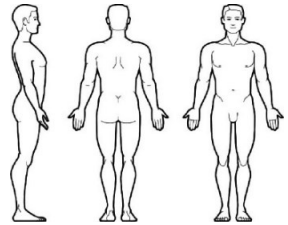


Patient 1		Team Name				Assessors								
Patient 2		Date:		Time:										
Patient 3		Scenario number:				Weighting								
Safety	1. Safe 360 Approach & Access				Initial Survey & Patient ID	6. ID & Communicate the Initial LOC				Airway	11. Management of Patency			
	0	2	4	6		0	2	4	6		0	2	4	6
	Hazard Identification & Mitigation					Breathing	7. Inspects & Manages Cat. Haemorrhage				12. Present			
	0	2	4	6			0	2	4	6	0	2	4	6
	3. Wear & Maintain Correct PPE				Airway	8. Reports Patient Condition to Team				13. Chest Inspection & Assessment				
	0	2	4	6		0	2	4	6	0	2	4	6	
	4. Patient Safety & Protection Throughout					9. Airway Manoeuvre				14. Resp Rate/Depth/Effort				
	0	2	4	6		0	2	4	6	0	2	4	6	
5. Bystander Safety & Protection Throughout				Breathing	10. Inspection of Airway				15. Interventions, SpO2 & O2					
0	2	4	6		0	2	4	6	0	2	4	6		
Circulation	16. Haemorrhage Management				Disability	20. Conscious Level				Examine & Exposure	24. Identifies all injuries & abnormalities			
	0	2	4	6		0	2	4	6		0	2	4	6
	17. Assess for Circulation					21. Pupils Assessment				25. Appropriate Clinical Intervention				
	0	2	4	6		0	2	4	6	0	2	4	6	
	18. Peripheral and/or Central Pulses					22. CSM Examination				26. Medical History				
	0	2	4	6		0	2	4	6	0	2	4	6	
19. Manages Poor Circulation				Examine & Exposure	23. Ongoing Assessment				27. Vital Signs					
0	2	4	6		0	2	4	6	0	2	4	6		
Medical Actions - Life Threatening - Serious Non-Life Threat - Non-Serious														
Patient 1	28. Injury/Medical Issues ID				Patient 2	31. Injury/Medical Issues ID								
	0	2	4	6		0	2	4	6					
	29. ID & Communicate Status Decision					32. ID & Communicate Status Decision								
	0	2	4	6		0	2	4	6					
30. Patient-Centered Management & Treatment				Examine & Exposure	33. Patient-Centered Management & Treatment									
0	2	4	6		0	2	4	6						
Notes														
Assessors signature:														

Patient 1	Team Name		Assessors	
Patient 2	Date:	Time:		
Patient 3	Scenario number:		Weighting	

Secondary Survey	34. Full patient assessment	Patient Centred	40. Pain and Oxygen Management	Transport Packaging	46. Priorities & Time Management
	0 2 4 6		0 2 4 6		0 2 4 6
	35. Secondary Issues Identified		41. Handling, Movement & Packaging		47. Ongoing Patient Comfort & Care
	0 2 4 6		0 2 4 6		0 2 4 6
	36. Full History		42. Spinal Motion Restriction Decision & Management		48. Planning, Supervision & Leadership
	0 2 4 6		0 2 4 6		0 2 4 6
	37. Reassessment & Vitals		43. Transport Packaging Management		49 Injury & Interventions Management
	0 2 4 6		0 2 4 6		0 2 4 6
38. Neurovascular status	Patient Management	44. Pain Recognition & Management	Transport Packaging	50. Appropriate Patient Packaging, Movement & Handling	
0 2 4 6		0 2 4 6		0 2 4 6	
39. Treatment & Planning		45. Patient Centered & Planned		51. Reassessed Post Movement & Packaging	
0 2 4 6	0 2 4 6	0 2 4 6	0 2 4 6		

Scene Management	52. Communications with Patient(s)	Handover	58. Handover	
	0 2 4 6		0 2 4 6	
	53. Communication with Team & Bystander(s)		Intro	
	0 2 4 6		Mol	
	54. Triage		Injuries	
	0 2 4 6		Signs & Symptoms	
	55. Situational Awareness & Use of Bystander(s)		Treatment & Trends	
	0 2 4 6		Allergies	
56. Management of Resources & Equipment	Medications			
0 2 4 6	Background			
57. Planning & Progression	Other			
0 2 4 6				

