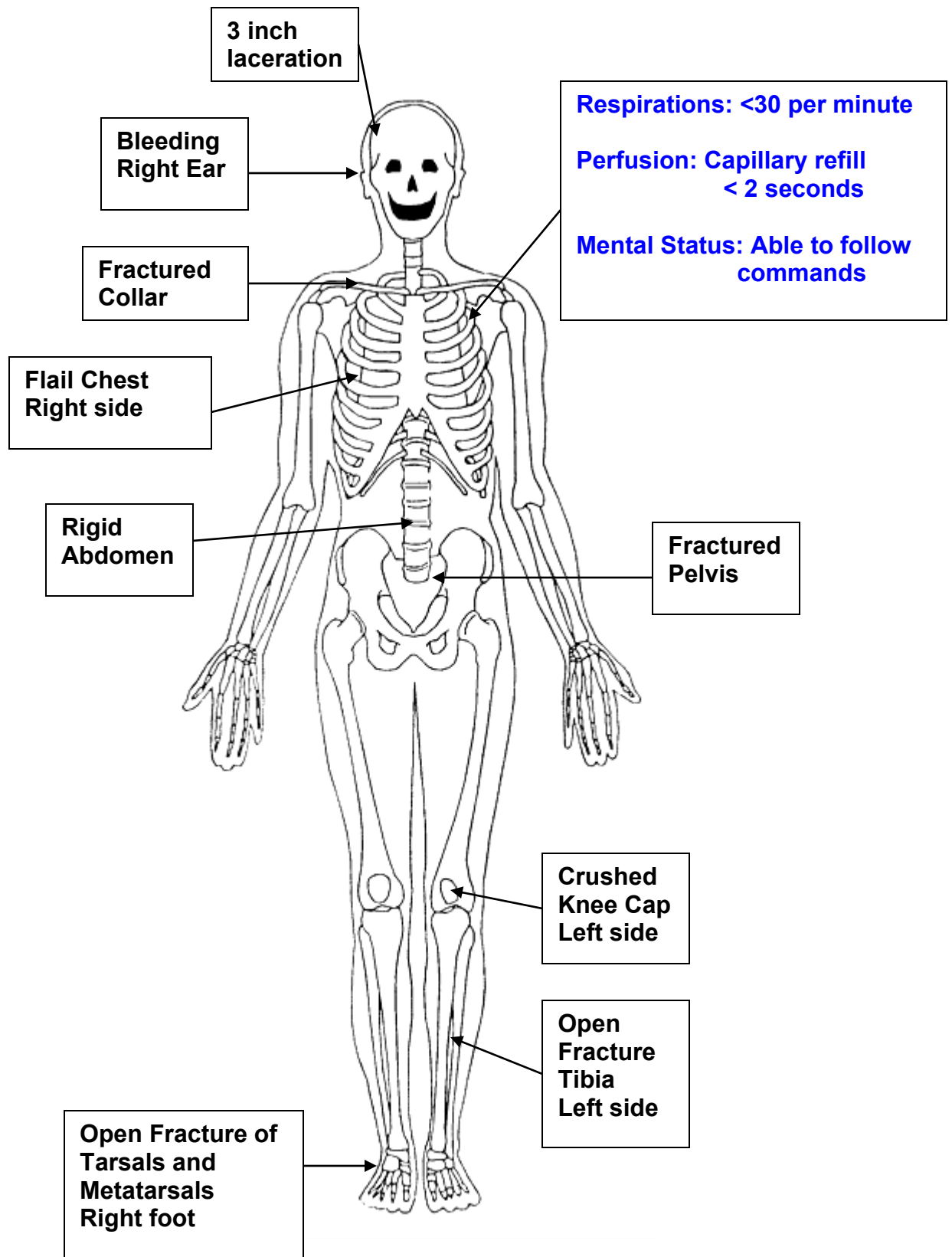


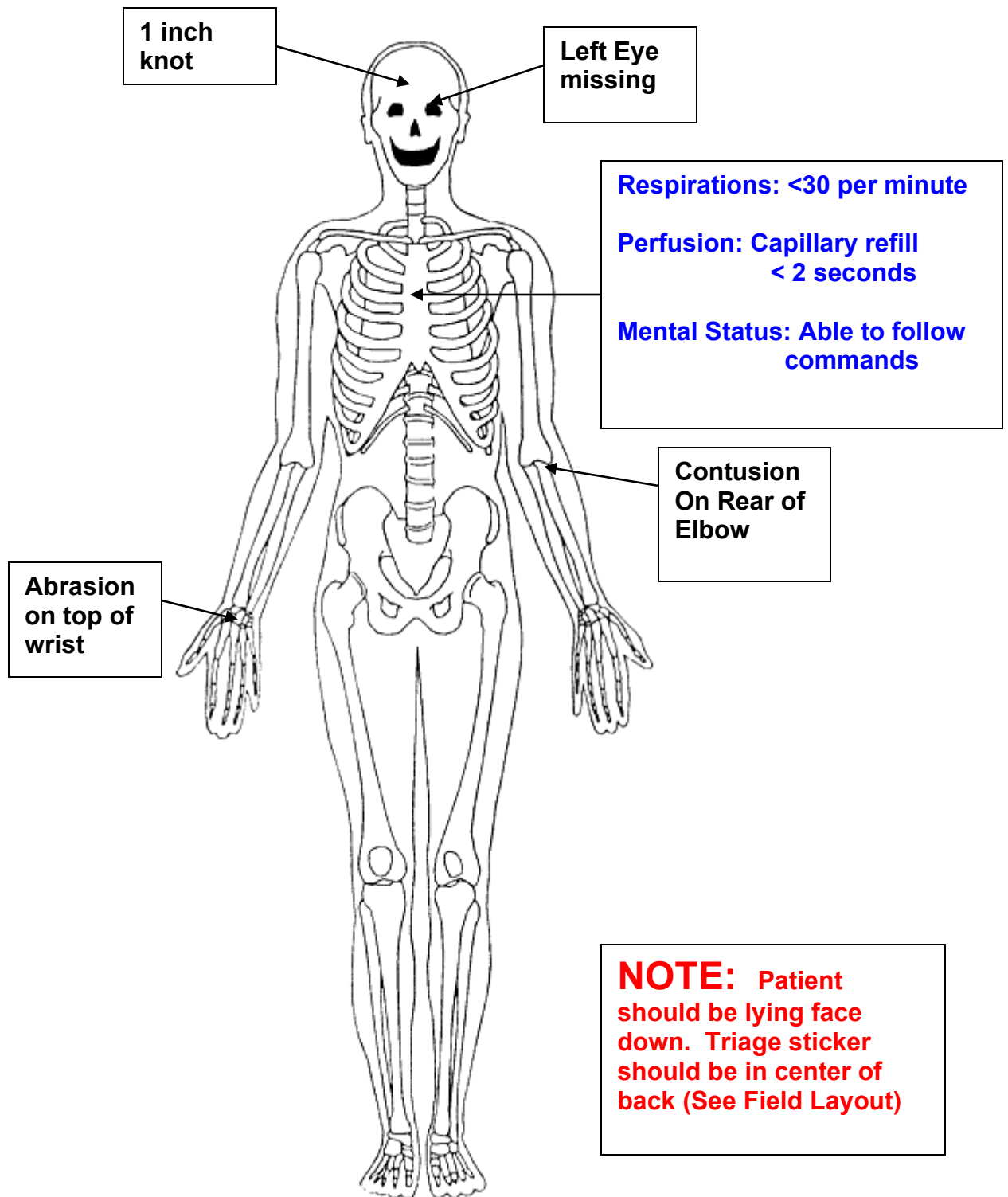
**COVE LAKE
FIRST AID
PROBLEM
2012**

FIELD LAY OUT

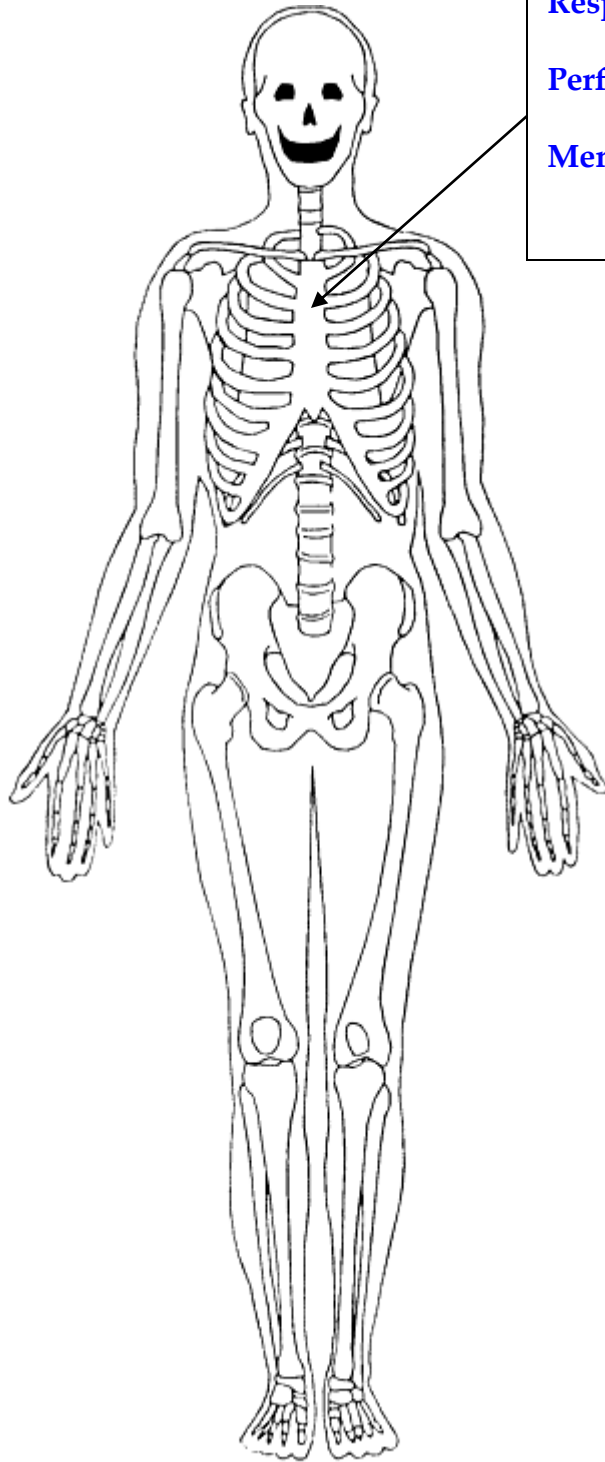
Paul



Homer



Jess



Respirations: Absent

Perfusion: Absent

Mental Status: Absent

LIST OF INJURIES

Paul

**3 inch Laceration right temple
Bleeding right ear
Fractured Collar Bone right side
Flail Chest right side
Rigid Abdomen
Fractured Pelvis
Crushed Knee Cap left side
Open Fracture Tibia left side
Open Fractured Tarsals and Metarsals right foot**

Respirations: <30 per minute

**Perfusion: Capillary refill
< 2 seconds**

**Mental Status: Able to follow
commands**

Homer

**1 inch knot on forehead
Eye missing Left
Abrasion left wrist
Contusion right elbow**

