

Emergency

Care and Transportation of the Sick and Injured



Section 3: Patient Assessment

8: Patient Assessment

Scene Size-up

Objectives (1 of 2)

Cognitive

- 3-1.1 Recognize hazards/potential hazards.
- 3-1.2 Describe common hazards found at the scene of a trauma and a medical patient.
- 3-1.3 Determine if the scene is safe to enter.
- 3-1.4 Discuss common mechanisms of injury/nature of illness.
- 3-1.5 Discuss the reason for identifying the total number of patients at the scene.
- 3-1.6 Explain the reason for identifying the need for additional help or assistance.

Scene Size-up

Objectives (2 of 2)

Affective

- 3-1.7 Explain the rationale for crew members to evaluate scene safety prior to entering.
- 3-1.8 Serve as a model for others explaining how patient situations affect your evaluation of mechanism of injury or illness.

Psychomotor

- 3-1.9 Observe various scenarios and identify potential hazards.

Initial Assessment

Objectives (1 of 7)

Cognitive

- 3-2.1 Summarize the reasons for forming a general impression of the patient.
- 3-2.2 Discuss methods of assessing altered mental status.
- 3-2.3 Differentiate between assessing the altered mental status in the adult, child, and infant patient.
- 3-2.4 Discuss methods of assessing the airway in the adult, child, and infant patient.
- 3-2.5 State reasons for management of the cervical spine once the patient has been determined to be a trauma patient.

Initial Assessment

Objectives (2 of 7)

- 3-2.6 Describe methods used for assessing if a patient is breathing.
- 3-2.7 State what care should be provided to the adult, child, and infant patient with adequate breathing.
- 3-2.8 State what care should be provided to the adult, child, and infant patient without adequate breathing.
- 3-2.9 Differentiate between a patient with adequate and inadequate breathing.
- 3-2.10 Distinguish between methods of assessing breathing in the adult, child, and infant patient.

Initial Assessment

Objectives (3 of 7)

- 3-2.11 Compare the methods of providing airway care to the adult, child, and infant patient.
- 3-2.12 Describe the methods used to obtain a pulse.
- 3-2.13 Differentiate between obtaining a pulse in an adult, child, and infant patient.
- 3-2.14 Discuss the need for assessing the patient for external bleeding.
- 3-2.15 Describe normal and abnormal findings when assessing skin color.
- 3-2.16 Describe normal and abnormal findings when assessing skin temperature.

Initial Assessment

Objectives (4 of 7)

- 3-2.17 Describe normal and abnormal findings when assessing skin condition.
- 3-2.18 Describe normal and abnormal findings when assessing skin capillary refill in the infant and child patient.
- 3-2.19 Explain the reason for prioritizing a patient for care and transport.

Initial Assessment

Objectives (5 of 7)

Affective

- 3-2.20 Explain the importance of forming a general impression of the patient.
- 3-2.21 Explain the value of performing an initial assessment.

Initial Assessment

Objectives (6 of 7)

Psychomotor

- 3-2.22 Demonstrate the techniques for assessing mental status.
- 3-2.23 Demonstrate the techniques for assessing the airway.
- 3-2.24 Demonstrate the techniques for assessing if the patient is breathing.
- 3-2.25 Demonstrate the techniques for assessing if the patient has a pulse.

Initial Assessment

Objectives (7 of 7)

- 3-2.26 Demonstrate the techniques for assessing the patient for external bleeding.
- 3-2.27 Demonstrate the techniques for assessing the patient's skin color, temperature, condition, and capillary refill (infants and children only).
- 3-2.28 Demonstrate the ability to prioritize patients.

Focused History and Physical Exam: Trauma

Objectives (1 of 3)

Cognitive

- 3-3.1 Discuss the reasons for reconsideration concerning the mechanism of injury.
- 3-3.2 State the reasons for performing a rapid trauma assessment.
- 3-3.3 Recite examples and explain why patients should receive a rapid trauma assessment.
- 3-3.4 Describe the areas included in the rapid trauma assessment and discuss what should be evaluated.

Focused History and Physical Exam: Trauma

Objectives (2 of 3)

- 3-3.5 Differentiate when the rapid assessment may be altered in order to provide patient care.
- 3-3.6 Discuss the reason for performing a focused history and physical exam.

