

**TRAUMA CHALLENGE - MEDICAL ASSESSMENT GUIDELINES**

Safety	<b>1. Safe 360 Approach &amp; Access</b>							
	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
	<b>2. Hazard Identification &amp; Mitigation</b>							
	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
	<b>3. Wears &amp; Maintain Correct PPE</b>							
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	
<b>4. Patient &amp; Bystander Safety &amp; Protection Throughout</b>								
0	Does not provide patient and Bystander safety & protection throughout	2	Provided patient and bystander safety & protection but insufficiently and/or delayed	4	Provided patient and bystander safety & protection well but may have been short gaps or delays	6	Provided patient and bystander safety & protection excellently throughout	
Initial Survey & Patient ID	<b>5. ID &amp; Communicate the Initial LOC</b>							
	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
<b>6. Inspects for &amp; manage Catastrophic Haemorrhage</b>								
0	Does not inspect for and manage catastrophic haemorrhage	2	Inspects for and manages catastrophic haemorrhage after 2 minutes <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>	4	Inspects for and manages catastrophic haemorrhage after 1 minute <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>	6	Inspects for and manages catastrophic haemorrhage in less than 1 minute <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>	
Airway	<b>7. Airway Manoeuvre</b>							
	0	Does not identify the need for and/or perform any airway manoeuvre	1	Identifies the need for an airway manoeuvre but performs it late and/or without sufficient care and/or competency	2	Identifies the need for an airway manoeuvre and performs it within a reasonable time and with sufficient care and/or competency	3	Identifies the need for an airway manoeuvre and performs it within an appropriate time and with excellent care and/or competency
	<b>8. Inspection of Airway</b>							
0	Does not inspect airway	1	Inspects the patients airway poorly, but does not check for patency, contamination or foreign objects	2	Inspects the patients airway well, does check for patency, contamination or foreign objects but maybe delayed	3	Inspects the patients airway excellently, does check for patency, contamination or foreign objects thoroughly and in a timely manner	
<b>9. Management of Patency</b>								
0	Does not manage the patency of the airway	1	Manages the patency poorly, does not consider an adjunct and/or suctioning	2	Manages the patency well, considers and/or places an adjunct and/or suctioning	3	Excellent management of airway patency, considers and/or correctly sizes and places any adjunct and/or suctioning	
Breathing	<b>10. Present (Rate Depth and Effort)</b>							
	0	Does not check the breathing rate and/or depth and/or effort	1	Checks for breathing rate and/or depth and/or effort but not in a sufficient manner	2	Checks for breathing rate and/or depth and/or effort well	3	Checks for breathing rate and depth and effort thoroughly and in detail
<b>11. Chest Inspection &amp; Assessment</b>								
0	Does not inspect or assesses the chest	1	Inspects and/or assesses the chest, but not anterior, lateral and posterior, no auscultation and/or equal bilateral movement	2	Inspects and/or assesses the chest, but not anterior, lateral and posterior, no auscultation and/or equal bilateral movement	3	Inspects and assesses the chest, anterior, lateral and posterior, auscultation and equal bilateral movement	