Respirations: <30 per minute

**Perfusion: Capillary refill
< 2 seconds**

**Mental Status: Able to follow
commands**

Jess

**No Breathing
No Pulse**

Respirations: Absent

Perfusion: Absent

Mental Status: Absent

It's 6:00 a.m. on Tuesday morning, you and a two man crew are waiting for the elevator. The elevator is dropping in three men to pre-shift for the dayshift crew. You hear a loud crashing noise and feel a rush of air. The elevator door opens and you see three men lying on the floor. Please triage, call out the condition of each, then treat and transport the injured to the proper authority on the surface. A slope car is available near your location to transport the injured to the surface.

INITIAL ASSESSMENT

PROCEDURES		CRITICAL SKILL
1. SCENE SIZE UP	<input type="checkbox"/> <input type="checkbox"/>	*A. Observe area to ensure safety *B. Call for help
2. MECHANISM OF INJURY	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Determine causes of injury, if possible *B. Triage: Immediate, Delayed, Minor or Deceased. *C. Ask patient (if conscious) what happened

Paul - DELAYED

Respirations: <30 per minute

Perfusion: Capillary refill
< 2 seconds

Mental Status: Able to follow
commands

Homer – DELAYED

Respirations: <30 per minute

Perfusion: Capillary refill
< 2 seconds

Mental Status: Able to follow
commands

Jess – DECEASED

Respirations: Absent

Perfusion: Absent

Mental Status: Absent

TEAMS MUST NOW CALL OUT THE CONDITION OF EACH PATIENT.