Affective

- 3-3.7 Recognize and respect the feelings that patients might experience during assessment.

Focused History and Physical Exam: Trauma

Objectives (3 of 3)

Psychomotor

3-3.8 Demonstrate the rapid trauma assessment that should be used to assess a patient based on mechanism of injury.

Focused History and Physical Exam: Medical Patients

Objectives (1 of 3)

Cognitive

- 3-4.1 Describe the unique needs for assessing an individual with a specific chief complaint with no known prior history.
- 3-4.2 Differentiate between the history and physical exam that are performed for responsive patients with no known prior history and responsive patients with a known prior history.
- 3-4.3 Describe the needs for assessing an individual who is unresponsive.

Focused History and Physical Exam: Medical Patients

Objectives (2 of 3)

3-4.4 Differentiate between the assessment that is performed for a patient who is unresponsive or has an altered mental status and other medical patients requiring assessment.

Affective

3-4.5 Attend to the feelings that these patients might be experiencing.

Focused History and Physical Exam: Medical Patients

Objectives (3 of 3)

Psychomotor

- 3-4.6 Demonstrate the patient care skills that should be used to assist a patient who is responsive with no known history.
- 3-4.7 Demonstrate the patient care skills that should be used to assist a patient who is unresponsive or has an altered mental status.

Detailed Physical Exam

Objectives (1 of 2)

Cognitive

- 3-5.1 Discuss the components of the detailed physical exam.
- 3-5.2 State the areas of the body that are evaluated during the detailed physical exam.
- 3-5.3 Explain what additional care should be provided while performing the detailed physical exam.
- 3-5.4 Distinguish between the detailed physical exam that is performed on a trauma patient and that of the medical patient.

Detailed Physical Exam

Objectives (2 of 2)

Affective

3-5.5 Explain the rationale for the feelings that these patients might be experiencing.

Psychomotor

3-5.6 Demonstrate the skills involved in performing the detailed physical exam.

Ongoing Assessment

Objectives (1 of 2)

Cognitive

- 3-6.1 Discuss the reason for repeating the initial assessment as part of the ongoing assessment.
- 3-6.2 Describe the components of the ongoing assessment.
- 3-6.3 Describe trending of assessment components.

Affective

- 3-6.4 Explain the value of performing an ongoing assessment.

Ongoing Assessment

Objectives (2 of 2)

- 3-6.5 Recognize and respect the feelings that patients might experience during assessment.
- 3-6.6 Explain the value of trending assessment components to other health professionals who assume care of the patient.

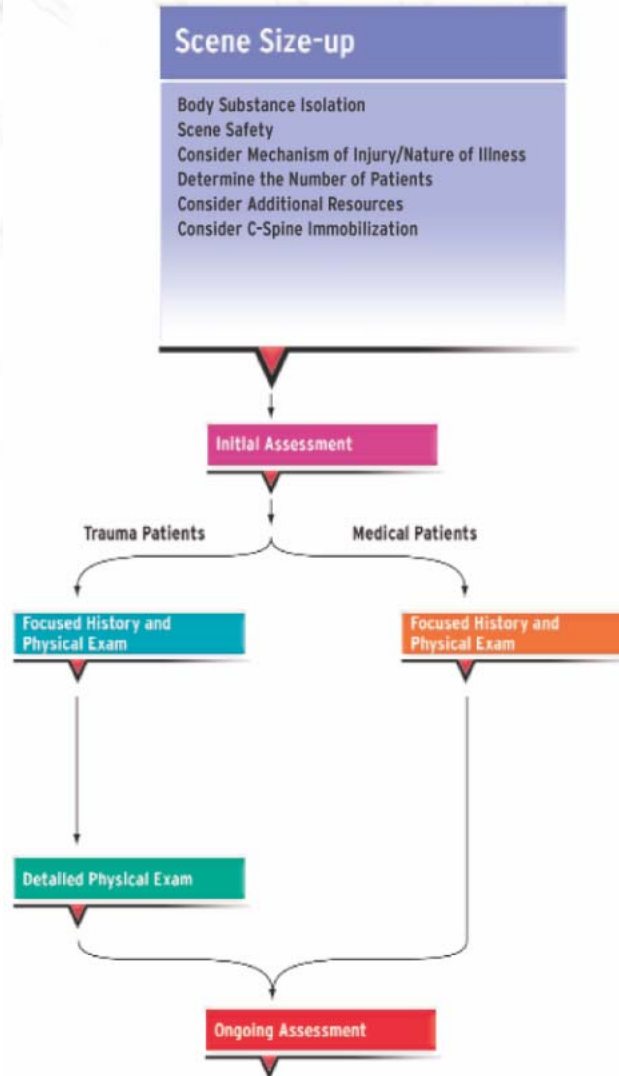
Psychomotor

- 3-6.7 Demonstrate the skills involved in performing the ongoing assessment.

