

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**SKILL PERFORMANCE EVALUATION**

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| **PATIENT ASSESSMENT & MANAGEMENT - MEDICAL** |

**PERFORMANCE OBJECTIVES**

Demonstrate competency in performing a complete medical assessment involving scene size-up, primary assessment, secondary assessment, physical examination, ongoing assessment, and perform life-threatening interventions as necessary. Assessment and management of life-threatening interventions must be completed within 10 minutes.

**EQUIPMENT**

Live model or manikin, oxygen tank with flow meter, oxygen tubing, BMV device, oxygen mask, nasal cannula, stethoscope, blood pressure cuff, pen light, timing device, clipboard, pen, goggles, masks, gown, gloves, airway bag.

**SCENARIO:** **□** Medical \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**□** Trauma \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fail

Pass

**EXAMINER(S):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Attempt: 1st 2nd 3rd (final)**

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|  | | | | | | | | |
| **Primary Assessment**  (Initial Assessment) | | | | | | | | |
| **Performance Criteria** | | | **YES** | **NO** | | **Comments** | | |
| Establishes appropriate BSI precautions | | |  |  | |  | | |
| **Scene Size-Up** | | | | | | | | |
| **Performance Criteria** | | | **YES** | **NO** | | **Comments** | | |
| Assesses scene: | | Personnel/patient safety |  |  | |  | | |
| Environmental hazards |  |  | |
| Number of patients |  |  | |
| Nature of illness |  |  | |
| Determines the need for: | | Additional resources |  |  | |  | | |
| Specialized equipment |  |  | |
| Additional BSI |  |  | |  | | |
| |  | | --- | | **PRIMARY ASSESSMENT**  **(Initial Assessment)** | | | | | | | | | |
| **Performance Criteria** | | | **YES** | **NO** | | **Comments** | |
| Formulates a general impression of the patient | | Stable |  |  | | Scenario dependent | | |
| Unstable |
| Establishes patient rapport: | | Introduces self to patient and/or family |  |  | |  | | |
| Determines preliminary  chief complaint |  |  | |  | | |
| Obtains permission to treat |  |  | |
| Assesses the mental status/stimulus response **(AVPU)** | | **A**lert |  |  | |  | | |
| **V**erbal |  |  | |
| **P**ainful (noxious) |  |  | |
| **U**nresponsive |  |  | |
| **IF UNRESPONSIVE GO TO CPR AND AED SKILLS** | | | | | | |
| **Performance Criteria** | | | **YES** | | **NO** | **Comments** |
| Explain the care being delivered to the patient | | |  | |  |  |
| Assesses the airway | Patent | |  | |  | Scenario dependent |
| Obstructed | |  | |  |
| Manages the airway and life threatening situations | Opens/clears the airway | |  | |  | Scenario dependent |
| Inserts an airway adjunct – *if indicated* | |  | |  |
| Transports immediately – *if unable to open the airway* | |  | |  |  |
| Determines if the airway is manageable vs. unmanageable | | |  | |  | Scenario dependent |
| Assesses the breathing | Rate | |  | |  |  |
| Rhythm | |  | |  |
| Quality | |  | |  |
| Depth | |  | |  |
| Rapid chest auscultation – if difficulty breathing, shortness of breath | |  | |  |
| Manages the breathing | Applies oxygen – *if indicated* | |  | |  | Scenario dependent |
| Delivers PPV – *if indicated* | |  | |  |
| States the indications for immediate application of high-flow oxygen | Respiratory Arrest | |  | |  |  |
| Cardiac Arrest | |
| Shock/Poor Perfusion | |
| Anaphylaxis | |
| Traumatic Brain Injury | |
| Carbon Monoxide Poisoning | |
| Suspected Pneumothorax | |
| Assesses the circulation **(COPS)** | **C**apillary refill | |  | |  |  |
| **O**bvious external bleeding | |  | |  |
| **P**ulse | |  | |  |
| **S**kin Color | |  | |  |
| Manages the circulation and life threatening situations | Places the patient in supine position – signs of hypo-perfusion | |  | |  | Scenario dependent |
| Immediate transport – *if indicated* | |  | |  |
| Observes for deformities and disabilities | Neurologic deficits | |  | |  | Scenario dependent |
| Abnormal body presentation | |  | |  |
| Exposes and visualizes the area associated with the preliminary chief complaint | | |  | |  |  |
| Forms a field impression | Manages life threatening situations | |  | |  | Scenario dependent if ALOC |
| If ALOC; obtains blood sugar | |  | |  |
| Determines the appropriate transport decision: | Level -ALS/BLS | |  | |  | Scenario dependent |
| Mode - Ground/Air | |  | |  |
| Destination – Appropriate facility | |  | |  |

