



## Stanford EMT Program Trauma Assessment Rubric



## NOTE: ALL CRITICAL CRITERIA MUST BE PERFORMED CORRECTLY TO PASS

Start Time: \_\_\_:\_\_\_

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Criteria	Out of	Receiv
BSI		
Takes or verbalizes appropriate body substance isolation precautions before approaching patient ( <i>CRITICAL</i> )	1	
SCENE SIZE UP		
Assesses environment and determines the scene is safe before approaching patient ( <i>CRITICAL</i> )	1	
Determines number of patients	1	
Determines the mechanism of injury/nature of illness	1	
Determines need for additional resources	1	
Determines need for spinal precautions based on MOI/NOI (CRITICAL)	1	
PRIMARY ASSESSMENT	•	
General Impression		
- Indicates appearance, position, age, and sex of patient	1	
Introduction and Consent		
- EMT introduces themselves and receives consent to treat ( <i>CRITICAL</i> )	1	
Responsiveness/Level of consciousness		
- Accurately assesses and verbalizes patient's responsiveness on the AVPU scale.	2	
· Asks orientation questions (person, place, time, event) if appropriate		
Determines Chief Complaint	1	
- Asks for patient's chief complaint during primary assessment	1	
Airway		
- Appropriately determines need to open the airway (CRITICAL)		
- If indicated, opens airway with appropriate technique (CRITICAL)	4	
- Determines need to clear or suction airway (CRITICAL)		
- Determines need for airway adjunct and verbalizes placement (CRITICAL)		
Breathing		
- Verbalizes approximate rate (fast/normal/slow/absent) of breathing (CRITICAL)		
- Verbalizes rhythm (regular/irregular) of breathing	4	
- Verbalizes quality of breathing (CRITICAL)	'	
- Initiates appropriate oxygen therapy and/or any needed interventions (CRITICAL)		
- If appropriate, uses pulse oximeter to determine choice of oxygen therapy		
Circulation		
- Pulse		
- Checks for pulse at appropriate site for no more than 10 seconds (CRITICAL)		
- Verbalizes approximate rate (fast/normal/slow/absent) of pulse (CRITICAL)		
- Verbalizes rhythm (regular/irregular) of pulse		
- Verbalizes quality (strong/weak) of pulse	7	
<ul> <li>Skin</li> <li>Assesses color, temperature, and condition of skin (<i>CRITICAL</i>)</li> </ul>		
D1 1'		
<ul> <li>Bleeding</li> <li>Performs visual or physical blood sweep to identify major bleeding (CRITICAL)</li> </ul>		
- Interventions		
<ul> <li>Verbalizes appropriate interventions for shock, bleeding control and/or cardiac arrest (CRITICA)</li> </ul>	$ L\rangle$	

Initiates transport within 10 minutes and at appropriate stage of assessment ( <i>CRITICAL</i> ) States plausible justification for transport decision according to MAP criteria	3	
APID PHYSICAL EXAM		
<ul> <li>Appropriately determines need for a rapid physical exam and attempts an assessment of every body region (CRITICAL)</li> </ul>	1	
Head - Inspects and palpates for major head injuries - Examines pupil size, and assesses if pupils are equal, round, and reactive to light	2	
Neck - Palpates cervical spine - Checks position of trachea - Checks jugular veins bilaterally	3	
Chest - Exposes and visualizes chest for asymmetry, contusions, penetrations, paradoxical movement - Palpates and assesses for bilateral chest rise, instability, crepitus - Auscultates for breath sounds bilaterally (2)	4	
Abdomen/pelvis  - Exposes and visualizes abdomen for injuries  - Palpates all four quadrants of abdomen for tenderness, rigidity  - Checks pelvis for stability, tenderness, and crepitation	3	
Lower extremities - Inspects, palpates and assesses entire length of extremities - Inspects, palpates and assesses for distal circulation, sensation, and motor function bilaterally (2)	3	
Upper extremities  - Inspects, palpates and assesses entire length of extremities  - Inspects, palpates and assesses for distal circulation, sensation, and motor function bilaterally (2)	3	
Posterior thorax, lumbar and buttocks (can be deferred if patient is log rolled for immobilization)  - Inspects and palpates posterior thorax  - Inspects and palpates lumbar and buttocks areas	2	
Treatment:  - Verbalizes appropriate interventions for life threats as they are found ( <i>CRITICAL</i> )  - Defers treatment of non-life threatening injuries ( <i>CRITICAL</i> )	2	
Timing: - Completes rapid exam within 120 seconds ( <i>CRITICAL</i> ) PINAL IMMOBILIZATION	1	
<ul> <li>Determines need for cervical collar and verbalizes application of device (<i>CRITICAL</i>)</li> <li>Determines need for full spinal immobilization and verbalizes application of appropriate device (<i>CRITICAL</i>)</li> </ul>	2	
ISTORY TAKING istory of Present Illness and SAMPLE Attempts to obtain a OPQRST and SAMPLE history (CRITICAL)	1	
Verbalizes need to take vital signs ( <i>CRITICAL</i> ) Asks for pulse, respirations, blood pressure and pulse oximetry and correctly states if each given value is high / low / within normal limits (4) JLL SECONDARY EXAM	5	
- Attempts to perform an assessment of every body region ( <i>CRITICAL</i> )	1	
Head - Palpates and performs a detailed inspection of scalp and ears - Inspects mouth, nose and assesses facial area - Assesses eyes and pupils	3	
Neck - Palpates cervical spine - Checks position of trachea - Checks jugular veins	3	

Chest - Exposes and visualizes chest who - Palpates sternum and checks for - Auscultates for breath sounds bil		8	
Abdomen/pelvis - Exposes and visualizes abdomen - Palpates all four quadrants of abo - Checks pelvic stability - Determines need to assess genita	domen using proper technique	4	
Lower extremities - Inspects, palpates and assesses er - Inspects, palpates and assesses for	ntire length of extremities or distal circulation, sensation, and motor function bilaterally (2)	3	
Upper extremities - Inspects, palpates and assesses er - Inspects, palpates and assesses for	ntire length of extremities or distal circulation, sensation, and motor function bilaterally (2)	3	
Posterior thorax, lumbar and buttoc - Inspects and palpates posterior th - Inspects and palpates lumbar and	norax	2	
INTERVENTIONS			
<ul><li>Determines interventions needed (C</li><li>Appropriately administers interven</li></ul>		2	
REASSESSMENT			
- Verbalizes appropriate reassessment	CRITICAL) ssess patient to determine changes in patient condition interval based on stated severity of patient	3	
HANDOVER			
<ul> <li>Attempts to provide accurate transf</li> <li>Includes patient age, sex, and chief</li> <li>Includes findings of assessments permedications</li> <li>Includes accurate report of vital sig</li> <li>Includes interventions performed a</li> </ul>	Complaint erformed, summary of pertinent focused history, allergies, and ens	5	
Established patient rapport and comm	unicated effectively with nationt	1	
Completed assessment within 20 minutes	• •	1	
Completed assessment within 20 inint	Total:		
	End T	ime:	:
Orders a dangerous or inappropria Failure to manage the patient as a Exhibits unacceptable affect with	competent EMT patient or other personnel		
tou must factually document your rati	ionale for checking any critical items on the reverse of this sheet		
Grader:	Signature: Da	ate:	
Grader:	Signature: De	ate:	