

Past Medical History - Has this happened before, is this a pre-exsisting condition? Last Oral intake- When did you eat last? What was it? Nausea or Vomiting?

SECONDARY ASSESSMENT

Head

inspect reputh, none & facial area inspect & palpotes scolp & ears. Assess eyes

Neck.

Check position of traches

Check lugular versa. Palpate cervical spine

Apply CERWICAL COLLAR Roof T

Chest

inspect & palpate ofest.

Autovitate cheet

Abdomen/pelvis Inspect & palpale abdomen

Assess pelvin. Vierbalize appearament of

mentals/motiveum as needed

Lower extremities

inspect, palpoin & assess motor sensory & distal pingulatory **National**

Upper extremities

inspect, pulpote & assess motor, sensory & distail circulatory. handbone.

Log Roll & Backboard Now!

Posterior thorax. lumbar & buttocks Inspect & palpate posterior thorax Inspect & purpate lumber & STATISTICS ACCOUNT.

VITAL SIGNS 5

Baseline Vitals

Blood Fressure Respiration (Rate & Quality): Meant rate (Rate & Guality) Skin (Color, Temp & Condition) Publis (PERRL) SPOHORYDEN SATURATIONS

Manage secondary injuries & wounds

Reassessment

Mental status ?

Acres 1 Berndhine Contralisting

Re-check vitals Re-check interventions

(Do, bandages, splints etc.)

Repeat every



Repeat every

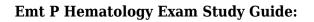




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J Dewey



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