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| **MINIMUM EQUIPMENT** |
| EMS equipment and supplies | Airway kit, Medical/Trauma kit, Monitor, stretcher, handheld radios if available |
| Props | Live patient; Rubber Knife; Imitation Blood |
| Medical Identification jewelry | --- |
| **SETUP INSTRUCTIONS** |
| * Chair with patient sitting down
* Floor Pad
* Ensure IV arms other props are in the room
* After 1 min. music and fighting stops-Law Enforcement removes remaining patrons, making scene safe
 |
| **BACKGROUND INFORMATION**  |
| EMS System description  | ALS vehicle from Hospital based EMS service-10 minutes from Hospital with ED and X-ray/Lab services. 2 additional units available. 1 hour from Trauma Center-No Aircraft transport available due to weather |
| Other personnel needed (define personnel and identify who can serve in each role) | Law Enforcement- Fire Dept. with EMRs. Two other ALS units available in county with 12 minute response time.  |
| **MOULAGE INFORMATION**  |
| Integumentary | Anterior Right Shoulder Stab Wound. Blood on hands. Pale and slightly diaphoretic. |
| Head | --- |
| Chest | --- |
| Abdomen  | --- |
| Pelvis | --- |
| Back | --- |
| Extremities | ---  |
| Age  | 65 year old |
| Weight | 202 lbs. |

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| **DISPATCH INFORMATION** (Specific script for each scenario; Must be read over radio, telephone or in such a way that the candidate cannot look at the Examiner as he/she reads the dispatch information) |
| Dispatch time | 2210 |
| Location | Teddy Bears Tavern |
| Nature of the call | Trauma call; Geriatric |
| Weather | Rain/Wind |
| Personnel on the scene | Law Enforcement- Fire with EMR capabilities-Paramedic partner |

**READ TO TEAM LEADER**: Medic 69 respond to 91 East 3rd street for stabbing victim.

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| **SCENE SURVEY INFORMATION** |
| A scene or safety consideration that must be addressed | Fight still in progress when EMS arrives-Law Enforcement is removing other patrons, after 1 minute scene is safe. |
| Patient location  | Tavern |
| Visual appearance | 65 y/o sitting in chair with knife sticking out of right anterior shoulder. Bleeding from cuts on both hands. |
| Age, sex, weight | 65 year old, male, 202 lbs. |
| Immediate surroundings (bystanders, significant others present) | Paramedic partner; Law Enforcement; Fire Dept.; patrons being removed by LE; Patient very confused  |
| Mechanism of injury/Nature of illness | Stab wound to Right Anterior shoulder. |

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| **PRIMARY ASSESSMENT** |
| General impression | Penetrating Trauma. Altered Mentation |
| Baseline mental status  | Confused, alert but deteriorating |
| Airway | Patent |
| Ventilation | Normal |
| Circulation | Strong peripheral pulses. Cap refill < 3 seconds |
| **HISTORY** (if applicable) |
| Chief complaint | Shoulder Pain-Confusion |
| History of present illness | Stabbed during a bar fight. Minor lacerations on hands |
| Patient responses, associated symptoms, pertinent negatives | Aware of pain, Not aware or time, place, or situation |
| **PAST MEDICAL HISTORY** |
| Illnesses/Injuries | Type II Diabetes. HTN |
| Medications and allergies | Lantus ® |
| Current health status/Immunizations (Consider past travel) | --- |
| Social/Family concerns | Divorced-Lives with girlfriend |
| Medical identification jewelry | --- |
| **EXAMINATION FINDINGS** |
| Initial Vital Signs | BP: 100/70 P:110R: 18 Pain:8 on 10 scaleTemperature: normalGCS: Eye-5-Verbal-3-Motor-4= 12 |
| HEENT | --- |
| Respiratory/Chest | --- |
| Cardiovascular | --- |
| Gastrointestinal/Abdomen | --- |
| Genitourinary | --- |
| Musculoskeletal/Extremities | --- |
| Neurologic | Awake but slow to respond to question-Unfamiliar with surroundings  |
| Integumentary | --- |
| Hematologic | --- |
| Immunologic | --- |
| Endocrine | --- |
| Psychiatric | Past mental history |
| Additional diagnostic tests as necessary | Oxygen Saturations 94%, ECG- Sinus Tach, CBG 38 |

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| **PATIENT MANAGEMENT** |
| Initial stabilization/ Interventions/Treatments  | * Stabilize Knife in Place
* Continue 02
* Obtain pulse ox reading
* Cardiac Monitoring
* Stop bleeding and bandage minor lacerations
* Consider D50/Oral Glucose
 |
| Additional Resources  | --- |
| Patient response to interventions | After administration of oral glucose or D50, pt. becomes more alert and oriented; Bleeding controlled |
| **EVENT** |
| After loading pt. in unit, an irate patron starts hitting on back doors of unit demanding to see pt. (If using actual ambulance in scenario)  |
| **REASSESSMENT** |
| Appropriate management  | BP: 128/88 P: 100R: 18 Pain:8 on 10 scaleResponsiveness improves, able to answer most questions, but still slightly confused.  |
| Inappropriate management  | BP: 100/70 P: 100R: 18 Pain: UnsureIf no treatment with glucose within 5 min, decreasing LOC till non-responsive. |

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| **TRANSPORT DECISION:**  Transport to most appropriate medical facility.  |