

Scene Size-Up

Scene Safety

Do Not Become A Patient

General Impression

MOI or NOI

Obstacles/Extrication

Determine number of patients

Standard Precautions

Introduction/Consent

Radio Call: (I Will Advise?)

Give Location

Equipment and Patroller Needs?

Primary Assessment

(ABCDE's) and Radio Call

Stop Bleeding (XABC in EMS)

Chief Complaint (Treat later)

Medical History

Airway

Breathing

Circulation

Disability (Head/Neurological)

Monitor LOR X 4

AVPU, Glasgow Coma Scale

Shock, Stroke, Diabetes

Examine Chief Complaint

Expose

CMS

Medical History (Previous Secondary)

SAMPLE

OPQRST

* Second Radio Call if Needed

Secondary Assessment

Physical Exam

Full Body - Head to Toe

DCAP-BTLS

Bracelets

Expose and CMS

Reassessment and Transport

Treat and Interventions

Ongoing Re-Assessments

Manage the Scene

Monitor Vitals

Collect/Annotate Info

Communicate with Patient

Proper Transport Method

Be Courteous

Calm Patient

Reassure Patient and Family

Respect Family

Be Confident

Follow Your Training Steps

Give Directions

Keep Detailed Records

Clear Radio Communications

Move Quickly

Is This a Pack and Go?

Ongoing Assessments

Vitals, Vitals, Vitals

Monitor and Reassess

Unstable: 3-5 min.

Stable: 10-15 min.

Breath and Think

Assume Multiple Injuries

Glasgow Coma Scale

Motor

6 - Obeys commands

5 - Localizes to stimuli

4 - Withdraws for stimuli

3 - Abnormal flexion

2 - Extensor response

1 - No response

Verbal Response

5 - Alert and oriented

4 - Confused yet coherent

3 - Inappropriate words

2 - Incomprehensible sounds

1 - No sounds

Eye Opening

4 - Spontaneous eye opening

3 - Eyes open to speech

2 - Eyes open to pain

1 - No eye opening

Radio Calls

Location

Ambulance?

Sex, Age, Place, Vitals

Equipment (O₂)

Patrollers

Family/Contact Info

Destination and ETA

AVPU

A - Alert

V - Verbal

P - Pain

U - Unresponsive

SAMPLE

S - Signs and Symptoms

A - Allergies

M - Medications

P - Past Medical History

L - Last Oral Intake

E - Events Leading Up To...

OPQRST

O - Onset

P - Provoking Factors

Q - Quality

R - Radiation

S - Severity

T - Time

DCAP-BTLS

D - Deformities

C - Contusions

A - Abrasions

P - Punctures

B - Burns/Bleeding

T - Tenderness

L - Lacerations

S - Swelling

PERRL

P - Pupils

E - Equal

R - Round

R - Reactive (to)

L - Light

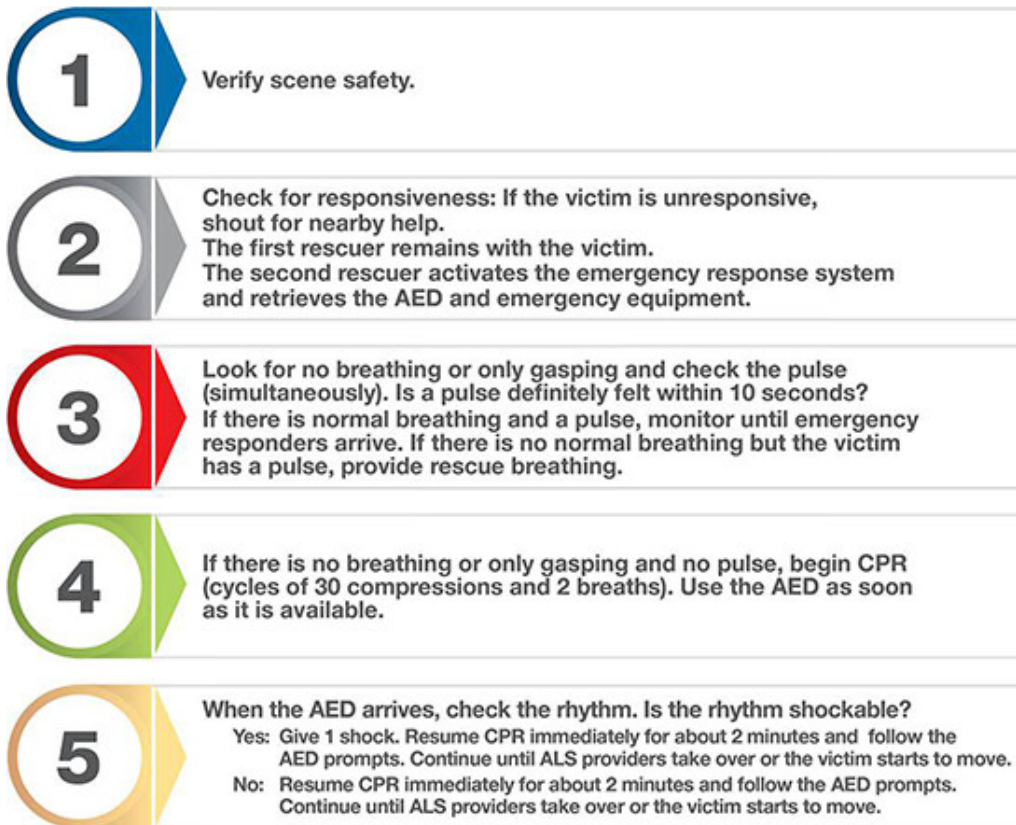
Check - Call - Care

Be Professional

Be Appropriate

No Short Cuts

No Hiding - Act



This Is What We Do

Assessment

Treatment

Packaging

Shipping

1. Scene Size-Up

2. Primary Assessment

3. Secondary Assessment

You will be nervous

Stop, collect yourself, breathe, think

Practice - Practice - Practice

Follow Your Training!

Professionalism

Service

Respect

Courtesy

We Are There!

Radio Calls and Top Shack/Dispatch

Radio Étiquette

Equipment Needs (O₂?)

Ambulance Needs

Sex, Age, Place, Vitals

General Situation

Patrol Needs

Contact/Family/Group Information

Where are you going? ETA

Continuing Care

Vitals: Stable 10-15, Unstable 3-5

Annotate, Keep detailed notes

Follow your training Steps

Be courteous

Reassure patient and family

Give directions - Patrollers will support

Move Efficiently

Is this a "Pack and Go?"

Talk - Debrief with Other Patrollers and Your Hill Captain
Complete The Incident Report and Mobile/Online Forms Accurately
Support Your Team of Patrollers