

EXTRICATION CHALLENGE - MEDICAL ASSESSMENT

Patient 1	Team Name			Assessors			
Patient 2	Event Location						
Patient 3	Discipline			Weighting		Date	Time
Safety							
1. Safe 360 Approach & Access				3. Wear & Maintain Correct PPE			
0	2	4	6	0	2	4	6
2. Hazard Identification & Mitigation				4. Patient Safety & Protection Throughout			
0	2	4	6	0	2	4	6

Initial Survey & Patient ID				Airway				7. Breathing				8. Circulation			
5. ID & Communicate the Initial LOC				8. Airway Manoeuvre				11. Present				15. Haemorrhage Management			
0	2	4	6	0	2	4	6	0	2	4	6	0	2	4	6
6. Inspects for Catastrophic Haemorrhage				9. Inspection of Airway				12. Chest Inspection & Assessment				16. Assess for Circulation			
0	2	4	6	0	2	4	6	0	2	4	6	0	2	4	6
7. Reports Patient Condition to IC				10. Management of Patency				13. Resp Rate/Depth/Effort				17. Peripheral and/or Central Pulses			
0	2	4	6	0	2	4	6	0	2	4	6	0	2	4	6
Disability				Examine & Exposure				14. Interventions, SpO2 & O2				18. Cap Refill & Skin			
19. Conscious Level				23. Identifies all injuries & abnormalities				0				0			
0	2	4	6	0	2	4	6	Secondary Survey				Management			
20. Pupils Assessment				24. Appropriate Clinical Intervention				27. Full patient assessment				32. Pain Recognition & Management			
0	2	4	6	0	2	4	6	0	2	4	6	0	2	4	6
21. CSM Examination				25. Medical History				28. Secondary Issues Identified				33. Patient Centered & Planned			
0	2	4	6	0	2	4	6	0	2	4	6	0	2	4	6
22. Ongoing Assessment				26. Vital Signs				29. Full History				34. Priorities & Time Management			
0	2	4	6	0	2	4	6	0	2	4	6	0	2	4	6
Patient 1 Status Decision				Patient 2 Status Decision				30. Reassessment & Vitals				35. Ongoing Patient Comfort & Care			
Life Threatening				Life Threatening				0				0			
Serious Non Life Threat				Serious Non Life Threat				0				0			
Non Serious				Non Serious				0				0			
								31. Neurovascular status							
								0				0			

NOTES:

Medic Actions - Patient 1				Medic Actions - Patient 2				Medic Actions - Patient 3			
36. Injury/Medical Issues ID				39. Injury/Medical Issues ID				42. Injury/Medical Issues ID			
0	2	4	6	0	2	4	6	0	2	4	6
37. ID & Communicate Medical / Physical Entrapment				40. ID & Communicate Medical / Physical Entrapment				43. ID & Communicate Medical / Physical Entrapment			
0	2	4	6	0	2	4	6	0	2	4	6
38. Patient Centered Management & Treatment				41. Patient Centered Management & Treatment				44. Patient Centered Management & Treatment			
0	2	4	6	0	2	4	6	0	2	4	6

NOTES:

Extrication				Scene Management				Patient Centred			
45. Planning, Supervision & Leadership				49. Communications with Patient(s)				55. Treatment & Planning			
0	2	4	6	0	2	4	6	0	2	4	6
46. Injury & interventions Management				50. Communication with IC & Team				56. Pain and Oxygen Management			
0	2	4	6	0	2	4	6	0	2	4	6
47. Appropriate Patient Packaging, Movement & Handling				51. Triage				57. Handling, Movement & Packaging			
0	2	4	6	0	2	4	6	0	2	4	6
48. Reassessed Post Extrication				52. Situational Awareness & internal Space Creation				58. Spinal Motion Restriction Decision & Management			
0	2	4	6	0	2	4	6	0	2	4	6
				53. Management of Resources & Equipment				59. Rescue / Extrication Management			
				0				0			
				54. Planning & Progression							
				0				0			

NOTES:

60. Handover								
Intro				Allergies				
Moi				Medications				
Injuries				Background				
Signs & Symptoms				Other				
Treatment & Trends								
Score:	0	2	4	6				

NOTES:

Debrief Summary							
Positive				Learning			
Assessors signature:							
Score checkers signature:				SCORE		TOTAL:	

Not Done	0	No score if not done	Insufficient	2	Performed incorrectly or an unsafe practice demonstrated
Good	4	Performed to an adequate standard, maybe out of sequence.	Excellent	6	Performed to full standard with attention to detail, in sequence and at the appropriate time.

