

STATION # 6: Patient Assessment/Management Medical – Intermediate

TIME LIMIT – 20 Minutes **Start Time:** _____ **End Time:** _____ **Date:** _____

	Points Possible	Points Awarded																	
Takes, or verbalizes, body substance isolation precautions	1																		
SCENE SIZE-UP																			
Determines the scene is safe	1																		
Determines the mechanism of injury/nature of illness	1																		
Determines the number of patients	1																		
Requests additional help if necessary	1																		
Considers stabilization of the spine	1																		
INITIAL ASSESSMENT																			
Verbalizes general impression of the patient	1																		
Determines responsiveness/level of consciousness	1																		
Determines chief complaint/apparent life threats	1																		
Assesses airway and breathing	Assessment Indicates appropriate oxygen therapy assures adequate ventilation	1 1 1																	
Assesses circulation	Assesses/controls major bleeding Assesses pulse Assesses skin (color, temperature and condition)	1 1 1																	
Identifies priority patients/makes transport decisions	1																		
FOCUSED HISTORY AND PHYSICAL EXAMINATIONS/RAPID ASSESSMENT																			
Signs and symptoms (Assess history of present illness)	1																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 12.5%;">Respiratory</th> <th style="width: 12.5%;">Cardiac*</th> <th style="width: 12.5%;">Altered Mental Status</th> <th style="width: 12.5%;">Allergic Reaction</th> <th style="width: 12.5%;">Poisoning/Overdose</th> <th style="width: 12.5%;">Environmental Emergency</th> <th style="width: 12.5%;">Obstetrics</th> <th style="width: 12.5%;">Behavioral</th> </tr> </thead> <tbody> <tr> <td>*Onset? *Provokes? *Quality? *Radiates? *Severity? *Time? *Interventions?</td> <td>*Onset? *Provokes? *Quality? *Radiates? *Severity? *Time?*Interventions?</td> <td>*Description of the episode *Onset? *Duration *Associated Symptoms? *Evidence of Trauma? *Interventions? *Seizures? *Fever?</td> <td>*History of allergies? *What were you exposed to? *How were you exposed? *Effects? *Progression? *Interventions?</td> <td>*Substance? *When did you ingest/become exposed? *How much did you ingest? *Over what time period? *Interventions? *Estimated weight?</td> <td>*Source? *Environment? *Duration? *Loss of Consciousness? *Effects-general or local?</td> <td>*Are you pregnant? *How long have you been pregnant? *Pain or Contraction? *Bleeding or discharge? *Do you feel the need to push? *Last menstrual period?</td> <td>*How do you feel? *Determine suicidal tendencies *Is the patient a threat to self or others? *Is there a medical problem? *Interventions?</td> </tr> </tbody> </table>	Respiratory	Cardiac*	Altered Mental Status	Allergic Reaction	Poisoning/Overdose	Environmental Emergency	Obstetrics	Behavioral	*Onset? *Provokes? *Quality? *Radiates? *Severity? *Time? *Interventions?	*Onset? *Provokes? *Quality? *Radiates? *Severity? *Time?*Interventions?	*Description of the episode *Onset? *Duration *Associated Symptoms? *Evidence of Trauma? *Interventions? *Seizures? *Fever?	*History of allergies? *What were you exposed to? *How were you exposed? *Effects? *Progression? *Interventions?	*Substance? *When did you ingest/become exposed? *How much did you ingest? *Over what time period? *Interventions? *Estimated weight?	*Source? *Environment? *Duration? *Loss of Consciousness? *Effects-general or local?	*Are you pregnant? *How long have you been pregnant? *Pain or Contraction? *Bleeding or discharge? *Do you feel the need to push? *Last menstrual period?	*How do you feel? *Determine suicidal tendencies *Is the patient a threat to self or others? *Is there a medical problem? *Interventions?			
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Allergies	1																		
Medications	1																		
Past pertinent history	1																		
Last oral intake	1																		
Event leading to present illness (rule out trauma)	1																		
Performs focused physical examination (assesses affected body part/system or, if indicated, completes rapid assessment)	1																		
Vitals (obtains baseline vital signs)	1																		
Interventions (obtains medical direction or verbalized standing order for medication interventions and verbalizes proper additional interventions/treatment)	1																		
Transports (re-evaluates the transport decision)	1																		
Verbalizes the consideration for completing a detailed physical examinations	1																		
ONGOING ASSESSMENT (verbalized)																			
Repeats initial assessment	1																		

Repeats vital signs	1		
Repeats focused assessment regarding patient complaint or injuries	1		

Total: 30

Critical Criteria:

- _____ Did not take, or verbalize, body substance isolation precautions when necessary
- _____ Did not determine scene safety
- _____ Did not obtain medical direction or verbalize standing orders for medical intervention
- _____ Did not provide high concentration of oxygen
- _____ Did not find or manage problems associated with airway, breathing, hemorrhage or shock (hypoperfusion)
- _____ Did not differentiate patient's need for transportation versus continued assessment at the scene
- _____ Did detailed or focused history/physical examination before assessing the airway, breathing and circulation
- _____ Did not ask questions about the present illness
- _____ Administered a dangerous or inappropriate intervention

Passing = No Critical Criteria missed and a minimum of 21 points awarded.

Pass: _____ **Fail:** _____ **Examiner:** _____

(Exam Series INT assess medical – 05/08)