

Communications & Documentation

SBAT	GRIEV_ING	CHART	SOAP	SAFR
Situation	Gather	Chief Complaint / Concern	Subjective	Search
Background	Resources	History	Objective	Alert
Assessment	Identify	Assess-ments	Assessment	File
Treatment	Educate	Rx (Treat-ments)	Plan	Reconcile
	Verify	Transport		
	Space			
	Inquire			
	Nuts & Bolts			
	Give			

Patient Assessment

AVPU	SAMPLE	OPQRST	DCAP-BTLS	GEMS
Awake and alert	Signs and symptoms	Onset	Deformity	Geriatric Patients
Responsive to <i>verbal</i> stimuli	Allergies	Provocation/palliation	Contusions	Environmental Assessment
Responsive to <i>pain</i>	Medications	Quality	Abrasions	Medical Assessment
Unresponsive	Pertinent past medical history	Region/radiation	Punctures	Social Assessment
	Last known	Severity	Burns	
	Events leading up to injury/illness	Timing	Tenderness	
			Lacerations	
			Swelling	

Toxicology

SLUDGEM	DUMBELS
Salivation, sweating	Diarrhea
Lacrimation (excessive tearing of eyes)	Urination
Urination	Miosis (constriction of pupils), muscle weakness
Defecation, drooling, diarrhea	Bradycardia, bronchospasm, bronchorrhea (discharge of mucus from lungs)
Gastic upset & cramps	Emesis (vomiting)
Emesis (vomiting)	Lacrimation (excessive tearing of eyes)
Muscle twitching, myosis (pinpoint pupils)	Seizures, salivation, sweating

Neurologic Emergencies

AEIOU TIPS

Alcohol
Epilepsy, Endocrine, Electrolytes
Insulin
Opioids & Other Drugs
Uremia (Kidney Failure)
Tramua, Temperature
Infection
Poisoning, Psychogenic Causes
Shock, Stroke, Seizure, Syncope, Space-Occupying Lesion, Subarachnoid Hemorrhage

Vehicle Extrication & Special Rescue

FAILURE

Failure to understand the environment or underestimating it
Additional medical problems not considered
Inadequate rescue skills
Lack of teamwork or experience
Underestimating the logistics of the incident
Rescue versus recovery mode not considered
Equipment not mastered



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Team Approach to Healthcare

PACE

Probe

Alert

Challenge

Emergency

Medical Overview

4Ms Framework

What *Matters*

Medication

Mentation

Mobility

Trauma

MARCH

Massive hemorrhage

Airway

Respirations

Circulation

Head injury, hypothermia

Airway & Ventilation Management

BE MAGIC

Perform *bag-mask* preoxygenation

Evaluate for airway difficulties

Manipulate the patient

Attempt first-pass intubation

Use a supra*Glottic* airway if unable to intubate

Confirm successful intubation / *Correct* any issues

Respiratory Emergencies

PASTE

Progression

Associated Chest Pain

Sputum

Talking Tiredness

Exercise Tolerance

Soft Tissue Injuries

RICES

Rest

Ice

Compression

Elevation

Splinting

Obstetrics & Neonatal Care

APGAR

Appearance

Pulse

Grimace or Irritability

Activity or Muscle Tone

Respirations

Patients with Special Challenges

DOPE

Displa-
cement

CHILD ABUSE

Consistency of
the injury with
the child's
developmental
age

TEN 4 FACES p

TEN bruising on torso, ears, or neck

Obstru-
ction

History incons-
istent with
injury

4 bruising anywhere on infant 4
months old or younger

Pneumo-
thorax

Inappropriate
parental
concerns

FACES bruising on frenulum (narrow
strip of tissue that joins upper lip to
gums), angle of the jaw, cheeks,
eyelids, or subconjunctivae

Equipment

Lack of
supervision

p patterned bruising such as belt,
hand, or other tool marks

Delay in seeking care

Affect (body language)

Bruises of varying ages

Unusual injury patterns

Suspicious circumstances

Environmental clues



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