"Good" is a word used to describe something that is satisfactory or adequate. "Excellent" is a word used to describe something that is of the highest quality or extremely good. It means that something is exceptional or outstanding.

EXTRICATION CHALLENGE - MEDICAL ASSESSMENT GUIDELINES

Safety	1. Safe 360 Approach & Access							
	0	Does not have a safe 360 approach or access	2	The 360 approach & access was somewhat safe	4	The 360 approach & access was mostly safe	6	The 360 approach & access was extremely safe
	2. Hazard Identification & Mitigation							
	0	Does not identify & mitigate hazards	2	Identifies & mitigates hazards insufficiently and limited or no rechecking	4	Identifies & mitigates hazards well with some rechecking	6	Identifies & mitigates hazards excellently with correct rechecking
	3. Wears & Maintain Correct PPE							
0	Does not wear & maintain correct PPE	2	Wore & maintained correct PPE but not consistently and may not have changed or transitioned as appropriate	4	Wore & maintained correct PPE consistently and may have been delayed in changing or transitioning as appropriate	6	Wore & maintained correct PPE consistently and changed or transitioned as appropriate excellently	
4. Patient Safety & Protection Throughout								
0	Does not provide patient safety & protection throughout	2	Provided patient safety & protection but insufficiently and/or delayed	4	Provided patient safety & protection well but may have been short gaps or delays	6	Provided patient safety & protection excellently throughout	
Initial Survey & Patient ID	5. ID & Communicate the Initial LOC							
	0	Does not identify and communicate the initial level of consciousness	2	Identifies and communicates the initial level of consciousness after 2 minutes	4	Identifies and communicates the initial level of consciousness after 1 minutes	6	Identifies and communicates the initial level of consciousness in less than 1 minute
	6. Inspects for (and manages) Catastrophic Haemorrhage							
	0	Does not inspect for catastrophic haemorrhage	2	Inspects for catastrophic haemorrhage after 2 minutes <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>	4	Inspects for catastrophic haemorrhage after 1 minute <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>	6	Inspects for catastrophic haemorrhage in less than 1 minute <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>
7. Reports Patient Condition to IC								
0	Does not report the patient condition to the IC	2	Reports the patient condition to the IC after 5 minutes	4	Reports the patient condition to the IC after 3 minutes	6	Reports the patient condition to the IC in less than 2 minutes	
Airway	8 Airway Manoeuvre							
	0	Does not identify the need for and/or perform any airway manoeuvre	2	Identifies the need for an airway manoeuvre but performs it late and/or without sufficient care and/or competency	4	Identifies the need for an airway manoeuvre and performs it within a reasonable time and with sufficient care and/or competency	6	Identifies the need for an airway manoeuvre and performs it within an appropriate time and with excellent care and/or competency
	9. Inspection of Airway							
0	Does not inspect airway	2	Inspects the patients airway poorly, but does not check for patency, contamination or foreign objects	4	Inspects the patients airway well, does check for patency, contamination or foreign objects but maybe delayed	6	Inspects the patients airway excellently, does check for patency, contamination or foreign objects thoroughly and in an timely manner	
Airway	10. Management of Patency							
	0	Does not manage the patency of the airway	2	Manages the patency poorly, does not consider an adjunct and/or suctioning	4	Manages the patency well, considers and/or places an adjunct and/or suctioning	6	Excellent management of airway patency, considers and/or correctly sizes and places any adjunct and/or suctioning

