



NON-URBAN EMERGENCY CARE 1 & 2 PRACTICAL SCENARIO CHECKLIST

STUDENT	SCENARIO #	DATE	<input type="checkbox"/> -FORMATIVE <input type="checkbox"/> -SUMMATIVE <input type="checkbox"/> -COMPLETE <input type="checkbox"/> -INCOMPLETE
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SCENE SIZE-UP (<i>Scene Stable / Unstable?</i>)		CPI	SQ	NOTES
H	<input type="checkbox"/> -Hazards	☒		
E	<input type="checkbox"/> -Environment / Climate <input type="checkbox"/> -Entry / Exit <input type="checkbox"/> -Equipment			
M	<input type="checkbox"/> -MOI <input type="checkbox"/> -NOI <input type="checkbox"/> -Witness? (Hold if Necessary)	☒		
P	<input type="checkbox"/> -Number & LOR of all Patient(s)			
B	<input type="checkbox"/> -BSI <input type="checkbox"/> -PPE	☒		
C	<input type="checkbox"/> -Condition of Patient(s) Skin (Visual): <input type="checkbox"/> -PWD / <input type="checkbox"/> -LLS			
	<input type="checkbox"/> -Spinal Injury Determination: <input type="checkbox"/> -Instruct Pt. not to Move <input type="checkbox"/> -Provide Manual Stabilization	☒		
	<input type="checkbox"/> -Backup Request: <input type="checkbox"/> - Notify EMS or Local Emergency Response (patrol)	☒		
	<input type="checkbox"/> -Scene Decision: <input type="checkbox"/> -Stable / <input type="checkbox"/> -Unstable <input type="checkbox"/> -Patient Decision: <input type="checkbox"/> -Unstable			

INITIAL ASSESSMENT (<i>Patient Stable / Unstable?</i>)		CPI	SQ	NOTES
<input type="checkbox"/> -Level of Responsiveness – A V P U				
A	<input type="checkbox"/> -Assess Effectiveness <input type="checkbox"/> -Chin Lift <input type="checkbox"/> -Jaw-Thrust <input type="checkbox"/> -OPA <input type="checkbox"/> -3/4 Prone	☒		
B	<input type="checkbox"/> -Assess Effectiveness <input type="checkbox"/> -Investigate Distress <input type="checkbox"/> -Assist Ventilations <input type="checkbox"/> -Admin Oxygen	☒		
C	<input type="checkbox"/> -Assess Pulses <input type="checkbox"/> -Control Bleeding:	☒		
	<input type="checkbox"/> -Skin: <input type="checkbox"/> -Temperature <input type="checkbox"/> -Texture <input type="checkbox"/> -Condition			
	<input type="checkbox"/> -Rapid Body Survey: <input type="checkbox"/> -Under Clothing <input type="checkbox"/> -Medical Alerts	☒		
	<input type="checkbox"/> -Critical Interventions: <input type="checkbox"/> -Maintain Body Temperature <input type="checkbox"/> -SMR	☒		
	<input type="checkbox"/> -Patient Decision: <input type="checkbox"/> -Unstable			

SECONDARY ASSESSMENT		CPI	SQ	NOTES
<input type="checkbox"/> -History: <input type="checkbox"/> -S <input type="checkbox"/> -A <input type="checkbox"/> -M <input type="checkbox"/> -P <input type="checkbox"/> -L <input type="checkbox"/> -E				
<input type="checkbox"/> -Vital Signs: <input type="checkbox"/> -LOR <input type="checkbox"/> -Resp. <input type="checkbox"/> -Pulse <input type="checkbox"/> -Skin: Temp / Texture / Condition <input type="checkbox"/> -Eyes (PERL)		☒		
<input type="checkbox"/> -Detailed Physical Examination				
<input type="checkbox"/> -Patient Decision: <input type="checkbox"/> -CTC / <input type="checkbox"/> -STC				
<input type="checkbox"/> -Record & Document				
COMM:	<input type="checkbox"/> -AGE & SEX <input type="checkbox"/> -MOI / NOI <input type="checkbox"/> -ENTRY / EXIT <input type="checkbox"/> -EMS <input type="checkbox"/> -C/C <input type="checkbox"/> -CTC / STC <input type="checkbox"/> -# OF PT.S <input type="checkbox"/> -T-BOG / LITTER / VAC MATT / WHEELCHAIR <input type="checkbox"/> -LOR <input type="checkbox"/> -LOCATION <input type="checkbox"/> -RESPONDERS <input type="checkbox"/> -TRAUMA KIT / OXYGEN / AED			

