

Patient Assessment – 2023

		Done			
Did the candidate					
*1.	Consider scene safety: Are there any dangers to self or others?				
*2.	Communicate they are on scene noting the time of arrival and location?				
*3.	Consider the PPE required? Donn PPE before approaching the patient?				
4.	Look for the mechanism of injury?				
5.	Look for the number of people injured? Conduct triage if more than one?				
6.	Look for severe bleeding?				
7.	Look for angulated fractures?				
8.	Look for the patient's physical and emotional response?				
9.	Look for the patient's skin condition (colour, moisture)?				
10.	Communicate incident status (request further assistance or equipment if required immediately)?				
Primary Ass	sessment: Approach				
Did the can	didate				
11.	Approach the patient face to face (if possible), stop and maintain physical distance?				
12.	Check for responsiveness and obtain consent: "Hello, my name is I am a Canadian Ski Patroller trained in first aid. May I help you?"?				
13.	Caution patient not to move? "Please do not move until I have checked you for injuries."				
14.	Ask "What is your name?"?				
15.	In a declared epidemic or pandemic environment, follow public health guidelines, ensure that additional screening is completed, and that patient required PPE is considered?				
16.	Ask "What happened? How long ago did it happen?"?				
17.	Ask "Do you hurt anywhere? Have you had this before?"?				
*18.	Acknowledge the patient's chief complaint and quickly check the site for life-threatening signs/symptoms?				
19.	Assess level of consciousness (LOC – AVPU)?				
Primary Ass	sessment: ABCD				
Did the can	didate				
*20.	Check for and, if necessary, establish a clear airway?				
*21.	Look, listen, and feel for breathing for presence, depth and effort for no more than 10 seconds?				
22	Ask "Can you take a deep breath? How did that feel?"?				
*23.	Assess pulse for presence, strength, and rhythm for no more than 10 seconds?				
24.	Consider the need for oxygen?				
25.	Ask "Do you have any pain or tingling in your neck or back?"?				
26.	Ask "Can you wiggle your fingers and toes? Can you feel your fingers and toes?"?				
*27.	Assess the neck and cervical vertebrae and consider the application of spinal motion restriction based on the SMR protocol?				



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Primary As	sessment: Neck to femur				
Did the car	ndidate				
28.	Assess the neck: Look for DCAP-BLS. Feel for TIC? Check gloves for blood or wetness?				
29.	Assess the back: Cervical vertebrae to coccyx? Look for DCAP-BLS. Feel for TIC? Check gloves for blood or wetness?				
30.	Assess the chest: Squeeze at sides once with both hands? Look for DCAPP-BLS? Feel for TICS? Check gloves for blood or wetness?				
31.	Assess the abdomen: Four quadrants? Look for DCAP-BLS? Feel for TRGDE? Check gloves for blood or wetness?				
32.	Assess the pelvis: Squeeze iliac crests together? Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?				
33.	Assess the femurs: Firmly squeeze each femur with both hands? Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?				
Transporta	ation Decision and Communication:				
Did the car	ndidate				
34.	Make a transportation decision if not already made and communicated? ('load and go' or 'stay and treat')				
35.	Communicate severity and details of injuries. Activate EMS if necessary?				
Secondary	Assessment: Vital Signs				
36.	Time vital signs were measured.				
37.	Airway and breathing (rate, depth, effort).				
38.	Pulse (rate, strength, rhythm).				
39.	Blood pressure (estimated by pulse or actual by cuff and stethoscope).				
40.	Level of consciousness (AVPU).				
41.	Pupils (size, equality and reaction).				
42.	Skin condition (colour, moisture, temperature).				
43.	Pain (OPQRST).				
44.	Information gathered to this point recorded on Intervention Report (Patient Assessment or Patient Care Report)				
Secondary	Assessment: Head to toe				
Did the car	ndidate				
J.a inc cui	Assess the head: Examine eyes, nose, ears, mouth, and jaw? Look for DCAP-BLS. Feel for TIC? Check				
45.	gloves for blood or wetness?				
46.	Assess the neck: Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?				
47.	Assess the right clavicle: Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?				
48.	Assess the left clavicle: Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?				
49.	Assess the right scapula: Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?				
50.	Assess the left scapula: Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?				
51.	Assess the back (feel out beyond the spinal cord): Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?				
52.	Assess the chest: Look for DCAPP-BLS? Feel for TICS? Check gloves for blood or wetness?				
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53.	Assess the abdomen: Four quadrants? Look for DCAP-BLS? Feel for TRGDE? Check gloves for blood or wetness?			
54.	Assess the pelvis: Squeeze iliac crests together? Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?			
55.	Assess the right femur: Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?			
56.	Assess the right lower leg (check knee to toes): Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness? Check PMS?			
57.	Assess the left femur: Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness?			
58.	Assess the left lower leg (check knee to toes): Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness? Check PMS?			
59.	Assess the right arm (check shoulder to fingers): Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness? Check PMS?			
60.	Assess the left arm (check shoulder to fingers): Look for DCAP-BLS? Feel for TIC? Check gloves for blood or wetness. Check PMS?			
61.	Check throughout the assessment for MedicAlert®?			
62.	Record information as detailed on Intervention Report (Patient Assessment or Patient Care Report) in use?			
Questions	upon completion of the patient assessment.			
63.	When were life or limb threatening injuries treated?			
64.	What are the meanings of the acronyms DCAP-BLS and TIC?			
65.	What are you additionally looking and feeling for during your assessment of the chest?			
66.	What is the meaning of the acronym TRGDE?			
67.	What is the meaning of the acronym AVPU?			
68.	What is the meaning of the acronym OPQRST?			
	or evaluations purposes, candidate must obtain 80% (55/68) and review to 100%. lote: All items with * must be performed within the 80% to be considered successful.			

Date:	 	
Candidate name:	 	
Instructor name:		

Modifications to evaluations are not permitted without the written approval of the national training and development portfolio leader.