

C-ABCDE

C Catastrophic bleeding / Cardiac arrest

A Airways

- | | |
|---------------------|------------------------------|
| Check airway | 1. Chin lift/Jaw thrust |
| Thorax movement | 2. Naso/Oropharyngeal airway |
| See, listen, feel | 3. Suction |
| Paradox. breathing? | 4. Laryngeal mask airway |
| Stridor? | 5. Intubation |
| | 6. Coniotomy |

B Breathing

- | | |
|------------------|------------------|
| Respiratory rate | 1. Oxygen |
| Thorax movement | 2. Ventilation |
| Auscultation | 3. Decompression |
| Cyanosis | 4. Chest tube |

C Circulation

- | | |
|-------------------------|--------------------------|
| Colour (Pale) | 1. Tilt bed |
| Cold/Sweaty | 2. Fluids (PVC, IO, CVC) |
| Pulse (Rad / Fem / Car) | 3. Vasoactive drugs |
| Abdomen/Pelvis | (Adrenalin IM) |

D Disability

- | | |
|---------------------|----------------|
| AVPU/GCS | 1. Support ABC |
| Pupils | 2. Glucose |
| Movement of extrem. | 3. Antidote |

E Exposure

- | | |
|------------------------|------------------|
| Check whole body | 1. Log roll |
| Prevent hypothermia | 2. Warm blankets |
| Prevent further injury | 3. Warm fluids |

SBAR

S Situation

Own name, title, and unit
Patients name, sex, and age
Patients social security / identification number
Describe situation briefly
I'm contacting you to...

B Background

Previous and current illness
Relevant medical history
Allergies
Contagiousness

A Assessment

A: Airway
B: Breathing, saturation
C: Heart rate, blood pressure
D: Consciousness, pain, oriented to time / place / person
E: Temperature, skin, colour, abdomen, urine production
Brief assessment

R Recommendation

Immediate action (Care, monitoring, transfer, treatment)
Further examinations (Radiology)
Time frame (How often...? How long...? Next contact...?)

Confirmation of communication
Questions / Agreement