TEAMS MAY TREAT EITHER PAUL OR HOMER FIRST

PAUL

1. INITIAL ASSESSMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>*A. Verbalize general impression of the patient(s)</p> <p>*B. Determine responsiveness/level of consciousness (AVPU) Alert, Verbal, Painful, Unresponsive</p> <p>*C. Determine chief complaint/apparent life threat</p>
2. ASSESS AIRWAY AND BREATHING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Correctly execute head-tilt/chin-lift or jaw thrust maneuver, depending on the presence of cervical spine (neck) injuries</p> <p>B. Look for absence of breathing (no chest rise and fall) or gasping, which are not considered adequate (within 10 seconds)</p> <p>C. If present, treat sucking chest wound</p>
3. ASSESS FOR CIRCULATION	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Check for presence of a carotid pulse (5-10 seconds)</p> <p>B. If present, control life threatening bleeding</p> <p>C. Start treatment for all other life threatening injuries/conditions (reference Rule 2).</p>

CONTINUE TO PATIENT ASSESSMENT

PATIENT ASSESSMENT

PROCEDURES	CRITICAL SKILL
1. HEAD	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <p>*A. Check head for DOTS: Deformities, Open wounds, Tenderness and Swelling</p> <p>*B. Check and touch the scalp</p> <p>*C. Check the face</p>

3 inch laceration

DRESSINGS AND BANDAGING - OPEN WOUNDS

PROCEDURES	CRITICAL SKILL
1. EMERGENCY CARE FOR AN OPEN WOUND	<input type="checkbox"/> *A. Control bleeding <input type="checkbox"/> *B. Prevent further contamination <input type="checkbox"/> *C. Bandage dressing in place after bleeding has been controlled <input type="checkbox"/> *D. Keep patient lying still
2. APPLY DRESSING	<input type="checkbox"/> A. Use sterile dressing <input type="checkbox"/> B. Cover entire wound <input type="checkbox"/> C. Control bleeding <input type="checkbox"/> D. Do not remove dressing
3. APPLY BANDAGE	<input type="checkbox"/> A. Do not bandage too tightly. <input type="checkbox"/> B. Do not bandage too loosely. <input type="checkbox"/> C. Do not leave loose ends. <input type="checkbox"/> D. Cover all edges of dressing. <input type="checkbox"/> E. Do not cover tips of fingers and toes, unless they are injured. <input type="checkbox"/> F. Bandage from the bottom of the limb to the top (distal to proximal) if applicable.

CONTINUE PATIENT ASSESSMENT

PROCEDURES	CRITICAL SKILL
2. HEAD	<input type="checkbox"/> *D. Check the ears for bleeding or clear fluids

RIGHT EAR BLEEDING; NO TREATMENT

CONTINUE PATIENT ASSESSMENT

PROCEDURES

CRITICAL SKILL

<p>3. HEAD</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>*E. Check the eyes for any discoloration, unequal pupils, reaction to light, foreign objects and bleeding</p> <p>*F. Check the nose for any bleeding or drainage</p> <p>*G. Check the mouth for loose or broken teeth, foreign objects, swelling or injury of tongue, unusual breath odor and discoloration</p>
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CONTINUE PATIENT ASSESSMENT

<p>4. NECK</p>	<input type="checkbox"/> <input type="checkbox"/>	<p>*A. Check the neck for DOTS</p> <p>*B. Inspect for medical ID</p>
<p>5. CHEST</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>*A. Check chest area for DOTS</p> <p>*B. Feel chest for equal breathing movement on both sides</p> <p>*C. Feel chest for inward movement in the rib areas during inhalations</p>