Patient Assessment

- Scene size-up
- Initial assessment
- Focused history and physical exam
 - Vital signs
 - History
- Detailed physical exam
- Ongoing assessment

Patient Assessment Process



Scene Size-up

Body Substance Isolation
Scene Safety
Consider Mechanism of Injury/Nature of Illness
Determine the Number of Patients
Consider Additional Resources
Consider C-Spine Immobilization

Initial Assessment

Trauma Patients

Medical Patients

Focused History and
Physical Exam

Focused History and
Physical Exam

Detailed Physical Exam

Ongoing Assessment

1. Do whatever you can, quickly, to make yourself and the patient comfortable
2. Actively listen to the patient
3. Make eye contact with the person with whom you are speaking
4. Base your initial questions on the patient's complaints
5. Before you start treatment, STOP for a moment and mentally memorize:
 - A. What you have learned
 - B. What you are going to do
 - C. Inform the patient

Scene Size-up

Body Substance Isolation

Scene Safety

Consider Mechanism of Injury/Nature of Illness

Determine the Number of Patients

Consider Additional Resources

Consider C-Spine Immobilization

Scene Size-up

- Dispatch information
- Inspection of scene
- Scene hazards
- Safety concerns
- Mechanism of injury
- Nature of illness/chief complaint
- Number of patients
- Additional resources needed

Body Substance Isolation

- Assumes all body fluids present a possible risk for infection
- Protective equipment
 - Latex or vinyl gloves should always be worn
 - Eye protection
 - Mask
 - Gown
 - Turnout gear

Scene Safety: Potential Hazards

- Oncoming traffic
- Unstable surfaces
- Leaking gasoline
- Downed electrical lines
- Potential for violence
- Fire or smoke
- Hazardous materials
- Other dangers at crash or rescue scenes
- Crime scenes

Scene Safety

- Park in a safe area.
- Speak with law enforcement first if present.
- The safety of you and your partner comes first!
- Next concern is the safety of patient(s) and bystanders.
- Request additional resources if needed to make scene safe.



Mechanism of Injury

- Helps determine the possible extent of injuries on trauma patients
- Evaluate:
 - Amount of force applied to body
 - Length of time force was applied
 - Area of the body involved

Nature of Illness

- Search for clues to determine the nature of illness.
- Often described by the patient's chief complaint
- Gather information from the patient and people on scene.
- Observe the scene.



The Importance of MOI/NOI

- Guides preparation for care to patient
- Suggests equipment that will be needed
- Prepares for further assessment
- Fundamentals of assessment are same whether emergency appears to be related to trauma or medical cause.



Number of Patients

- Determine the number of patients and their condition.
- Assess what additional resources will be needed.
- Triage to identify severity of each patient's condition.