Breathing	11. Present							
	0	Does not check if breathing is present	2	Identifies breathing is present or not but > 2 minutes	4	Identifies breathing is present or not within 1 to 2 minutes	6	Identifies breathing is present or not in < 1 minute
Breathing	12. Chest Inspection & Assessment							
	0	Does not inspect or assesses the chest	2	Inspects and/or assesses the chest, but not anterior, lateral and posterior, no auscultation and/or equal bilateral movement	4	Inspects and/or assesses the chest, but not anterior, lateral and posterior, no auscultation and/or equal bilateral movement	6	Inspects and assesses the chest, anterior, lateral and posterior, auscultation and equal bilateral movement
Breathing	13. Resp Rate/Depth/Effort							
	0	Does not check the breathing rate and/or depth and/or effort	2	Checks for breathing rate and/or depth and/or effort but not in a sufficient manner	4	Checks for breathing rate and/or depth and/or effort well	6	Checks for breathing rate and depth and effort thoroughly and in detail
Breathing	14. Interventions, SpO2 & O2							
	0	Does not make any interventions, takes SpO2 or considers application of O2	2	Makes basic interventions based on chest inspection and assessment, applies SpO2 but does not follow readings to make a decision to apply and/or titrate O2 or applies O2 late or using incorrect device and flow	4	Makes interventions based on chest inspection and assessment, applies SpO2 and does follow readings but maybe not to decide to apply and/or titrate O2 (94% - 98%) Applies O2 at a reasonable time and using the correct device and flow	6	Makes interventions based on chest inspection and assessment, applies SpO2 and does follow readings to decide to apply and/or titrate O2 (94% - 98%). Applies and/or withdraws O2 at the correct time and using the correct device and flow
Circulation	15. Haemorrhage Management							
	0	Does not manage any further haemorrhage found	2	Manages haemorrhage found in an insufficient manner	4	Manages haemorrhage found in a good manner, with some rechecking	6	Manages haemorrhage found in an excellent manner, with full rechecking
	16. Assess for Circulation							
	0	Does not assess for circulation	2	Assesses for circulation in an insufficient manner	4	Assesses for circulation in a good manner	6	Assesses for circulation in a manner that denotes an understanding and relevance to the casualty
Circulation	17. Peripheral & Central Pulses							
	0	Does not check for pulses	2	Checks pulse peripheral and/or central, may not get rate and/or quality and/or rhythm	4	Checks pulse peripheral and/or central, may not get rate and/or quality and/or rhythm or check symmetry (<i>Central pulse may not be required is peripheral pulse is present</i>)	6	Checks pulse peripheral and/or central, gets rate and/or quality and/or rhythm and check symmetry (<i>Central pulse may not be required is peripheral pulse is present</i>)
Circulation	18. Cap Refil & Skin							
	0	Does not manage poor circulation	2	Manages poor circulation in an insufficient manner	4	Manages poor circulation in a good manner	6	Manages poor circulation in an excellent manner that denotes an understanding and relevance to the casualty

Disability	19. Conscious Level							
	0	Does not check conscious level or respond to change of status	2	Check conscious level but does not apply criteria for AVPU decision reacts to change of status late	4	Check conscious level, does apply criteria for AVPU decision and reacts to change of status but may not apply criteria for AVPU appropriately	6	Check conscious level, does apply criteria for AVPU decision fully and reacts to change of status immediately and reapplies criteria for AVPU
	20. Pupils Assessment							
	0	Does not assess pupils	2	Assesses pupils, but does not check all of PEERLA	4	Assesses pupils, does check PEERLA	6	Assesses pupils, does check PEERLA and reassess as necessary
	21. CSM Assessment							
0	Does not check CSM	2	Assesses CSM but not in all extremities and not at correct time for interventions	4	Assesses CSM in all extremities but may not at correct time for interventions	6	Assesses CSM in all extremities and at correct time for interventions	
22. Ongoing Assessment								
0	Does not do an ongoing assessment regarding disability or reacts to a change of status	2	Rechecks some of AVPU, Pupils and CSM but not in good time and does not react to change in status	4	Rechecks AVPU, Pupils and CSM in good time and reacts to status change but may be not in appropriate time	6	Rechecks AVPU, Pupils and CSM in excellent time and reacts to status change immediately	
Exposure & Examine	23. Identifies all injuries & abnormalities							
	0	Does not identify any injuries & abnormalities	2	Identifies some injuries & abnormalities	4	Identifies the majority of injuries & abnormalities	6	Identifies all injuries & abnormalities
	24. Appropriate Clinical Interventions							
	0	Does not provide any appropriate clinical interventions based on assessment	2	Does provide some appropriate clinical interventions based on assessment	4	Does provide the majority and the critical appropriate clinical interventions based on assessment	6	Does provide all appropriate clinical interventions based on assessment
	25. Medical History							
0	Does not obtain AMPLE history	2	Obtains some AMPLE information	4	Obtains full AMPLE Information	6	Obtains complete AMPLE information and reacts with appropriate interventions or change of care plan	
26. Vital Signs								
0	Does not obtain vital signs	2	Obtains some vital signs but incomplete and does not react to findings	4	Obtains all vital signs but may not react to findings	6	Obtains all vital signs and reacts to findings	
Secondary Survey	27. Full patient assessment							
	0	Does not start full patient Assessment	2	Undertakes a patient assessment but it is not complete head to toe and is unstructured	4	Patient assessment completed but, not in a logical sequence	6	Undertakes a full patient assessment in a structured manner that denotes an understanding and relevance to the casualty.
	28. Secondary Issues Identified							
	0	Does not identify any secondary issues	2	Identifies some secondary issues but not sufficiently and/or methodically	4	Identifies the majority of secondary issues well but not all and/or methodically	6	Identifies all of the secondary issues excellently in methodical way
29. Full History								
0	Does not reconfirm or obtain a history or AMPLE	2	Reconfirms the AMPLE information obtained in the primary survey	4	Reconfirms the full AMPLE Information but may not react with appropriate interventions or change of care plan	6	Reconfirms that complete AMPLE information and reacts with appropriate interventions or change of care plan	

