

TRAUMA- PATIENT ASSESSMENT/MANAGEMENT

OBJECTIVE: Students will demonstrate the ability to do a proper trauma assessment

INDICATIONS: To be performed to find life threats and treat any that may severely

compromise patient outcome.

EQUIPMENT: BSI, Stethoscope, BP cuff, jump bag

Body Substance Isolation precautions/Standard precautions

SCENE SIZE-UP

Environment- Determine if the scene/situation is safe

Number- Determine the number of patients

Additional- Request additional EMS assistance if necessary

MOI/NOI- Determine the mechanism of injury/nature of illness

Extrication- Are there any extrication issues (i.e. are there any issues accessing the patient and bringing them back to the ambulance)

Spinal precautions- Consider stabilization of the spine

PRIMARY ASSESSMENT

Form a general impression of the patient

Determines the responsiveness/level of consciousness (AVPU/A&O questions)

Determine chief complaint/apparent life-threats

Airway

 Open and assess airway as indicated w/ appropriate maneuver/technique

Inserts adjunct as indicated

Breathing

- Assess breathing
- Assess if there is adequate ventilation
- Initiates appropriate oxygen therapy
- Manages any injury which may compromise breathing/ventilation

Circulation

- Checks pulse
- Assess skin [either skin color, temperature or condition]
- Assess for and controls major bleeding if present
- Initiate shock management [positions patient properly, conserves body heat]

Perform Rapid scan

Determine patient priority and transport decision



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Attempt to obtain SAMPLE history

SECONDARY ASSESSMENT

Select appropriate assessment (Full-body scan and/or focused assessment)

Head

- Inspect and palpates scalp and ears
 - Inspect mouth, nose, and facial area

Neck

- Check position of trachea
- Palpate cervical spine

Chest

- Inspect chest
- Auscultate chest

• Palpate chest

Assess eyes

Check jugular veins

Abdomen/pelvis

- Inspect and palpate abdomen
- Assess pelvis
- Verbalize assessment of genitalia/perineum as needed

Lower extremities

• Inspect for Color, Motor, Sensory, Temperature, and Pulse

Upper extremities

• Inspect for Color, Motor, Sensory, Temperature, and Pulse

Posterior thorax, lumbar and buttocks

- Inspects and palpates posterior thorax
- Inspects and palpates lumbar and buttocks areas

VITAL SIGNS

Obtain baseline vital signs [must include BP, Pulse, and Respirations]

Manage secondary injuries and wounds appropriately

REASSESSMENT

Repeat primary assessment

Reassess vital signs

Reassess the chief complaint

Recheck interventions

Identify and treat changes in the patient's condition

Reassess patient:

- Unstable patients: every 5 minutes
- Stable patients: every 15 minutes



CRITICAL CRITERIA

Failure to initiate or call for transport of the patient within 10 minute time limit
Failure to take or verbalize appropriate body substance isolation precautions
Failure to determine scene safety
Failure to assess for and provide spinal protection when indicated
Failure to voice and ultimately provide high concentration of oxygen
Failure to assess/provide adequate ventilation
Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage
shock
Failure to differentiate patient's need for immediate transportation versus continued
assessment/treatment at the scene
Performs other assessment before assessing/treating threats to airway, breathing and circulation
Failure to manage the patient as a competent EMT
Exhibits unacceptable affect with patient or other personnel
Uses or orders a dangerous or inappropriate intervention