|  |  |  |  |  |  |
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|  | | | | | |
| **Secondary Assessment** | | | | | |
| **Performance Criteria** | | | **YES** | **NO** | **Comments** |
| Assess the current chief complaint of the patient: | **S**igns/Symptoms | |  |  |  |
| **A**llergies | |  |  |
| **M**edications | |  |  |
| **P**ertinent history | |  |  |
| **L**ast oral intake | |  |  |
| **E**vent leading up to the injury | |  |  |
| Verbalizes the appropriate level of assessment | Rapid medical exam | |  |  |  |
| Focused medical exam of individual body part | |
| Performs detailed head to toe exam of each body region and assess **DCAP/BTLS TIC** | Head | |  |  |  |
| Neck | |
| Chest | Exam |
| Breath sounds |
| Abdomen | |
| Pelvis | |
| Lower extremities | |
| Upper extremities | |
| Back | |
|  | |
| Visualizes for: | |
|  |  | |  |  |  |
|  | **D**eformity | |  |  |  |
|  | **C**ontusions | |  |  |  |
|  | **A**brasions | |  |  |  |
|  | **P**enetrations/Punctures | |  |  |  |
|  | **B**urns/Bruises | |  |  |  |
|  | **T**enderness | |  |  |  |
|  | **L**acerations | |  |  |  |
|  | **S**welling/Scars | |  |  |  |
|  |  | |  |  |  |
|  | Palpates for: | |  |  |  |
|  |  | |  |  |  |
|  | **T**enderness | |  |  |  |
|  | **I**nstability | |  |  |  |
|  | **C**repitus | |  |  |  |
| Assesses the vital signs: | Blood Pressure (S/D) | |  |  |  |
| Pulse | |  |  |  |
| Respirations | |  |  |  |
| Skin Signs | |  |  |  |
| Pain Scale | |  |  |  |
| SpO2 reading | |  |  |  |
| Examines the neurological status | Determines a comprehensive orientation level (Orientation) | |  |  |  |
| Determines the GCS of the patient | |  |  |
| Evaluates the pupil status | |  |  |
| Performs a finger stick blood sugar check – *if indicated* | |  |  |

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| --- | --- | --- | --- | --- |
| **Performance Criteria** | | **YES** | **NO** | **Comments** |
| Assesses the vital signs | Blood Pressure |  |  |  |
| Pulse |  |  |  |
| Respirations |  |  |  |
| Skin Signs |  |  |  |
| Pain Scale |  |  |
| SpO2 reading |  |  |
| Examines neurological status: | Comprehensive orientation level (A &O x 3) |  |  | Scenario dependent |
| GCS (eyes, verbal, motor) |  |  |  |
| Evaluates the Pupils |  |  |  |
|  | Performs glucose check – *if indicated* |  |  | Scenario dependent if ALOC |
| Re-evaluates the transport decision | |  |  |  |
| Determines a primary and secondary “Provider Impression” | |  |  | Have pre-determined scenario and their PIs |

Developed 1/08: Revised 11/2018