Secondary Survey	30. Reassessment & Vitals							
	0	Does not reassess and/or obtain full set of vital signs	2	Reassess and/or obtains some vital signs but not complete	4	Reassess and/or obtains all vital signs but may not react to any changes	6	Reassess and obtains all vital signs and reacts to any changes
Secondary Survey	31. Neurovascular Status							
	0	Does not assess or reassesses	2	Reassesses CSM but not in all extremities and not at correct time for interventions	4	Reassesses CSM in all extremities but may not at correct time for interventions	6	Reassesses CSM in all extremities and at correct time for interventions
Management	32. Pain Recognition & Management							
	0	Does not obtain a pain score or recognise the need for management	2	Obtains a pain score but does not manage the pain	4	Obtains a pain score and does manage the pain well using the resources available to them	6	Obtains a pain score and does manage the pain excellently with all the resources available to them
	33. Patient Centred & Planned							
	0	Does not have patient centred management or plan	2	Management of patient was somewhat patient centred and planned	4	Management of patient was mostly patient centred and planned	6	Management of patient was fully patient centred and planned
	34. Priorities & Time Management							
0	Does not have priorities or time management	2	The management of the priorities and time were not sufficient	4	The management of the priorities and time was good	6	The management of the priorities and time was excellent	
Management	35. Ongoing Patient Comfort & Care							
	0	Does not have ongoing patient comfort and care	2	The ongoing patient comfort and care was not sufficient	4	The ongoing patient comfort and care was good	6	The ongoing patient comfort and care was excellent
Medic Actions - Patient #	Injury/Medical Issues ID							
	0	Does not identify the injury / medical issues	2	Identifies some of the injury / medical issues and > 10 minutes	4	Identifies all of the injury / medical issues in <8 minutes	6	Identifies all of the injury / medical issues in <5 minutes
	ID & Communicate Medical / Physical Entrapment							
Medic Actions - Patient #	0	Does not identify & communicate medical / physical entrapment	2	Identifies & communicate medical / physical entrapment in >8 minutes	4	Identifies & communicate medical / physical entrapment within 5 minutes	6	Identifies & communicate medical / physical entrapment within 3 minutes
	Patient Centered Management & Treatment							
0	Does not demonstrate patient centred management & treatment	2	The management & treatment was somewhat patient centred	4	The management & treatment was mostly patient centred	6	The management & treatment was fully patient centred	

