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| **MINIMUM EQUIPMENT** |
| EMS equipment and supplies | 1st in bag, oxygen cylinder and supplies, ECG monitor |
| Props | Emesis bag with tea stained fluid and coffee grounds  |
| Medical Identification jewelry | ---  |
| **SETUP INSTRUCTIONS** |
| * Identify the level of the detail of the scene that we expect
* Ensure IV arms other props are in the room
* Minimum expectation of how props will be used
 |
| **BACKGROUND INFORMATION**  |
| EMS System description  | ALS vehicle  |
| Other personnel needed (define personnel and identify who can serve in each role) | Spouse or other family member.  |
| **MOULAGE INFORMATION**  |
| Integumentary | Pale color, light color make-up |
| Head | --- |
| Chest | ---  |
| Abdomen  | ---  |
| Pelvis | ---  |
| Back | ---  |
| Extremities | ---  |
| Age  | 65 year old |
| Weight | 126 kg (280 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 | 1830 |
| Location | Rural private residence |
| Nature of the call | Medical, Adult |
| Weather | Clear, warm, humid |
| Personnel on the scene | EMT-P partner |

**READ TO TEAM LEADER**: Medic 4 respond to 123 Any Street for a male complaining of abdominal pain, time out 1830.

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| **SCENE SURVEY INFORMATION** |
| A scene or safety consideration that must be addressed | Family dog is not detained. |
| Patient location  | Living room |
| Visual appearance | Pale, alert to verbal but mild lethargy |
| Age, sex, weight | 65, male, 126kg (280 lbs.) |
| Immediate surroundings (bystanders, significant others present) | Cool temperature controlled room, spouse present |
| Mechanism of injury/Nature of illness | Weakness, Nausea, vomiting |

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| **PRIMARY ASSESSMENT** |
| General impression |  General weakness, pale color, nauseated |
| Baseline mental status  |  Alert (name, place, date, events) but with mild lethargy.  |
| Airway |  Patent/clear |
| Ventilation |  Shallow, tachypnea but adequate  |
| Circulation |  Skin is pale, cool, clammy: peripheral pulse weak and tachycardia  |
| **HISTORY** (if applicable) |
| Chief complaint | Weakness, nausea, vomiting |
| History of present illness | Weakness upon waking at 0600, N/V 1500 hrs. following exertion in heat |
| Patient responses, associated symptoms, pertinent negatives | Slow to respond but informative of all events and current illness, does not feel that EMS is needed for current condition |
| **PAST MEDICAL HISTORY** |
| Illnesses/Injuries | HTN, diabetic |
| Medications and allergies | Metformin, metoprolol; NKDA |
| Current health status/Immunizations (Consider past travel) | ---  |
| Social/Family concerns | ---  |
| Medical identification jewelry | ---  |
| **EXAMINATION FINDINGS** |
| Initial Vital Signs | BP: 90/50 P: 100R: 26 Pain: Temperature: 97GCS: Total 14 (E 03; V 05 M 06)  |
| HEENT | Normal |
| Respiratory/Chest | Normal/symmetrical lung sounds |
| Cardiovascular | Normal heart tones  |
| Gastrointestinal/Abdomen | Distended, soft, mild discomfort upon palpation to upper midline region |
| Genitourinary | ---  |
| Musculoskeletal/Extremities | ---  |
| Neurologic | ---  |
| Integumentary | Pale, cool, clammy |
| Hematologic | ---  |
| Immunologic | ---  |
| Endocrine | ---  |
| Psychiatric | ---  |
| Additional diagnostic tests as necessary | SpO2 – 92%, EtCO2- 46 mm HG; ECG, 12-lead ECG - BGL determination, orthostatic assessment is remarkable for 10mmHg decrease  |

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| **PATIENT MANAGEMENT** |
| Initial stabilization/ Interventions/Treatments  | No trauma * Oxygen- NRB based on
* 20 ml/kg fluid bolus
* Antiemetic
* cover body
* transport supine
* **Post Event:**
 |
| Additional Resources  |  personnel for lift assist |
| Patient response to interventions |  resolved lethargy, improved BP, and circulation |
| **EVENT** |
| Pt vomits during assessment followed by syncope lasting <20 seconds.  |
| **REASSESSMENT** |
| Appropriate management  | BP: 100/60 P: 100R: 22SpO2- 95% Pain: 0List improving vital signs and reassessment findings |
| Inappropriate management  | BP: 80/40 P: 110R: 34SpO2- 90% Pain: 0List deteriorating vital signs and reassessment findings |

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| **TRANSPORT DECISION:**  Team Leader should verbalize transport decision, reason for choosing the facility, and describe the appropriate transportation mode.  |