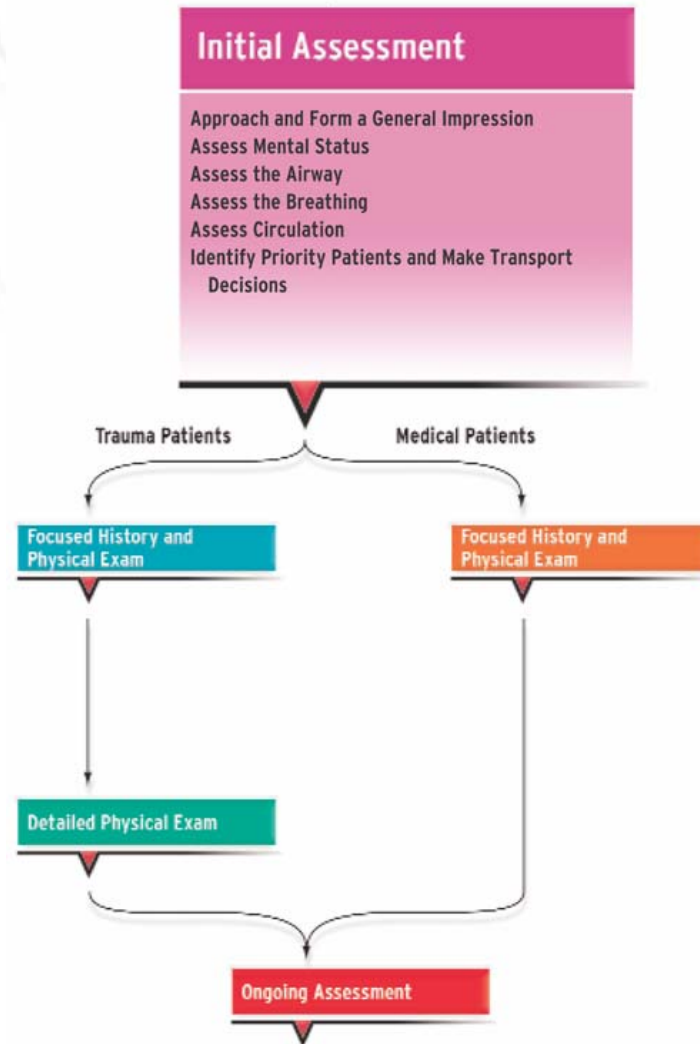
Additional Resources

- Medical resources
 - Additional units
 - Advanced life support
- Nonmedical resources
 - Fire suppression
 - Rescue
 - Law enforcement

C-Spine Immobilization

- Consider early during assessment.
- Do not move without immobilization.
- Err on the side of caution.

Patient Assessment Process



Initial Assessment

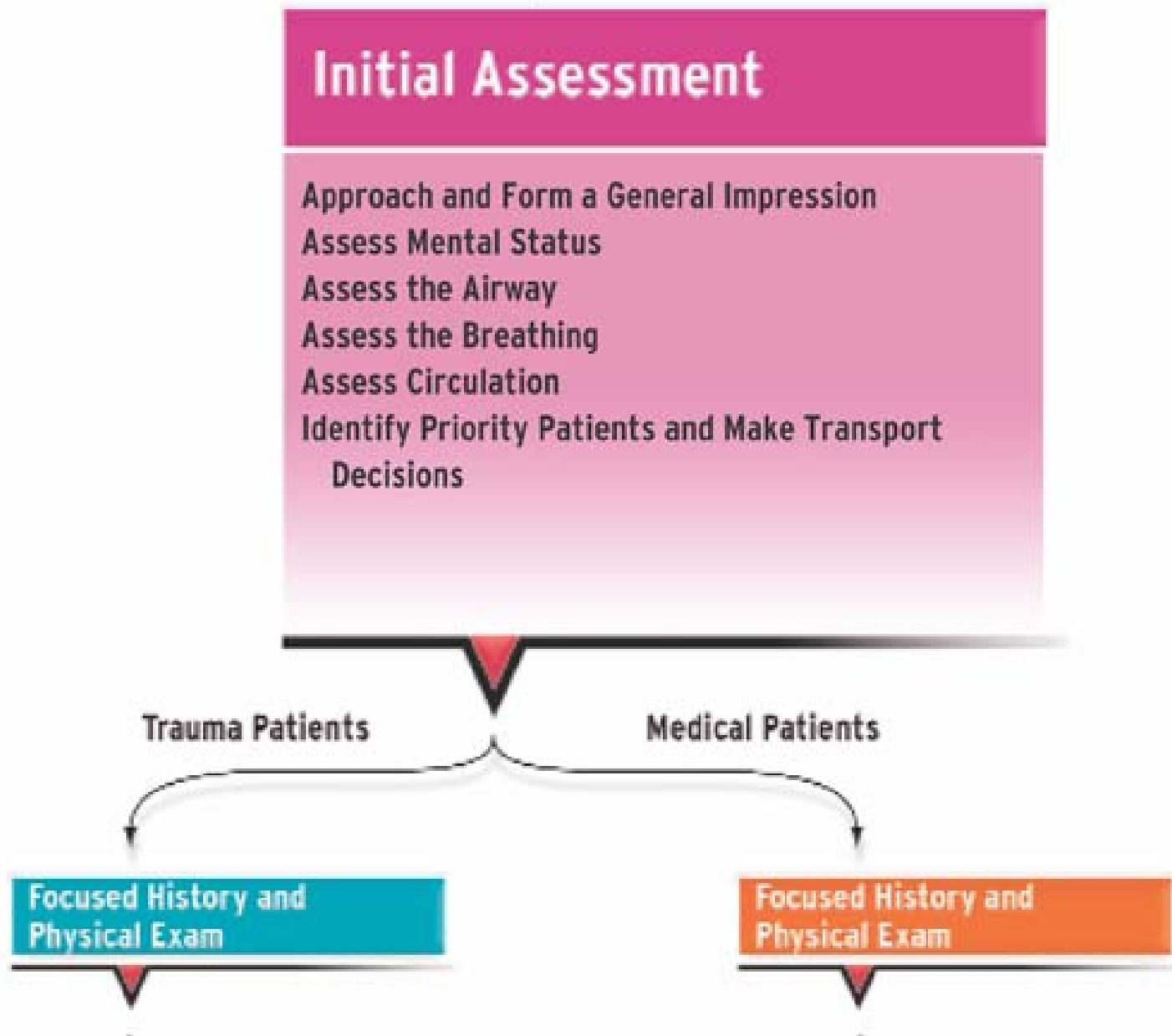
- Approach and Form a General Impression
- Assess Mental Status
- Assess the Airway
- Assess the Breathing
- Assess Circulation
- Identify Priority Patients and Make Transport Decisions