Extrication	45. Planning, Supervision & Leadership							
	0	Does not have planning, supervision or leadership during the extrication	2	The planning, supervision and leadership during the extrication was not sufficiently coordinated by the medic	4	The planning, supervision and leadership during the extrication was well coordinated by the medic	6	The planning, supervision and leadership during the extrication was excellently coordinated by the medic
	46. Injury & Intervention Management							
	0	Does not have any injury & intervention management during the extrication	2	The injury & intervention management was not sufficient during the extrication	4	The injury & intervention management was good during the extrication	6	The injury & intervention management was excellent during the extrication
	47. Appropriate patient packaging, movement & handling							
0	Does not have appropriate patient packaging & handling	2	The appropriate patient packaging, movement & handling was not sufficient for the patients condition	4	The appropriate patient packaging, movement & handling was good for the patients condition	6	The appropriate patient packaging, movement & handling was excellent for the patients condition	
48. Reassessed post Extrication								
0	Does not reassess post extrication	2	The patient and interventions were not reassessed sufficiently post extrication	4	The patient and interventions were reassessed well post extrication	6	The patient and interventions were reassessed excellently post extrication	
Scene Management	49. Communications with Patient(s)							
	0	Does not communicate with the patient(s)	2	Communication with the patient(s) was not sufficient and did not make the patient feel comforted or informed of what was going on	4	Communication with the patient(s) was good but did not fully make the patient feel comforted or informed of what was going on	6	Communication with the patient(s) was excellent and made the patient feel comforted and informed of what was going on
Scene Management	50. Communication with IC & Team							
	0	Does not communicate with the IC & team	2	Communication with the IC & team was not sufficient and/or uncoordinated and/or too noisy and/or ineffective	4	Communication with the IC & team was good but may have been uncoordinated and/or too noisy and/or ineffective at times	6	Communication with the IC & team was excellent, coordinated, at the correct volume and very effective
	51. Triage							
	0	Does not triage the patients	2	The triage of the patients was not sufficient, methodical or coordinated and may have been incorrectly classified	4	The triage of the patients was good, using a methodical procedure and coordination but with slight delays or some errors in classifications	6	The triage of the patients was excellent, using a methodical procedure and coordination and was at the right time and all classifications were correct
	52. Situational Awareness & Internal Space Creation							
	0	Does not demonstrate any situational awareness or create internal space	2	Demonstrates some situational awareness and/or creates some internal space but not as much as they could have	4	Demonstrates good situational awareness and/or creates a reasonable amount of internal space but not as much as they could have	6	Demonstrates excellent situational awareness and/or creates the most amount of internal space as possible
53. Management of Resources and Equipment								
0	Does not manage resources and equipment	2	Manages the resources and equipment in sufficiently, the resources are under utilised and equipment not used to full potential and/or contaminated	4	Manages the resources and equipment well, the resources and equipment are utilised buy maybe not to the full extent or slight contamination	6	Manages the resources and equipment excellently, the resources and equipment are fully utilised and no contamination	
54. Planning & Progression								
0	Does not demonstrate any planning & progression	2	Demonstrates insufficient planning & progression	4	Demonstrates good planning & progression	6	Demonstrates excellent planning & progression	

Patient Centred	55. Treatment & Planning							
	0	Does not demonstrate patient centred treatment & planning	2	The treatment & planning was somewhat patient centred	4	The treatment & planning was mostly patient centred	6	The treatment & planning was fully patient centred
	56. Pain and Oxygen Management							
	0	Does not demonstrate patient centred pain & oxygen management	2	The pain & oxygen management was somewhat patient centred	4	The pain & oxygen management was mostly patient centred	6	The pain & oxygen management was fully patient centred
	57. Handling, Movement & Packaging							
	0	Does not demonstrate patient centred handling, movement & packaging	2	The handling, movement & packaging was somewhat patient centred	4	The handling, movement & packaging was mostly patient centred	6	The handling, movement & packaging was fully patient centred
58. Spinal Motion Restriction Decision & Management								
0	Does not demonstrate any spinal motion restriction decision & management	2	The spinal motion restriction decision & management was not based on the clinical assessment of the patient	4	The spinal motion restriction decision & management was mostly based on the clinical assessment of the patient	6	The spinal motion restriction decision & management was exclusively based on the clinical assessment of the patient	
59. Rescue / Extrication Management								
0	Does not demonstrate any rescue and/or extrication management	2	The rescue and/or extrication was somewhat patient centred	4	The rescue and/or extrication was mostly patient centred	6	The rescue and/or extrication was fully patient centred	
Handover	60. Handover							
	0	Does not give a handover of the patient	2	Gives an incomplete handover of the patient and no structure	4	Gives an complete handover of the patient, but is not structured	6	Gives an complete and detailed handover of the patient in an excellent methodical structured fashion

Active spinal motion restriction until clinical assessment is complete

High risk factors - any of the following:

- (1) dangerous mechanism of injury
- (2) fall from a height >2 mts
- (3) axial load to the head or base of the spine – for example; diving, high-speed motor vehicle collision, rollover motor accident, ejection from a motor vehicle, accident involving motorised recreational vehicle, bicycle collision, horse riding accident, pedestrian v vehicle.
- (4) impaired awareness (alcohol/ drug intoxication, confused /uncooperative or ALoC)
- (5) age 65 years or older
- (6) age 2 years or younger incapable of verbal communication

Any significant distracting injuries

- (1) impaired awareness (alcohol/ drug intoxication, confused /uncooperative or ALoC)
- (2) immediate onset of spinal/ midline back pain
- (3) hand or foot weakness (motor issue)
- (4) altered or absent sensation in the hands or feet (sensory issue)
- (5) priapism
- (6) history of past spinal problems, including previous spinal surgery or conditions that predispose to instability of the spine.
- (7) Unable to actively rotate their neck 45 degrees to the left or right

Active spinal motion restriction: Using inline techniques with or without spinal injury management devices to reduce spinal column motion.

Passive spinal motion restriction: Requesting the patient to minimise his/her movement without external intervention and permitting the patient to adopt a position of comfort.