FRACTURED COLLAR BONE

SPLINTING (RIGID) UPPER EXTREMITY FRACTURES AND DISLOCATIONS

PROCEDURES

CRITICAL SKILL

<p>1. CARE FOR FRACTURE</p>	<input type="checkbox"/>	<p>*A. Check for distal circulation, sensation, and motor function</p> <ul style="list-style-type: none"> ▪ Do not attempt to reduce dislocations (if applies)
<p>2. IMMOBILIZING FRACTURE</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Selection of appropriate rigid splint of proper length</p> <p>B. Support affected limb and limit movement</p> <p>C. Apply appropriate padded rigid splint against injured extremity</p> <p>D. Place appropriate roller bandage in hand to</p>

	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>ensure the position of function</p> <p>E. Secure splint to patient with roller bandage, handkerchiefs, cravats, or cloth strips</p> <p>F. Apply wrap distal to proximal</p> <p>*G. Reassess distal circulation, sensation, and motor function</p>
3. SECURING WITH SLING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Place sling over chest and under arm</p> <p>B. Hold or stabilize arm</p> <p>C. Triangle should extend behind elbow on injured side</p> <p>D. Pull sling around neck and tie on uninjured side</p> <p>E. Pad at the neck (except when C-Collar is present)</p> <p>F. Secure excess material at elbow</p> <p>G. Fingertips should be exposed</p> <p>*H. Reassess distal circulation, sensation, and motor function</p>
4. SECURING SLING WITH SWATHE	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Use triangle cravat or factory swathe</p> <p>B. Swathe is tied around chest and injured arm</p> <p>*C. Reassess distal circulation, sensation, and motor function</p>

COLLAR BONE

Support and limit movement of affected area
 Follow Procedures No. 1, No. 3 and No. 4 above

FLAIL CHEST

SPLINTING - FLAIL CHEST

PROCEDURES		CRITICAL SKILL
1. DETERMINE NEED FOR SPLINTING	<input type="checkbox"/> <input type="checkbox"/>	<p>*A. Assess for:</p> <ul style="list-style-type: none"> • Pain • Swelling • Deformity <p>*B. Determine if splinting is warranted</p>
2. SELECT APPROPRIATE SPLINTING MATERIAL	<input type="checkbox"/>	<p>A. Choose a pillow, blanket, trauma dressing, or other appropriate splinting material</p>

3. PREPARE FOR SPLINTING	<input type="checkbox"/> <input type="checkbox"/>	*A. Remove or cut away clothing as needed. B. Cover any open wounds with sterile dressing and bandage
4. APPLY SPLINT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Affix splint to chest with adhesive tape or roller bandage B. Immobilize the site of injury C. Use caution when taping splint to chest circumferentially *D. Ensure sufficient chest expansion
5. REASSESS	<input type="checkbox"/>	*A. Assess patient response and level of comfort
6. ASSIST VENTILATIONS	<input type="checkbox"/>	*A. Assist with ventilation as needed

CONTINUE PATIENT ASSESSMENT

6. ABDOMEN	<input type="checkbox"/>	*A. Check abdomen (stomach) for DOTS
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RIGID ABDOMEN; NO TREATMENT

CONTINUE PATIENT ASSESSMENT

7. PELVIS	<input type="checkbox"/> <input type="checkbox"/>	*A. Check pelvis for DOTS *B. Inspect pelvis for injury by touch (Verbally state inspection of crotch and buttocks areas)
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FRACTURED PELVIS

SPLINTING (RIGID OR SOFT) PELVIC GIRDLE, THIGH, KNEE, AND LOWER LEG

PROCEDURE		CRITICAL SKILL
1. DETERMINE NEED FOR SPLINTING	<input type="checkbox"/> <input type="checkbox"/>	*A. Assess for: <ul style="list-style-type: none"> ▪ Pain ▪ Swelling ▪ Deformity B. Determine if splinting is warranted
2. APPLY MANUAL STABILIZATION	<input type="checkbox"/>	A. Support affected limb and limit movement <ul style="list-style-type: none"> ▪ Do not attempt to reduce dislocations
3. SELECT APPROPRIATE SPLINT	<input type="checkbox"/> <input type="checkbox"/>	A. Select appropriate splinting method depending on position of extremity and materials available B. Select appropriate padding material
4. PREPARE FOR SPLINTING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Remove or cut away clothing as needed *B. Assess distal circulation, sensation, and motor function C. Cover any open wounds with sterile dressing and bandage D. Measure splint E. Pad around splint for patient comfort

