

MEDICAL- PATIENT ASSESSMENT/MANAGEMENT

OBJECTIVE: Students will demonstrate the ability to do a proper medical 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

Takes or verbalizes appropriate 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 manual stabilization of the spine

PRIMARY ASSESSMENT- Identify and treat life threats

Verbalize the 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
- Inserts adjunct as indicated (OPA or NPA)

Breathing

- Assess breathing (rate, rhythm, quality) and lung sounds
- Assess if there is adequate ventilation
- Initiates appropriate oxygen therapy
- Manages any injury which may compromise breathing/ventilation

Circulation

- Checks pulse (rate, rhythm, quality)
- 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]

Consider performing Rapid Scan

Determine priority of patient care and transport decision



HISTORY TAKING

S igns	&	Sym	ptoms
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Re	spiratory	Pain	ALOC	Allergic Reaction
	Provokes Associated Chest Pain Sputum Time Accessory Muscles Medications Exercise tolerance Diagnosis by physician Sentences	 Onset Provokes Quality Radiates Severity (0-10 scale) Time 	 Alcohol Epilepsy Insulin Opiates and other drugs Uremia Trauma Infection Psychogenic Shock/Stroke 	 Hx of Allergies Exposed to allergen type Exposure route Effects Progression Intervention
F 	Poisoning/ Overdose	Environmental Emergency	Obstetrics	Behavioral
	Substance Exposed substance Time of exposure Amount Length of exposure Interventions Estimated weight of patient	 Source Environment Duration LOC Signs & symptoms (general or local) 	 Due date How far apart are contractions Feel like bearing down Has your water broken Any expected complications 	 How do you feel Suicidal tendencies Threat to self or others Medical Problem

Allergies

Medications

Past pertinent medical Hx

Last oral intake

Events leading to present illness

SECONDARY ASSESSMENT

Select appropriate assessment (Full-body and/or Focused)

Assess affected body part/system

- Cardiovascular
 - Neurological
- Integumentary
- Reproductive

- Pulmonary
- Musculoskeletal
- GI/GU
- Psychological/Social



VITAL SIGNS
Obtain baseline vital signs [must include BP, Pulse, and Respirations]
Field impression of patient
Interventions [verbalizes proper interventions/treatment]
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 15 minute time limit
Failure to take or verbalize appropriate body substance isolation precautions
 Failure to determine scene safety before approaching patient
 Failure to voice and ultimately provide appropriate oxygen therapy
Failure to assess/provide adequate ventilation
Failure to find or appropriately manage problems associated with airway, breathing,
hemorrhage or shock
Failure to differentiate patient's need for immediate transportation versus continued
assessment or treatment at the scene
 Performs secondary examination before assessing and treating threats to airway, breathing
and circulation
Orders a dangerous or inappropriate intervention
Failure to provide accurate report to arriving EMS unit
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