

Module 3: Assessment

Lesson 3-1

Ill or Injured Person Assessment

Objectives

Objectives Legend

C=Cognitive A=Affective P=Psychomotor

1 = Knowledge level

2 = Application level

3 = Problem-solving level

Cognitive Objectives

At the completion of this lesson, the First Aid student will be able to:

- 3-1.1 Describe the components of scene assessment. (C-1)
- 3-1.2 Describe common hazards found at the scene. (C-1)
- 3-1.3 Determine if the scene is safe to enter. (C-2)
- 3-1.4 Describe common mechanisms of injury/nature of illness. (C-1)
- 3-1.5 Describe the reason for determining the total number of ill or injured persons at the scene. (C-1)
- 3-1.6 Describe methods of assessing responsiveness. (C-1)
- 3-1.7 Describe methods used for assessing if an ill or injured person is breathing. (C-1)
- 3-1.8 Distinguish between an ill or injured person with adequate and inadequate breathing. (C-3)
- 3-1.9 Describe how to assess circulation. (C-1)
- 3-1.10 Describe the differences between obtaining a pulse in an adult, child, and infant.* (C-3)
- 3-1.11 Determine the need for assessing external bleeding. (C-1)
- 3-1.12 Describe the components of on-going assessment. (C-1)

Affective Objectives

At the completion of this lesson, the First Aid student will be able to:

- 3-1.13 Explain the reason for assessment of scene safety prior to entering. (A-2)
- 3-1.14 Explain the value of initial assessment. (A-2)
- 3-1.15 Explain the value of questioning the ill or injured person and bystanders. (A-2)
- 3-1.16 Explain the value of an on-going assessment. (A-2)
- 3-1.17 Demonstrate a caring attitude when performing initial and physical assessments. (A-3)

Psychomotor Objectives

At the completion of this lesson, the First Aid student will be able to:

- 3-1.18 Demonstrate the ability to distinguish potential hazards. (P-1)
- 3-1.19 Demonstrate the techniques for assessing responsiveness. (P-1,2)
- 3-1.20 Demonstrate the techniques for assessing the airway. (P-1,2)
- 3-1.21 Demonstrate the techniques for assessing breathing. (P-1,2)
- 3-1.22 Demonstrate the techniques for assessing circulation. (P-1,2)
- 3-1.23 Demonstrate the techniques for assessing external bleeding. (P-1,2)
- 3-1.24 Demonstrate the techniques for assessing skin color, temperature, moisture, and capillary refill (infants and children only).*
- 3-1.25 Demonstrate the techniques for physical assessment. (P-1,2)
- 3-1.26 Demonstrate the on-going assessment (P-1,2)

* When infants and/or children are not present or are not anticipated in the First Aid Provider's occupational setting, this information may be omitted.

Preparation

Motivation:

Reemphasizing scene safety is the first aspect of assessment. It begins as the First Aider approaches the scene. During this phase, the First Aid Provider surveys the scene to determine if there are any threats that may cause an injury/illness to the First Aid Provider, bystanders, or may cause additional injury/illness to the ill or injured person. The initial assessment, physical assessment, and ill or injured person questioning are used to help identify those who require immediate first aid and/or professional medical care.

Prerequisites:

Preparatory, Airway Modules

Materials

AV Equipment:

Utilize various audio-visual materials relating to first aid. The continuous development of new audio-visual materials relating to first aid requires careful review to determine which best meet the needs of the program. Materials should be edited to ensure that the objectives of these guidelines are met.

Equipment:

Gloves and/or other barriers.

Recommended Minimum Time to Complete:

See page 12 of *Course Guide*

Presentation

Declarative (What)

- I. Scene Assessment
 - A. Body substance isolation review
 1. Eye protection if necessary
 2. Gloves if necessary
 3. Mask if necessary
 - B. Scene Safety
 1. Is the scene safe?
 - a. Definition - an assessment of the scene and surroundings that will provide valuable information to the First Aid Provider and will help ensure the well-being of the First Aid Provider.
 - b. Personal protection - Is it safe to approach the ill or injured person?
 - c. Protection of the ill or injured person - environmental considerations
 - d. Protection of bystanders - do not let the bystander become ill or injured.
 - e. If the scene is unsafe, do not enter.