CONTINUE PATIENT ASSESSMENT

8. LEGS	L	R	
	<input type="checkbox"/>	<input type="checkbox"/>	*A. Check each leg for DOTS
	<input type="checkbox"/>	<input type="checkbox"/>	B. Inspect legs for injury by touch
	<input type="checkbox"/>	<input type="checkbox"/>	C. Unresponsive: Check legs for paralysis (pinch inner side of leg on calf)
	<input type="checkbox"/>	<input type="checkbox"/>	*D. Responsive: Check legs for motion; places hand on bottom of each foot and states "Can you push against my hand?"
	<input type="checkbox"/>	<input type="checkbox"/>	*E. Check for medical ID bracelet

CRUSHED KNEE CAP

SPLINTING (RIGID OR SOFT) PELVIC GIRDLE, THIGH, KNEE, AND LOWER LEG

PROCEDURE	CRITICAL SKILL	
7. DETERMINE NEED FOR SPLINTING	<input type="checkbox"/>	*C. Assess for: <ul style="list-style-type: none"> ▪ Pain ▪ Swelling ▪ Deformity
	<input type="checkbox"/>	C. Determine if splinting is warranted
8. APPLY MANUAL STABILIZATION	<input type="checkbox"/>	B. Support affected limb and limit movement <ul style="list-style-type: none"> ▪ Do not attempt to reduce dislocations
9. SELECT APPROPRIATE SPLINT	<input type="checkbox"/>	C. Select appropriate splinting method depending on position of extremity and materials available
	<input type="checkbox"/>	D. Select appropriate padding material
10. PREPARE FOR SPLINTING	<input type="checkbox"/>	B. Remove or cut away clothing as needed
	<input type="checkbox"/>	*D. Assess distal circulation, sensation, and motor function
	<input type="checkbox"/>	F. Cover any open wounds with sterile dressing and bandage
	<input type="checkbox"/>	G. Measure splint
	<input type="checkbox"/>	H. Pad around splint for patient comfort

OPEN FRACTURED TARSAALS AND METATARSALS

DRESSINGS AND BANDAGING - OPEN WOUNDS

PROCEDURES	CRITICAL SKILL
4. EMERGENCY CARE FOR AN OPEN WOUND	<input type="checkbox"/> *E. Control bleeding <input type="checkbox"/> *F. Prevent further contamination <input type="checkbox"/> *G. Bandage dressing in place after bleeding has been controlled <input type="checkbox"/> *H. Keep patient lying still
5. APPLY DRESSING	<input type="checkbox"/> E. Use sterile dressing <input type="checkbox"/> F. Cover entire wound <input type="checkbox"/> G. Control bleeding <input type="checkbox"/> H. Do not remove dressing
6. APPLY BANDAGE	<input type="checkbox"/> G. Do not bandage too tightly. <input type="checkbox"/> H. Do not bandage too loosely. <input type="checkbox"/> I. Do not leave loose ends. <input type="checkbox"/> J. Cover all edges of dressing. <input type="checkbox"/> K. Do not cover tips of fingers and toes, unless they are injured. <input type="checkbox"/> L. Bandage from the bottom of the limb to the top (distal to proximal) if applicable.

SPLINTING (SOFT) LOWER EXTREMITY FRACTURES AND DISLOCATIONS (ANKLE AND FOOT)

PROCEDURES	CRITICAL SKILL
1. CARE FOR FRACTURE	<input type="checkbox"/> *A. Assess for distal circulation, sensation, and motor function <input type="checkbox"/> B. Do not attempt to reduce dislocations (if applies)

2. IMMOBILIZING FRACTURE	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Support affected limb and limit movement B. Place three cravats (triangular bandage) under ankle/foot C. Place pillow length wise under ankle/foot, on top of cravats (pillow should extend 6 inches beyond foot) D. Lower limb, adjust cravats to tie E. Tie cravats distal to proximal F. Elevate with blanket or pillow *G. Reassess distal circulation, sensation, and motor function
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CONTINUE PATIENT ASSESSMENT

