Chapter 10
Initial Assessment

Overview
- General Impression of the Patient
- Assessing the Patient’s Mental Status
- Assessing the Patient’s Airway Status
- Assessing the Patient’s Breathing
- Assessing the Patient’s Circulation
  - Pulse
  - Major Bleeding
  - Perfusion
- Identifying Priority Patients

General Impression of the Patient
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- Formed to determine priority of care and is based on the EMT-Basic’s immediate assessment of the environment and the patient’s chief complaint.

Slide 4

General Impression of the Patient

- Determine if ill or injured
  - Age
  - Sex
  - Race

Slide 5

General Impression of the Patient

- The general impression is an opportunity to get the “big picture.”

Slide 6
General Impression of the Patient

- Assess patient and determine if the patient has a life-threatening condition
- If a life-threatening condition is found, treat immediately

*Life-threatening conditions primarily involve a compromise to airway, breathing, or circulation.*

Assessing the Patient’s Mental Status

- Maintain spinal immobilization if needed
- Begin by speaking to the patient
  - State your name, tell the patient that you are an emergency medical technician, and explain that you are here to help
  - Evaluate the patient’s response
Assessing the Patient’s Mental Status

- Levels of mental status
  - A – Alert
  - V – Responds to Verbal stimuli
  - P – Responds to Painful stimuli
  - U – Unresponsive—no gag or cough

The acronym AVPU should be used to assess mental status.

If the patient does not respond to verbal stimuli, check the patient’s response to pain.

Assessing the Patient’s Airway Status
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- Responsive patient
  - Is the patient talking or crying?
    - If yes, assess for adequacy of breathing
    - If no, open airway

- Unresponsive patient
  - Is the airway open?
    - Open the airway
    - Positioning is patient, age, and size specific

Assessing the Patient’s Breathing

Look, Listen, Feel for breathing
Assessing the Patient’s Circulation

- Pulse
  - The circulation is assessed by feeling for a radial pulse
  - If no radial pulse is felt, palpate carotid pulse

- For infants and children, assess the brachial pulse
Assessing the Patient’s Circulation

- If pulseless:
  - Medical patient—start CPR and apply automated external defibrillator (AED) as appropriate
  - Trauma patient—start CPR

Assessing the Patient's Circulation

- Major bleeding
  - If major bleeding is present, control bleeding

*Stop all major bleeding as soon as possible. Perfusion can usually be assessed while obtaining a radial pulse.*

Assessing the Patient’s Circulation

- Perfusion
  - Assess the patient’s skin color, temperature, and condition
Assessing the Patient’s Circulation

- The patient’s skin color is assessed by looking at the nail beds, lips, and eyes

Assessing the Patient’s Circulation

- Normal
  - Pink

- Abnormal conditions
  - Pale
  - Cyanotic or blue-gray
  -Flushed or red
  - Jaundice or yellow

Assessing the Patient’s Circulation

- Assess the patient’s skin temperature by feeling the skin
  - Normal
    - Warm
  - Abnormal skin temperatures
    - Hot
    - Cool
    - Cold
    - Clammy
      - Cool and moist
Assessing the Patient's Circulation

- Assess the patient’s skin condition. This is an assessment of the amount of moisture on the skin
  - Normal
    - Dry
  - Abnormal
    - Moist or wet

Assessing the Patient's Circulation

- Assess capillary refill in infants and children
  - Normal capillary refill is less than 2 seconds
  - Abnormal capillary refill is greater than 2 seconds

Identifying Priority Patients
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- Consider:
  - Poor general impression
  - Unresponsive patients—no gag or cough
  - Responsive, not following commands
  - Difficulty breathing
  - Shock (hypoperfusion)
  - Complicated childbirth
  - Chest pain with BP <100 systolic
  - Uncontrolled bleeding
  - Severe pain anywhere

*Mechanism of injury may also guide the EMT toward identifying priority patients.*

Identifying Priority Patients

- Expedite transport of the patient; consider ALS back-up

Summary

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