**SCENE SIZE-UP**

* **BSI / Scene Safety**
* **NOI / MOI**
* **Number of Patients**
* **Consider Resources**
	+ **ALS can be considered later, also consider, police, PEPCO, manpower, etc.**
* **Consider C-Spine**
	+ **Direct Partner (if needed)**

**PRIMARY ASSESSMENT (Should be done within about 30 seconds)**

* **General Impression**
	+ **Should be a question: “what is my general impression?”**
* **LOC and AVPU**
* **ABC or CAB (ABC for conscious, CAB for unconscious)**
* **Airway**
	+ **Open Airway (head tilt vs jaw thrust)**
	+ **Suction as necessary**
	+ **Airway adjunct as necessary (snoring or gurgling respirations)**
* **Breathing**
	+ **Rate and quality**
	+ **Consider 02**
		- **Ventilate for slow or rapid respirations**
		- **NC or NRB for SOB or TB**
* **Circulation**
	+ **Pulse rate and quality**
	+ **Skin**
* **Priority**

**Secondary Assessment (Rapid vs Focused)**

* **Rapid**
	+ **Head, scalp**
	+ **Eyes**
		- **Pearl?**
	+ **Cheeks**
	+ **Nose**
	+ **Jaw and Mouth**
		- **Reevaluate Airway adjunct**
		- **Also check for teeth, fluid, foreign objects, tongue for obstructions**
	+ **Neck**
		- **JVD**
		- **Trachea Deviation**
		- **Stoma**
		- **Medical Alert Tags**
	+ **Clavicles**
		- **Intact? Apply C-Collar here**
	+ **Sternum**
	+ **Chest**
		- **Equal rise and fall?**
		- **Ribs?
		Breath Sounds (6 total)**
	+ **Flanks**
	+ **Abdomen**
		- **4 Quadrants**
		- **Rigidity, Tenderness, guarding, Bruising?**
	+ **Pelvis**
		- **Pubis**
		- **1) In**
		- **2) Down**
	+ **Lower Extremities**
	+ **Feet**
		- **PMS (stabilize foot when assessing PMS)**
	+ **Upper extremities**
	+ **Log Roll to uninjured Side (if applicable)**
		- **Assess back, lower extremities**
		- **Assess for BUFF**
	+ **SAMPLE – OPQRST**
	+ **Vitals**
* **Ongoing**
	+ **Detailed Assessment**
	+ **Repeat Vitals**
	+ **Check interventions**

**Vitals**

* **BP, HR, RR, Sp02,**
	+ **Also consider: Skin, Eyes, Glucose**

**Abbreviations**

* **Sample**
	+ **Signs/Symptoms**
	+ **Allergies**
	+ **Medical History**
	+ **Pertinent Past History**
	+ **Last Oral Intake**
	+ **Events Leading up**
* **OPQRST**
	+ **Onset (what were you doing)**
	+ **Provocation (Anything make it better or worse?)
	Quality (describe)**
	+ **Radiating (spreading?)**
	+ **Severity (Number 1-10)**
	+ **Time (when did it start?)**
* **DCAP-BTLS**
	+ **Deformities**
	+ **Contusions**
	+ **Abrasions**
	+ **Punctures/Penetrations**
	+ **Burns**
	+ **Tenderness**
	+ **Lacerations**
	+ **Swelling**