9. ARMS	L <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	R <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check each arm for DOTS B. Inspect arms for injury by touch C. Unresponsive: Check arms for paralysis (pinch inner side of wrist) *D. Responsive: Check arms for motion (in a conscious patient; team places fingers in each hand of patient and states "Can you squeeze my fingers?") *E. Check for medical ID bracelet
10. BACK SURFACES	<input type="checkbox"/>		*A. Check back for DOTS

TREAT FOR SHOCK

SHOCK

PROCEDURES	CRITICAL SKILL	
1. CHECK FOR SIGNS AND SYMPTOMS OF SHOCK	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*A. Check for pale (or bluish) skin (in victim with dark skin examine inside of mouth and nailbeds for bluish coloration. *B. Check for cool, clammy skin *C. Check for weakness

2. TREATMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A. Keep victim lying down B. Cover with blanket to prevent loss of body heat and place a blanket under the patient. (Do not try to place blanket under patient with possible spinal injuries) C. Elevate according to injury *D. Reassure and calm the patient
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Option 2: Lay the patient flat, face up. This is the supine position, used for patients with a spinal injury and patients who have serious injuries to the extremities that have not been supported. If the patient is placed in this position, you must constantly be prepared for vomiting.

Note: Injuries requiring the injured side to be tilted or placed down may be done after patient has been properly secured to a back board if a back board is required.

PLACE PATIENT ON A LONG SPINE BOARD

IMMOBILIZATION - LONG SPINE BOARD (Backboard)

PROCEDURES	CRITICAL SKILL
1. MOVE THE PATIENT ONTO THE LONG SPINE BOARD	<ul style="list-style-type: none"> <input type="checkbox"/> A. One First Aid Provider at the head must maintain in-line immobilization of the head and spine <input type="checkbox"/> B. First Aid Provider at the head directs the movement of the patient <input type="checkbox"/> C. Other First Aid Provider control movement of the rest of body <input type="checkbox"/> D. Other First Aid Provider position themselves on same side <input type="checkbox"/> E. Upon command of First Aid Provider at the head, roll patient onto side toward First Aid Providers <input type="checkbox"/> F. Quickly assess posterior body, if not already done <input type="checkbox"/> G. Place long spine board next to the patient with top of board beyond top of head <input type="checkbox"/> H. Place patient onto the board at command of the First Aid Provider at head while holding in-line immobilization using methods to limit spinal movement <input type="checkbox"/> I. Slide patient into proper position using smooth coordinated moves keeping spine in alignment
2. PAD VOIDS BETWEEN PATIENT AND LONG SPINE BOARD	<ul style="list-style-type: none"> <input type="checkbox"/> A. Select and use appropriate padding <input type="checkbox"/> B. Place padding as needed under the head <input type="checkbox"/> C. Place padding as needed under torso
3. IMMOBILIZE BODY TO THE LONG SPINE BOARD	<ul style="list-style-type: none"> <input type="checkbox"/> A. Strap and secure body to board ensuring spinal immobilization, beginning at shoulder and working toward feet
4. IMMOBILIZE HEAD TO THE LONG SPINE BOARD	<ul style="list-style-type: none"> <input type="checkbox"/> A. Using head set or place rolled towels on each side of head <input type="checkbox"/> B. Tape and/or strap head securely to board, ensuring cervical spine immobilization
5. REASSESS	<ul style="list-style-type: none"> <input type="checkbox"/> *A. Reassess distal circulation, sensation, and motor function <input type="checkbox"/> *B. Assess patient response and level of comfort

TEAM MUST LIFT PATIENT TO TRANSPORT

HOMER

1. INITIAL ASSESSMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>*A. Verbalize general impression of the patient(s)</p> <p>*B. Determine responsiveness/level of consciousness (AVPU) Alert, Verbal, Painful, Unresponsive</p> <p>*C. Determine chief complaint/apparent life threat</p>
2. ASSESS AIRWAY AND BREATHING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Correctly execute head-tilt/chin-lift or jaw thrust maneuver, depending on the presence of cervical spine (neck) injuries</p> <p>B. Look for absence of breathing (no chest rise and fall) or gasping, which are not considered adequate (within 10 seconds)</p> <p>C. If present, treat sucking chest wound</p>
3. ASSESS FOR CIRCULATION	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>A. Check for presence of a carotid pulse (5-10 seconds)</p> <p>B. If present, control life threatening bleeding</p> <p>C. Start treatment for all other life threatening injuries/conditions (reference Rule 2).</p>

