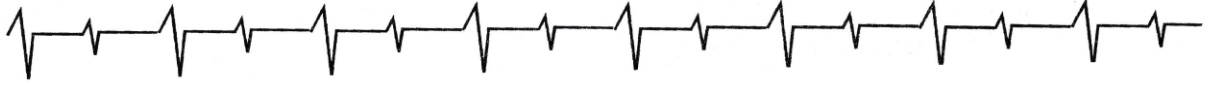




Emergency Care Programs



PATIENT ASSESSMENT MODULE-WRITTEN ASSIGNMENT

Please write all answers on the answer sheet only.

This assignment should be handed into your instructor or the program office within 1 week

DEFINE THE FOLLOWING ACRONYMS:

1. AVPU _____
2. JVD _____
3. MOI _____
4. PPE _____
5. AMS _____

MULTIPLE CHOICE:

6. In the primary assessment, the circulation aspect includes evaluating all of the following, except
 - a. pulse
 - b. skin
 - c. blood pressure
 - d. bleeding
7. When do you have your partner immobilize a broken arm for your trauma patient?
 - a. Immediately after you have completed your initial assessment
 - b. Immediately after you have completed your detailed assessment
 - c. Any time your partner is free
 - d. During the secondary assessment
8. It is important to update responding units / give a notification before
 - a. Evaluating the airway
 - b. Examining the chest
 - c. Checking for a carotid pulse
 - d. Transporting
9. Which of the following is not part of evaluating the skin?
 - a. Determining the color
 - b. Determining the thickness
 - c. Determining the moisture level
 - d. Determining the temperature
10. Why is it important to expose the chest when you are evaluating the breathing of your trauma patient?
 - a. to inspect for injuries that might affect breathing
 - b. to apply occlusive dressings to any sucking wounds
 - c. to stabilize any impaled objects
 - d. all of the above

MATCH THE COLLUMNS:

11. SAMPLE	A. 60 to 100
12. Systolic Blood Pressure	B. Lack of response to any stimuli
13. Diastolic Blood Pressure	C. Examine by touch
14. Jaundiced Skin Color	D. Caused by the contraction of left ventricle
15. Average adult pulse rate	E. Fainting spells
16. Unresponsive	F. Scraping or grinding noise
17. OPQRSTI	G. Caused by the relaxation of the left ventricle
18. Crepitus	H. Information gathered about the current problem
19. Syncope	I. Possible problems due to liver disease
20. Palpate	J. Information gathered about patient's past history
21. General Impression	K. Actions taken to correct a patient's problem
22. AVPU	L. Provides medical information about the patient
23. Interventions	M. Measures the saturation level of the blood.
24. Trending	N. Organs protruding from an abdominal laceration
25. Medic alert tag	O. Evaluation of the appearance of the patient
26. Eviseration	P. Flap of skin hanging off or torn loose
27. Pulse Oximeter	Q. Dark red, flowing blood
28. Leakage of CSF	R. Bright red, spurting blood
29. Avulsion	S. Level of the patient's responsiveness
30. Arterial bleed	T. Changes in a patient's condition over time.
31. Venous bleed	U. Evidence of a skull fracture

PUT PATIENT ASSESSMENT IN THE CORRECT ORDER USING THE LIST BELOW:

Circulation	Airway	Re-assessment	Transport Decision
Breathing	Scene Safety	Mechanism of Injury	Body Substance Isolation
History Taking	Secondary Assessment		

32) _____ 33) _____ 34) _____ 35) _____ 36) _____ 37) _____
 38) _____ 39) _____ 40) _____ 41) _____

PUT THE FOLLOWING STEPS IN ORDER TO SUCCESSFULLY TAKE A BLOOD PRESSURE BY THE PALPATION METHOD.

- A. Palpate the radial pulse and slowly inflate the B/P cuff.
- B. As soon as you feel the radial pulse return, note the number on the gauge.
- C. Add 20 to the number on the gauge when the pulse disappeared.
- D. Slowly deflate the cuff while feeling for the pulse.
- E. Place B/P cuff on patient's arm above the elbow.
- F. Place this number over the word PALP to document.
- G. When the radial pulse disappears, stop inflating the cuff.
- H. Inflate the B/P cuff to the new number, while palpating the radial pulse.
- I. Note the number on the gauge when the radial pulse disappeared.

42. _____ 43. _____ 44. _____ 45. _____ 46. _____ 47. _____ 48. _____ 49. _____ 50. _____