

PATIENT ASSESSMENT OBSERVATION



Rescuers:

Observer:

Start Time:

End Time:

Total Time:

✓		Comments	✓		Comments
SCENE SIZE-UP			PATIENT HISTORY		
Scene Safety			Age		
MOI/HPI			Sex		
BSI			Chief Complaint		
# of Patients			Symptoms		
General Impression			Onset		
Intro & Consent			Provoke/Palliate		
Control Head			Quality		
INITIAL ASSESSMENT			Radiate/Region/Refer		
Airway			Severity		
Breathing			Time/Trend		
Circulation			Allergies		
Decision about Spine			Medications		
Expose Chief Complaint			Past & Pertinent Med Hx.		
PHYSICAL EXAM			Last Ins & Outs		
Head/Face			Events		
Neck/Throat			FOCUSED SPINE ASSESSMENT		
Clavicles & Shoulders			LOR		
Ribs & Lungs			Sober		
Abdomen			Distraction		
Pelvis			CSM's x4		
Legs & Feet			Spine Pain/Tenderness		
CSM: Feet			TREATMENTS		
Arms & Hands			Usability Assessment		
CSM: Hands			Appropriate Splint		
Spine & Back			Medical Treatment		
VITAL SIGNS			SOAP NOTE		
Level of Responsiveness			Summary or Subjective		
Heart Rate			Observation or Objective		
Respiratory Rate			Assessment		
Skin Color/Temp/Moisture			Plan		
Pupils			Anything else?		
Blood Pressure			COMMENTS		
Temperature					
SpO2					
Lung Sounds					

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