TREATMENTS		CPI	SQ	NOTES
<input type="checkbox"/> -Bleeding Management: <input type="checkbox"/> -Direct Pressure <input type="checkbox"/> -Pressure Dressing <input type="checkbox"/> -Tourniquet <input type="checkbox"/> -Splinting		☒		
<input type="checkbox"/> -Spinal Management: <input type="checkbox"/> -Primary Stabilization		☒		
<input type="checkbox"/> -Fracture Management: <input type="checkbox"/> -CMS <input type="checkbox"/> -Splinting <input type="checkbox"/> -Stabilization				
<input type="checkbox"/> -Shock Management: <input type="checkbox"/> -Maintain Body Warmth <input type="checkbox"/> -Supine Positioning <input type="checkbox"/> -Admin Oxygen		☒		
<input type="checkbox"/> -Diabetes Management: <input type="checkbox"/> -3/4 Prone <input type="checkbox"/> -Suction <input type="checkbox"/> -Glucose ('dime-sized' – dependant cheek)		☒		
<input type="checkbox"/> -Anaphylaxis Management: <input type="checkbox"/> -Complete Checklist <input type="checkbox"/> -Follow EpiPen/Diphenhydramine Protocol		☒		

ON-GOING ASSESSMENT	CPI	SQ	NOTES
<input type="checkbox"/> -On-going Re-Assessment of LOR, ABC's			
<input type="checkbox"/> - V/S – Continual Observation, Record Every 10 min (<i>Unstable</i>) or 15 min (<i>Stable</i>)	☠		2° _____ 3° _____
<input type="checkbox"/> -On-going Communication with Patient & EMS/SAR if necessary			

MANAGEMENT SKILLS EVALUATION / PEAK USE ONLY

Decision Making:	<input type="checkbox"/> -Problem Assessment	<input type="checkbox"/> -Appropriate Prioritization	<input type="checkbox"/> -Ensures Overall Safety
Problem Mgmt:	<input type="checkbox"/> -Action Plan	<input type="checkbox"/> -Anticipation	<input type="checkbox"/> -Resource Mgmt. <input type="checkbox"/> -NUEC 1/2 Skill Performance <input type="checkbox"/> -Transportation
Leadership:	<input type="checkbox"/> -Attitude	<input type="checkbox"/> -Ability to Direct	<input type="checkbox"/> -Confidence <input type="checkbox"/> -Team Interaction

DEBRIEF NOTES

DEBRIEFING QUESTIONS

1. How do you think you and your team did overall on the scenario?
2. In retrospect, are there things that you would have liked to have done differently during the scenario?
3. Are you prepared to receive feedback regarding the scenario?

KEY

¼ Prone	A patient position intended to protect their airway from vomit; <i>aka</i> - Recovery Position	OPA	Oropharyngeal Airway – a device that is inserted into the mouth of an unresponsive patient to prevent the tongue from obstructing the airway
BSI	Body Substance Isolation – the practice of isolating all bodily substances from patients to responders in order to prevent disease transmission	PERL	Pupils Equal & Reactive to Light
CC	The symptoms of about which the patient is concerned; generally primary complaint	PWD	Pink Warm Dry – a PEAK term to describe the skin condition of a patient whose skin is pink, warm and dry; <i>aka</i> normal skin presentation – healthy in appearance
CPI	Critical Performance Indicator – a required skill &/or action the must be performed	SAMPLE	An acronym used to obtain a patient’s medical history information during a patient assessment; S=Signs & Symptoms, A=Allergies, M=Medications, P=Past Medical History, L=Last Oral Intake, E=Events Leading up to Incident
CTC	Critical Transport Category – a PEAK term to describe a patient who is seriously ill or injured; CTC is highest priority patient classification	SAR	Search & Rescue
EMS	Emergency Medical Services	SMR	Spinal Motion Restriction – maintaining the spine in anatomic alignment and minimizing gross movement
Litter	A device used to move an ill or injured patient; <i>aka</i> – stretcher	SQ	Sequence – the order in which a skill &/or action was performed
LLS	Looks Like Shock (or Shit) – a PEAK term to describe the skin condition of a patient who is pale, cool and clammy – shock like	STC	Standard Transport Category – a PEAK term to describe a patient who is not seriously ill or injured; STC is a lower priority patient classification than CTC
MOI	Mechanism of Injury – a term used to describe how the kind of force that acts on the body to cause injury; the method of trauma causing injury	Vac Matt	A vacuum mattress-like device that is used to restrict spinal movement in a patient
NOI	Nature of Illness – evaluation to determine the type of medical illness present		