

SCENE SIZE-UP

STANDARD PRECAUTIONS

- Gloves, Safety Glasses, Gown, Mask as indicated

EVALUATE SCENE SAFETY

- Assess potential hazards to medical responders.
- Assess present or potential hazards to patient.
- Assess potential hazards to bystanders.
- Do not enter unsafe scenes.

EVALUATE FOR MASS CASUALTY

- Go to MCI and START Triage Protocols

NOTIFY DISPATCH IF ASSISTANCE REQUIRED

- Air Med intercept, Heavy lift, Extrication, Rescue, Fire, or Police

NOTE MECHANISM OF INJURY

- **Falls** >10 feet (Adult and Pediatrics)
- **High-risk auto crash**
 - Intrusion, including roof: >12 inches occupant side; >18 inches any side
 - Ejection (partial or complete) from automobile
 - Death in same passenger compartment
 - Pediatrics unrestrained or in an unsecured child safety seat
- **Auto vs. pedestrian/bicyclist/ATV thrown, run over or with significant (>20 mph) impact**
- **Motorcycle crash >20 mph**

Pearls:

- Certain mechanisms of injury (MOI) are predictors of poor patient outcomes and necessitate the highest level of vigilance.
- Suspected spinal injuries require spinal motion restriction during evaluation and movement.

BRING ALL INDICATED EQUIPMENT

- Mandatory bedside equipment: Oxygen, cardiac monitor, ALS equipment, and a suctioning device.
- The type of call may indicate other equipment, e.g., OB Kit for possible delivery.
- Transfer devices are mandatory when indicated.

PATIENT ASSESSMENT ON SCENE

Patient assessment should be performed on scene. You may transfer the patient to the back of the unit for assessment and treatment, if any of the following conditions exists:

- Poor weather conditions affect an out-of-doors scene
- Poor lighting or other environmental conditions interfere with patient care
- Difficult crowd conditions
- Unsafe scene
- Discretion warrants that you not expose the patient to bystanders
- Other environmental conditions interfere with patient care
- Transport should be initiated as soon as the patient is loaded into the unit unless extenuating circumstances exist