E	<b>12. Interventions, SpO2 &amp; O2</b>							
	0	Does not make any interventions, takes SpO2 or considers application of O2	1	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	2	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	3	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
	<b>13. Assess for Circulation</b>							
	0	Does not assess for circulation	1	Assesses for circulation in an insufficient manner	2	Assesses for circulation in a good manner	3	Assesses for circulation in a manner that denotes an understanding and relevance to the casualty
Circulation	<b>14. Peripheral &amp; Central Pulses (Evaluate)</b>							
	0	Does not check for pulses	1	Checks pulse peripheral and/or central, may not get rate and/or quality and/or rhythm	2	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> )	3	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> )
	<b>15. Manages Poor Circulation</b>							
	0	Does not manage poor circulation	1	Manages for poor circulation in an insufficient manner	2	Manages for poor circulation in a good manner	3	Manages for poor circulation in a manner that denotes an understanding and relevance to the casualty
Disability	<b>16. Conscious Level</b>							
	0	Does not check conscious level or respond to change of status	1	Check conscious level but does not apply criteria for AVPU decision reacts to change of status late	2	Check conscious level, apply criteria for AVPU (Alert, Voice, Pain, Unresponsive) decision and react to change of status.	3	Check conscious level, does apply criteria for AVPU decision fully and reacts to change of status immediately and reapplies criteria for AVPU
	<b>17. Pupils Assessment</b>							
	0	Does not assess pupils	1	Assesses pupils, but does not check all of PEERLA	2	Assesses pupils, does check PEERLA	3	Assesses pupils, does check PEERLA and reassess as necessary
<b>18. CSM Assessment</b>								
0	Does not check CSM	1	Assesses CSM but not in all extremities and not at correct time for interventions	2	Assesses CSM in all extremities but may not at correct time for interventions	3	Assesses CSM in all extremities and at correct time for interventions	
Exposure & Examine	<b>19. Identifies all injuries &amp; abnormalities</b>							
	0	Does not identify any injuries & abnormalities	1	Identifies some injuries & abnormalities	2	Identifies the majority of injuries & abnormalities	3	Identifies all injuries & abnormalities
	<b>20. Medical History</b>							
	0	Does not obtain AMPLE history	1	Obtains some AMPLE information	2	Obtains full AMPLE Information	3	Obtains complete AMPLE information and reacts with appropriate interventions or change of care plan
<b>21. Vital Signs</b>								
0	Does not obtain vital signs	1	Obtains some vital signs but incomplete and does not react to findings	2	Obtains all vital signs but may not react to findings	3	Obtains all vital signs and reacts to findings	
<b>22. Full patient assessment</b>								
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.	

Secondary Survey	<b>23. Secondary Issues Identified</b>							
	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
	<b>24. Full History</b>							
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	
<b>25. Reassessment &amp; Vitals</b>								
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	
Management	<b>26. Spinal Motion Restriction Decision &amp; Management</b>							
	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
	<b>27. Pain Recognition &amp; Management</b>							
	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
	<b>28. Patient Centred &amp; Planned</b>							
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	
<b>29. Priorities &amp; Time Management</b>								
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	
Transport Packaging	<b>30. Planning, Supervision &amp; Leadership</b>							
	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
	<b>31. Patient centred packaging, movement &amp; handling</b>							
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	
<b>32. Reassessed post Movement &amp; Packaging</b>								
0	Does not reassess post movement and /or packaging	2	The patient and interventions were not reassessed sufficiently post movement and /or packaging	4	The patient and interventions were reassessed well post movement and /or packaging	6	The patient and interventions were reassessed excellently post movement and packaging	

Scene Management	<b>33. Communications with Patient(s)</b>							
	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
	<b>34. Communication with Team &amp; Bystander(s)</b>							
	0	Does not communicate with the team / bystander(s)	2	Communication with the team / bystander(s) was not sufficient and/or uncoordinated and/or too noisy and/or ineffective	4	Communication with the team / bystander(s) was good but may have been uncoordinated and/or too noisy and/or ineffective at times	6	Communication with the team and bystander(s) was excellent, coordinated, at the correct volume and very effective
	<b>35. Triage</b>							
	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
	<b>36. Situational Awareness &amp; Use of Bystander(s)</b>							
0	Does not demonstrate any situational awareness, create work space or use of bystander(s)	2	Demonstrates some situational awareness and/or creates some work space / use of bystander(s) but not as much as they could have	4	Demonstrates good situational awareness and/or creates a reasonable amount of work space / uses of bystander(s) but not as much as they could have	6	Demonstrates excellent situational awareness and/or creates the most amount of work space / uses the bystander(s) as effectively as possible	
<b>37. Management of Resources &amp; Equipment</b>								
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	
<b>38. Planning &amp; Progression</b>								
0	Does not demonstrate any planning & progression	2	Demonstrates insufficient planning & progression	4	Demonstrates good planning & progression	6	Demonstrates excellent planning & progression	
Handover	<b>39. Handover</b>							
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.