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- C. What is the mechanism of injury or illness/complaint?
 - 1. Mechanism of injury - an evaluation of the forces that caused an injury. May be beneficial in determining the presence of internal injuries.
 - 2. Trauma - Mechanism of injury - determine from the injured person, family or bystanders and inspect the scene. What is the mechanism of injury?
 - 3. Medical - illness/complaint - determine from the ill person, family, or bystanders.
 - D. How many ill or injured persons are involved?
 - E. Assure EMS system is activated.
- II. Initial Assessment
- A. The initial assessment is completed to assist the First Aid Provider in identifying immediate threats to life.
 - B. General Impression of the ill or injured person
 - 1. Based on the First Aid Provider's immediate assessment of the environment and the ill or injured person's chief complaint.
 - 2. Determine if ill (medical) or injured (trauma).
 - a. Is this trauma?
 - b. Is this medical?
 - c. Is it unclear? - Treat as trauma
 - C. Assess responsiveness - stabilize spine if trauma.
 - 1. Begin by speaking to the ill or injured person.
 - a. Tell the injured person not to move.
 - b. State your name
 - c. Tell the person that you are a First Aid Provider
 - d. Explain that you would like to help.
 - 2. Levels of responsiveness
 - a. Responsive
 - b. Unresponsive (activate EMS)
 - 3. Infant and Child*
 - a. Infants and young children may not respond to methods used to assess responsiveness in adults.
 - b. Parents or care givers are generally good judges of normal versus abnormal behavior.
 - D. Assess the ill or injured person's airway
 - 1. Responsive ill or injured persons
 - a. Can the ill or injured person speak?
 - b. Is the airway open?
 - 2. Unresponsive ill or injured person
 - a. Open the airway
 - (1) Medical - Head tilt-chin lift
 - (2) Trauma - Chin-lift without head-tilt
 - b. Check the airway for possible obstructions.
 - c. Clear the airway as needed
 - E. Assess the ill or injured person's breathing
 - 1. Assess the effort required to breath.
 - 2. Responsive - Can the ill or injured person speak?
 - 3. Unresponsive
 - a. Maintain an open airway
 - b. Look, listen, and feel for presence of breathing.
 - 4. Ventilate as needed

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- F. Assess the ill or injured person's circulation.
 - 1. Assess for the presence of the ill or injured person's pulse.
 - a. Adults
 - (1) Responsive - assess radial pulse
 - (2) Unresponsive - assess carotid pulse
 - b. Infants and Children*
 - (1) Infants - Assess for the presence of the brachial pulse
 - (2) Children
 - (a) Unresponsive - Assess for the presence of the carotid pulse
 - (b) Responsive- Assess for the presence of the brachial or radial pulse
 - 2. Assess if major bleeding is present. If bleeding is present, control bleeding as described in *Module 5: Illness and Injury, Lesson 5-2 Bleeding, Shock and Soft Tissue Injuries*
 - 3. Assess the ill or injured person's skin color and temperature
- III. First Aid Provider Physical Assessment (Optional)
 - A. When EMS is readily available and an initial assessment has been completed, the First Aid Provider may wait for EMS to perform the physical assessment. This is acceptable and may be desirable.
 - B. Physical assessment is not required for simple, isolated injuries, e.g., cut finger.
 - C. The physical assessment is designed to identify signs and symptoms of illness or injury.
 - D. When appropriate, the First Aid Provider may complete a physical assessment on an ill or injured person following the initial assessment.
 - E. As the First Aid Provider locates signs and symptoms of illness or injury, there may be other questions that the First Aid Provider might ask. These questions are presented in specific lessons on illness and Injury.
 - F. Physical assessment may be accomplished through simple observation or by palpation. The method selected is dependent on the comfort level of the ill or injured person and First Aid Provider.
 - G. Perform the physical assessment
 - 1. Inspect (look) and palpate (feel) for the following signs of injury:
 - a. **D**eformities
 - b. **O**pen injuries
 - c. **T**enderness
 - d. **S**welling
 - e. The mnemonic **D-O-T-S** is helpful in remembering the signs of injury.
 - 2. Briefly assess the body in a logical manner:
 - a. Head
 - b. Neck
 - c. Chest
 - d. Abdomen
 - e. Pelvis
 - f. All four extremities