Trauma Patients

Medical Patients

Focused History and Physical Exam

Focused History and Physical Exam



Initial Assessment

Approach and Form a General Impression

Assess Mental Status

Assess the Airway

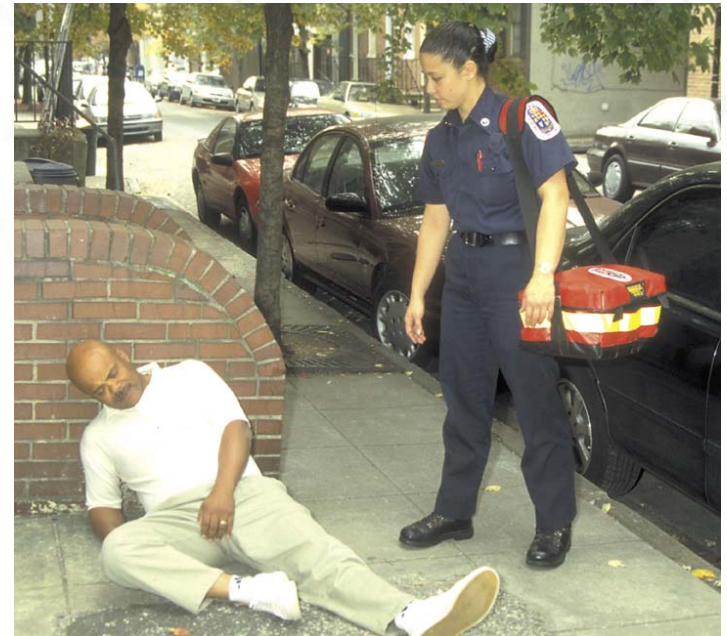
Assess the Breathing

Assess Circulation

**Identify Priority Patients and Make Transport
Decisions**

Initial Assessment

- Develop a general impression.
- Assess mental status.
- Assess airway.
- Assess the adequacy of breathing.
- Assess circulation.
- Identify patient priority.



Develop a General Impression

- Occurs as you approach the scene and the patient
 - Assessment of the environment
 - Patient's chief complaint
 - Presenting signs and symptoms of patient

Obtaining Consent

- **Introduce self and your level of certification**
- **Ask patient's name.**
- **Obtain consent.**



Chief Complaint

- Most serious problem voiced by the patient
- May not be the most significant problem present



Assessing Mental Status

- Responsiveness
 - How the patient responds to external stimuli
- Orientation
 - Mental status and thinking ability



Testing Responsiveness

- **A** Alert
- **V** Responsive to Verbal stimulus
- **P** Responsive to Pain
- **U** Unresponsive



Testing Orientation

- **Person**
- **Place**
- **Time**
- **Event**