

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

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

**SKILL PERFORMANCE EVALUATION**

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| --- |
| **PATIENT ASSESSMENT & MANAGEMENT - TRAUMA** |

**PERFORMANCE OBJECTIVES**

Demonstrate competency in performing a complete trauma 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, trauma bag, airway bag, SMR equipment, trauma bag, airway bag.

**SCENARIO:** **□** Trauma \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fail

Pass

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PREPARATION** | | | | |
| **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 |  |  |
| Mechanism of injury |  |  |
| Determines the need for: | Additional resources |  |  |  |
| Specialized equipment |  |  |
| Additional BSI |  |  |
| SMR |  |  |  |
| **PRIMARY 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** |
| Explains 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* | | |  | |  | |  |
| Determine if the airway is manageable vs, unmanageable | | | |  | |  | |  |
| Assesses the breathing | Rate | | |  | |  | | Scenario dependent |
| Rhythm | | |  | |  | |
| Quality | | |  | |  | |
| Depth | | |  | |  | |
| Performs rapid chest auscultation – if difficulty breathing, shortness of breath, or chest trauma | | |  | |  | |
| Manages the breathing | Applies oxygen – *if indicated* | | |  | |  | | Scenario dependent |
| PPV – *if indicated* | | |  | |  | |
| Transports immediately– *if unable to manage the airway* | | |  | |  | |  |
| State the indications for immediate high-flow oxygen administration: | 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- Too fast, slow, or absent | | |  | |  | |
| **S**kin – Color, temperature, and moisture | | |
| Manages circulation and life threatening situations: | Places the patient in supine position if hypo-perfusion is suspected | | |  | |  | | Scenario dependent |
| Controls external bleeding | | |  | |  | |
| Transports immediately– *if unable to manage the airway* | | |  | |  | |
| Observes for deformities and disabilities | Neurologic deficits | | |  | |  | | Scenario dependent |
| Abnormal body presentation | | |  | |  | |
| Exposes and visualizes the area associated with the preliminary chief complaint | | | |  | |  | |  |
| **Performance Criteria** | | | **YES** | | **NO** | | **Comments** | |
| Forms a field impression | Manages life threatening situations | |  | |  | | Scenario dependent | |
| If ALOC; obtains blood sugar | |  | |  | |
| Determines the appropriate transport decision: | Level -ALS/BLS | |  | |  | | Scenario dependent | |
| Mode - Ground/Air | |  | |  | |
| Destination – Appropriate facility | |  | |  | |
| **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 trauma exam | |  | |  | | Scenario dependent | |
| Focused trauma exam of individual body part | |  | |  | |
| Performs detailed head to toe exam of each body region and assess **DCAP/BTLS TIC** | Head | |  | |  | | Have the students list each of the body regions  Have the students list the components of DCAP BTLS TIC | |
| 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 | |  | |  | |  | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Performance Criteria** | | | **YES** | | **NO** | **Comments** | |
| Assesses the vital signs: | Blood Pressure (S/D) |  | |  | |  |
| Pulse |  | |  | |  |
| Respirations |  | |  | |
| Skin Signs |  | |  | |
| Pain Scale |  | |  | |
| SpO2 reading |  | |  | |
| Examines neurological status: | Determines the comprehensive orientation level (person, place, time, or event |  | |  | |  |
| GCS (eyes, verbal, motor) |  | |  | |  |
| Pupils |  | |  | |  |
|  | Perform glucose check - *if indicated* |  | |  | | Scenario dependent if ALOC |
| Re-evaluates the transport decision | |  | |  | |  |
| Determines the “Provider Impression” | |  | |  | | Have pre-determined scenario and their PIs |

Developed 1/08: Revised 11/2018