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- IV. Obtain History from the Ill or injured person or Bystanders
- A. Medical identification tags provide beneficial information about allergies, medications, or past medical history
 - B. When EMS is readily available and an initial assessment has been completed, the First Aid Provider may wish to allow EMS to obtain ill or injured person history. This is acceptable and may often be desirable.
 - C. **SAMPLE** History (Optional)
 1. **S**igns/Symptoms
 2. **A**llergies (to medications, food, environmental)
 3. **M**edications (ill or injured person is taking)
 4. **P**ertinent past history (of medical problems)
 5. **L**ast Oral Intake (liquids or solids)
 6. **E**vents (that may have lead to illness/injury)
- V. On-Going Assessment
- A. While waiting for EMS, the First Aid Provider should continue to assess the ill or injured person.
 - B. The initial assessment should be repeated frequently.
 1. Monitor level of responsiveness.
 2. Maintain an open airway.
 3. Monitor breathing.
 4. Monitor pulse.
 5. Monitor skin color, temperature, and condition.
 - C. Repeat First Aid Provider physical assessment as needed.
 - D. Check interventions to ensure that they are effective.

Application

Procedural (How)

Assessment is completed by visually inspecting or physically palpating and in some cases listening, and verbally communicating with the ill or injured person and bystanders. Information obtained during the assessment may help determine additional first aid needs.

1. Review of scene assessment.
2. Review of the initial assessment.
3. Students should see visual representations of various trauma scenes to help them recognize the mechanism of injury.
4. Demonstrate an initial assessment.
5. Review methods of assessing responsiveness.
6. Review airway assessment.
7. Review breathing assessment.
8. Demonstrate assessing breathing effort.
9. Demonstrate assessing for the presence of radial, carotid, and brachial pulses.
10. Demonstrate assessing pulse.
11. Demonstrate the First Aid Provider physical assessment.
12. Demonstrate on-going assessment

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Contextual (When, Where, Why)

Scene assessment represents the beginning of ill or injured person assessment. It requires the First Aid Provider to evaluate several aspects concerning the situation quickly. It is essential for assuring the safety of the First Aid Provider and the ill or injured person. Scene assessment is an on-going process to ensure the First Aid Providers and ill or injured person's safety.

Only perform initial assessment on ill or injured persons after assuring scene and personal safety. Perform the initial assessment before moving the ill or injured person. The initial assessment is a rapid means of determining priorities of care. The physical assessment and questioning of the ill or injured person and bystanders may be done after correcting any immediate threats to life during the initial assessment.

The on-going assessment is completed on all ill or injured persons while awaiting EMS. This assessment allows the First Aid Provider to reassess the ABCs and at the same time, calm and reassure the ill or injured person and bystanders.

Student Activities

Auditory (Hearing)

1. The student should hear descriptions of unsafe scenes.
2. Students should hear presentations of ill or injured persons with abnormal breathing
3. Students should hear a simulated responsive ill or injured person provide information regarding signs/symptoms.
4. The students should hear the components of scene assessment.
5. The students should hear the components of the initial assessment.
6. The students should hear the components of the physical assessment.
7. The students should hear the components of the on-going assessment.

Visual (Seeing)

1. The student should see simulations of various safe and unsafe scenes.
2. Students should see visual representations of various injuries.
3. Students should see how to observe and palpate simulated ill or injured persons for various injuries.

Kinesthetic (Doing)

1. Students should role play actions to take at unsafe scenes.
2. Students should practice establishing responsiveness.
3. Students should practice opening the airway on manikins and each other.
4. Students should practice assessing for presence of breathing.
5. Students should practice assessing breathing effort.
6. Students should practice assessing for circulation.
7. Students should practice assessing pulse.
8. Students should practice assessing for major bleeding.
9. Students should practice observing and/or palpating for injuries.

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10. Students should practice scene assessment.
11. Students should practice the initial assessment.
12. Students should practice the physical assessment. (Optional)
13. Students should practice questioning to obtain a SAMPLE history.
14. Students should practice the on-going assessment.

Instructor Activities

Facilitate discussion and supervise practice.
Reinforce student progress in cognitive, affective, and psychomotor domains.
Redirect students having difficulty with content.

Evaluation

Evaluate the actions of First Aid students during role play, practice or other skill stations to determine their comprehension of the cognitive and affective objectives and reasonable proficiency with the psychomotor objectives.

Remediation

Identify students or groups of students who are having difficulty with this subject content.

Enrichment

Address unique student requirements or local area needs concerning this topic.