

## MODIFIED PATIENT ASSESSMENT PRACTICE CARD (Due to CoVid19)

The following is taken from the Canadian Ski Patrol, Patient Assessment process, that all patrollers use. It has been modified to include measures to help protect you the patroller and your patient. The modifications are highlighted in red. This does not show the entire Patient Assessment process from beginning to end.

Scene Assessment (yellow)	<b>Scene</b>	<b>Did the patroller...</b>		
		1	Note the time?	
		2 <b>CoVid19</b>	<b>Put on procedural gloves?</b> <b>Put on procedural face mask?</b> (wearing goggles and gloves are acceptable at this point) <b>Be Prepared to put of a face shield and disposable gown if necessary.</b>	
		3	Ensure there are no further dangers to himself, the patient, or any others?	
		4	Determine the probable mechanism of injury?	
		5	Look for the skin colour of the patient?	
		6	Determine the number of people injured?	
		7	Determine if there was major bleeding?	
		8	Determine if there are angulated fractures?	
		9	Determine the patient's response – physically and emotional	
		10	Consider calling for additional help?	
Approach (Orange)	<b>Approach</b>	<b>Did the Patroller...</b>		
	11A <b>CoVid19</b>	<b>STOP! MAINTAIN PHYSICAL DISTANCING OF AT LEAST 2-METRES.</b> <b>Do not approach face to face before you have determined the following;</b>		
	<p><b>Identify yourself</b>, "I am a Canadian Ski Patroller trained in first aid. May I help you?"  <b>Say</b>, "Please do not move until I have check you for injuries"  <b>Ask</b>, "What happened, where they are hurt or injured. T  <b>Ask the following Screening Questions</b>, "Do you have any <b>NEW</b>, or <b>Worsening</b>;</p> <ul style="list-style-type: none"> <li>• New or worsening Cough</li> <li>• Shortness of breath or difficulty breathing</li> <li>• Fever (i.e. chills, sweats)</li> <li>• A temperature equal to or over 38°C</li> <li>• Fatigue or weakness</li> <li>• Muscle or body aches</li> <li>• Loss of sense of smell or taste</li> <li>• Headache</li> <li>• Gastrointestinal symptom (abdominal pain, diarrhea, vomiting)</li> <li>• Feeling very unwell</li> </ul> <p>Children tend to have abdominal symptoms and skin changes or rashes                      (Red, purple or blueish lesions, on the feet, toes or fingers without clear cause)</p> <p><b>Screen everyone</b> for the following risk factors;</p> <ul style="list-style-type: none"> <li>• Been ordered to be in a 14-day self-isolation?</li> <li>• Have tested positive for COVID-19 within the last 14 days?</li> <li>• Had known contact with a confirmed positive case COVID-19 in the last 14-days?</li> <li>• Had close contact with any person with acute respiratory illness who has travelled outside your province in the last 14 days?</li> <li>• Travelled anywhere outside of Canada or when required by provincial regulations, your province in the last 14 days?</li> </ul> <p><b>If the patient answers <u>NO</u> to the screening questions</b>, proceed with the assumption they are asymptomatic.</p> <p><b>If the patient answers <u>YES</u> to one or more of the screening questions, maintain your two metre distance. Assume they are <u>POSITIVE</u> and ensure you are wearing a procedural mask, face shield, examination gloves and disposable gown.</b></p> <p><b>Say</b> "Due to ongoing concerns related to COVID-19 I am providing you with a protective face mask. Can I approach you and assist you to put it on?" Have the patient put it on themselves with instructions, when possible, to avoid handling the same mask. <b>See Note, If patient refused to refuses to wear a mask.</b></p> <p><b>Note</b> record the screening information the patient related to you on the COVID-19 Screening FORM                      (In Nova Scotia it is strongly advisable to have the patient displaying these symptoms call 811 and speak with nurse about testing.)</p>			

