**Physical Assessment Testing Station (ACS)**

Points to hit on (chest pain, chest assessment, blood draw, IV insertion)

Presenting patient with clothes on

56 year old male, comes alone – no family

Volunteers no history, presents moaning and requesting pain meds a few times.

Complaining of 9/10 chest pain, x 3 hours, sharp with pressure sensation, no nausea, no vomiting

T 37.2 HR 96 RR 20 BP 166/94 SpO2 94%

Past medical history: Smoker, ‘stomach problems’

No allergies

**Chest pain assessment:** Started 3 hours ago, nothing makes it worse or better, stabbing pain with pressure sensation, no radiating, pain is 9/10, “seems like a constant pain so far.”

**Chest sounds**: Clear bilaterally

Nurse to complete ABCD, Chest Pain assessment, initiate medical directive: labs and IV start.

Patient repeatedly asking for pain control-----Hopefully prompting nurse to approach MD asking for antiemetic and pain relief.

**Equipment needed:**

All the vital signs equipment

IV access and IV set up

Oxygen by nasal prongs

ASA (two pills)

Nitro spray

Blood tubing

10cc Syringe

Morphine amp (pretend)

**Test Checklist: Chest Abdominal Pain**

Learning Objectives:

1. Complete ABCD, Chest pain assessment & OPQRST pain assessment in patient with abdominal pain
2. Recognize criteria and initiate Lab draw/Initiate IV medical directive when appropriate
3. Collaborate with other providers when indicated in timely fashion

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Y** | **N** | **Comments** |
| Hand hygiene |  |  |  |
| Introduced self; undressed patient |  |  |  |
| Completed full set of vital signs  Attached pulse oximetry |  |  |  |
| ABCD assessment |  |  |  |
| Chest assessment: Look, listen, feel |  |  |  |
| Pain assessment: OPQRST |  |  |  |
| Took patient history |  |  |  |
| Identified need to initiate medical directive (Lab draw/IV insertion) |  |  |  |
| Notified MD |  |  |  |
| Other observations |  |  |  |
|  |  |  |  |