PATIENT ASSESSMENT

PROCEDURES	CRITICAL SKILL
1. HEAD	<input type="checkbox"/> *A. Check head for DOTS: Deformities, Open wounds, Tenderness and Swelling <input type="checkbox"/> *B. Check and touch the scalp <input type="checkbox"/> *C. Check the face <input type="checkbox"/> *D. Check the ears for bleeding or clear fluids <input type="checkbox"/> *E. Check the eyes for any discoloration, unequal pupils, reaction to light, foreign objects and bleeding <input type="checkbox"/> *F. Check the nose for any bleeding or drainage <input type="checkbox"/> *G. Check the mouth for loose or broken teeth, foreign objects, swelling or injury of tongue, unusual breath odor and discoloration

1 INCH KNOT ON FOREHEAD; NO TREATMENT

EYE MISSING;

DRESSINGS AND BANDAGING - OPEN WOUNDS

PROCEDURES		CRITICAL SKILL
7. EMERGENCY CARE FOR AN OPEN WOUND	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*I. Control bleeding *J. Prevent further contamination *K. Bandage dressing in place after bleeding has been controlled *L. Keep patient lying still
8. APPLY DRESSING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	I. Use sterile dressing J. Cover entire wound K. Control bleeding L. Do not remove dressing
9. APPLY BANDAGE	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	M. Do not bandage too tightly. N. Do not bandage too loosely. O. Do not leave loose ends. P. Cover all edges of dressing. Q. Do not cover tips of fingers and toes, unless they are injured. R. Bandage from the bottom of the limb to the top (distal to proximal) if applicable.

- *1. Wrap in slightly moistened sterile dressing
- 2. Place in plastic bag or wrap in plastic
- *3. Keep part cool avoid freezing
- *4. Do not place in water or direct contact with ice
- *5. Transport with patient
- 6. Label with patients name

CONTINUE ASSESSMENT

2. NECK	<input type="checkbox"/> <input type="checkbox"/>	*A. Check the neck for DOTS *B. Inspect for medical ID
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3. CHEST	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<p>*A. Check chest area for DOTS</p> <p>*B. Feel chest for equal breathing movement on both sides</p> <p>*C. Feel chest for inward movement in the rib areas during inhalations</p>												
4. ABDOMEN	<input type="checkbox"/>	*A. Check abdomen (stomach) for DOTS												
5. PELVIS	<input type="checkbox"/> <input type="checkbox"/>	<p>*A. Check pelvis for DOTS</p> <p>*B. Inspect pelvis for injury by touch (Verbally state inspection of crotch and buttocks areas)</p>												
6. LEGS	<table border="1"> <tr> <td>L</td> <td>R</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	L	R	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>*A. Check each leg for DOTS</p> <p>B. Inspect legs for injury by touch</p> <p>C. Unresponsive: Check legs for paralysis (pinch inner side of leg on calf)</p> <p>*D. Responsive: Check legs for motion; places hand on bottom of each foot and states "Can you push against my hand?"</p> <p>*E. Check for medical ID bracelet</p>
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<input type="checkbox"/>	<input type="checkbox"/>													
<input type="checkbox"/>	<input type="checkbox"/>													
<input type="checkbox"/>	<input type="checkbox"/>													

CONTUSION RIGHT ELBOW; NO TREATMENT

CONTINUE ASSESSMENT

8. BACK SURFACES	<input type="checkbox"/>	*A. Check back for DOTS
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SHOCK

PROCEDURES		CRITICAL SKILL
3. CHECK FOR SIGNS AND SYMPTOMS OF SHOCK	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	*E. Check for pale (or bluish) skin (in victim with dark skin examine inside of mouth and nailbeds for bluish coloration. *F. Check for cool, clammy skin *G. Check for weakness
4. TREATMENT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	D. Keep victim lying down E. Cover with blanket to prevent loss of body heat and place a blanket under the patient. (Do not try to place blanket under patient with possible spinal injuries) F. Elevate according to injury *H. Reassure and calm the patient

ENVELOPE #1: HOMER REFUSES TO BE TRANSPORTED.

JESS; COVER