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<b>Primary Assessment (red)</b>	<p><b>Absolutely</b> ensure that all assisting patrollers maintain proper distancing unless called upon to assist you. Any patrollers assisting must be properly protected with a procedural mask, examination gloves and face shield if required.</p> <p><b>An unresponsive patient should be treated as if they had answered one of the above with a “yes” and the patroller should approach and place a procedural mask on the patients face. Unresponsive protocols in effect.</b></p>		
	11B	The patroller may now approach the patient face to face.	
	12	Reintroduced himself and obtained permission to help/examine?	
	13	Tell the patient not to move until he has been checked for injuries?	
	14	Assessed the patient’s level of consciousness? (Name, date, time, location, AVPU or GCS)	
	15	Told the patient “I am now going to hold your head”, and applied C-spine control?	
	16	Ask the patient if he remembers what happened?	
	17	Ask the patient if he can take a deep breath and if it hurts doing so?	
	18	Ask patient if he has pain anywhere? (and checked the chief complaint)	
	19	Ask the patient if he has any pain or tingling in his neck or back?	
	20	Ask the patient if he can wiggle his toes and fingers? (PMS)	
<b>Primary Assessment (red)</b>	<b>ABCD’s</b>	<b>Did the Patroller...</b>	
	<p><b>Only after donning PPE, all immediately recognizable life-threatening injuries must be dealt with immediately.</b></p>		
	21	Check that the patient’s airway is open and clear? <b>A</b>	
	22	Check that breathing is present, adequate, and its quality (only; not rhythm)? <b>B</b>	
	<p>Note with regard to CPR and the use of a BVM:</p> <p>The BVM must be equipped with a hepa filter between the mask and the BVM “duck” valve in order to prevent aerosol droplet dispersal from the patient. patrollers working within 2-metres of the patient must, in addition to mask and gloves, wear a face shield.</p>		
	23	Considered using oxygen (if necessary, based on the injuries)?	
	24	Check the pulse is present (neck and wrist; quality only and not rhythm)? <b>C</b>	
	25	Check the skin? [Not a priority]	
	26	Determined the patient’s level of consciousness (AVPU) and that spinal function is intact? <b>D</b>	
	<b>Primary</b>	<b>Did the Patroller check...</b>	
	27	The neck (expose as appropriate, DCAPBLS, TIC, wetness)	
	28	The chest (expose as appropriate, DCAPBLS, TICS, wetness, using both hands)	
	29	The abdomen (expose as appropriate, DCAPBLS, TGRDE [not as such in Manual], wetness, all four quadrants)	
	30	The pelvis (expose as appropriate DCAPBLS, TIC, wetness, push down and out, push in)	
	31	The thighs (expose as appropriate, DCAPBLS, TIC, wetness, use both hands progressively, to the bone)	
	32	The back (DCAPBLS, TIC, wetness, full evaluation)	
33	Gloves continuously for signs of bleeding?		
<b>Primary</b>	<b>Did the Patroller check...</b>		
34	Make a transportation decision by this time? (stay and stabilize or load & go)		
35	Treat life threatening injuries when found in primary?		
36	Communicate severity of injuries?		
<b>Vital Signs</b>	<b>Vital Signs</b>	<b>Did the Patroller evaluate and note... (It is imperative that Vital signs be noted)</b>	
	37	Time of accident?	
	38	Record patient information (Name and contact information)	
	39	Respiration? (rate, strength/depth, regularity)	
	40	Pulse? (rate, strength, regularity; carotid and radial, if different)	

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Vital Signs & Medical Assessment	41	Pupils? (size, equality, responsiveness)	
	42	Skin? (colour, temperature, wetness)	
	43	Level of consciousness? (AVPU or GCS)	
	44	Blood pressure (by palpation of pulse or BP cuff).	
	45	Pain classification and level? (OPQRST, 0-10)	
	46	Record witness information? (if applicable) <b>Keep witness at least 2-M away from the patient.</b>	
	Medical	Did the Patroller establish and note <b>(It is imperative that Vital signs be noted)</b>	
	47	Allergies (Med Alert)	
	48	Medications (Name, Times, last taken, Meds not taken)	
	49	Past Medical History (Pre-Existing Conditions)	
	50	Events leading to injury or illness	
	51	Patient last eat, void	
	Patient Notes are a critical aspect of the "Patient Assessment". The recording of relevant medical information, vital signs, and the recording of the results of the Pre-Assessment questions are vital.		
Secondary Assessment (light blue)	Secondary	Did the Patroller check...	
	52	The head? (DCAPBLS, TIC, eyes, nose, ears, mouth, jaw)	
	53	The neck? (DCAPBLS, TIC)	
	54	The right clavicle?	
	55	The left clavicle?	
	56	The right scapula?	
	57	The left scapula?	
	58	The chest? (Using both hands)	
	59	The abdomen? (Four quadrants)	
	60	The pelvis? (press both sides together, then down if no pain)	
	61	The right leg? (DCAPBLS, TIC)	
	62	The right foot? (PMS)	
	63	The left leg? (DCAPBLS, TIC)	
	64	The left foot? (PMS)	
	65	The right arm? (DCAPBLS, TIC)	
	66	The right hand? (PMS)	
	67	The left arm? (DCAPBLS, TIC)	
	68	The left hand? (PMS)	
69	The back? (DCAPBLS, TIC, feel out beyond the spinal cord)		
70	Wetness / body fluids re-checks throughout exam.		
<p>If the patient answers "Yes" to any of the screen questions, the first-in patroller should treat any life threatening injuries and immediately call for EMS and inform them that you have a possible COVID-19 positive patient. The patient must be isolated from further public exposure. Second-in patrollers must maintain 2M (6 ft) from the patient unless absolutely needed for patient treatment but can assist from a distance.</p> <p><b>Once hand over with EMS is complete, consider isolation for the first-in patroller</b> or any patrollers that had direct contact with the patient.</p> <p>Equipment including first aid supplies and equipment can be passed to the patroller(s) in contact with the patient. This action is to ensure that patrollers and equipment have a minimal contact with the patient.</p> <p>The CSP is encouraging screening of any patient regardless if they may have already been screened to ensure safety of patrollers. If you can ensure the person is screened already, the second screening may be eliminated. Patrollers should always ask the person if they did the screening and when the test was done and if they answered no.</p> <p>Note: Patient we will ask every patient to wear a mask as well. We cannot force nor would we utilize if it would negatively impact patient outcome.</p>			