Positive	Learning

Assessors signature: _____

TRAUMA CHALLENGE - MEDICAL ASSESSMENT GUIDELINES

Safety	1. Safe 360 Approach & Access							
	0	Does not have a safe 360 approach or access	2	The 360 approach & access was somewhat safe	4	The 360 approach & access was mostly safe	6	The 360 approach & access was extremely safe
	2. Hazard Identification & Mitigation							
	0	Does not identify & mitigate hazards	2	Identifies & mitigates hazards insufficiently and limited or no rechecking	4	Identifies & mitigates hazards well with some rechecking	6	Identifies & mitigates hazards excellently with correct rechecking
	3. Wears & Maintain Correct PPE							
0	Does not wear & maintain correct PPE	2	Wore & maintained correct PPE but not consistently and may not have changed or transitioned as appropriate	4	Wore & maintained correct PPE consistently and may have been delayed in changing or transitioning as appropriate	6	Wore & maintained correct PPE consistently and changed or transitioned as appropriate excellently	
4. Patient Safety & Protection Throughout								
0	Does not provide patient safety & protection throughout	2	Provided patient safety & protection but insufficiently and/or delayed	4	Provided patient safety & protection well but may have been short gaps or delays	6	Provided patient safety & protection excellently throughout	
5. Bystander Safety & Protection Throughout								
0	Does not provide bystander safety & protection throughout	2	Provided bystander safety & protection but insufficiently and/or delayed	4	Provided bystander safety & protection well but may have been short gaps or delays	6	Provided bystander safety & protection excellently throughout	
Initial Survey & Patient ID	6. ID & Communicate the Initial LOC							
	0	Does not identify and communicate the initial level of consciousness	2	Identifies and communicates the initial level of consciousness after 2 minutes	4	Identifies and communicates the initial level of consciousness after 1 minutes	6	Identifies and communicates the initial level of consciousness in less than 1 minute
	7. Inspects for & manage Catastrophic Haemorrhage							
0	Does not inspect for and manage catastrophic haemorrhage	2	Inspects for and manages catastrophic haemorrhage after 2 minutes <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>	4	Inspects for and manages catastrophic haemorrhage after 1 minute <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>	6	Inspects for and manages catastrophic haemorrhage in less than 1 minute <i>See Haemorrhage Management under "Circulation" for scoring of any management required</i>	
8. Reports Patient Condition to Team								
0	Does not report the patient condition to the team	2	Reports the patient condition to the team after 4 minutes	4	Reports the patient condition to the team after 3 minutes	6	Reports the patient condition to the team in less than 2 minutes	
Airway	9. Airway Manoeuvre							
	0	Does not identify the need for and/or perform any airway manoeuvre	2	Identifies the need for an airway manoeuvre but performs it late and/or without sufficient care and/or competency	4	Identifies the need for an airway manoeuvre and performs it within a reasonable time and with sufficient care and/or competency	6	Identifies the need for an airway manoeuvre and performs it within an appropriate time and with excellent care and/or competency
	10. Inspection of Airway							
0	Does not inspect airway	2	Inspects the patients airway poorly, but does not check for patency, contamination or foreign objects	4	Inspects the patients airway well, does check for patency, contamination or foreign objects but maybe delayed	6	Inspects the patients airway excellently, does check for patency, contamination or foreign objects thoroughly and in a timely manner	
11 Management of Patency								
0	Does not manage the patency of the airway	2	Manages the patency poorly, does not consider an adjunct and/or suctioning	4	Manages the patency well, considers and/or places an adjunct and/or suctioning	6	Excellent management of airway patency, considers and/or correctly sizes and places any adjunct and/or suctioning	
Breathing	12. Present							
	0	Does not check if breathing is present	2	Identifies breathing is present or not but > 2 minutes	4	Identifies breathing is present or not within 1 to 2 minutes	6	Identifies breathing is present or not in < 1 minute
13. Chest Inspection & Assessment								

Bre	0	Does not inspect or assesses the chest	2	Inspects and/or assesses the chest, but not anterior, lateral and posterior, no auscultation and/or equal bilateral movement	4	Inspects and/or assesses the chest, but not anterior, lateral and posterior, no auscultation and/or equal bilateral movement	6	Inspects and assesses the chest, anterior, lateral and posterior, auscultation and equal bilateral movement	
	14. Resp Rate/Depth/Effort								
Breathing	0	Does not check the breathing rate and/or depth and/or effort	2	Checks for breathing rate and/or depth and/or effort but not in a sufficient manner	4	Checks for breathing rate and/or depth and/or effort well	6	Checks for breathing rate and depth and effort thoroughly and in detail	
	15. Interventions, SpO2 & O2								
	0	Does not make any interventions, takes SpO2 or considers application of O2	2	Makes basic interventions based on chest inspection and assessment, applies SpO2 but does not follow readings to make a decision to apply and/or titrate O2 or applies O2 late or using incorrect device and flow	4	Makes interventions based on chest inspection and assessment, applies SpO2 and does follow readings but maybe not to decide to apply and/or titrate O2 (94% - 98%) Applies O2 at a reasonable time and using the correct device and flow	6	Makes interventions based on chest inspection and assessment, applies SpO2 and does follow readings to decide to apply and/or titrate O2 (94% - 98%). Applies and/or withdraws O2 at the correct time and using the correct device and flow	
Circulation	16. Haemorrhage Management								
	0	Does not manage any further haemorrhage found	2	Manages haemorrhage found in an insufficient manner	4	Manages haemorrhage found in a good manner, with some rechecking	6	Manages haemorrhage found in an excellent manner, with full rechecking	
	17. Assess for Circulation								
	0	Does not assess for circulation	2	Assesses for circulation in an insufficient manner	4	Assesses for circulation in a good manner	6	Assesses for circulation in a manner that denotes an understanding and relevance to the casualty	
	18. Peripheral & Central Pulses								
0	Does not check for pulses	2	Checks pulse peripheral and/or central, may not get rate and/or quality and/or rhythm	4	Checks pulse peripheral and/or central, may not get rate and/or quality and/or rhythm or check symmetry (<i>Central pulse may not be required is peripheral pulse is present</i>)	6	Checks pulse peripheral and/or central, gets rate and/or quality and/or rhythm and check symmetry (<i>Central pulse may not be required is peripheral pulse is present</i>)		
19. Manages Poor Circulation									
0	Does not manage poor circulation	2	Manages for poor circulation in an insufficient manner	4	Manages for poor circulation in a good manner	6	Manages for poor circulation in a manner that denotes an understanding and relevance to the casualty		
Disability	20. Conscious Level								
	0	Does not check conscious level or respond to change of status	2	Check conscious level but does not apply criteria for AVPU decision reacts to change of status late	4	Check conscious level, does apply criteria for AVPU decision and reacts to change of status but may not apply criteria for AVPU appropriately	6	Check conscious level, does apply criteria for AVPU decision fully and reacts to change of status immediately and reapplies criteria for AVPU	
21. Pupils Assessment									
0	Does not assess pupils	2	Assesses pupils, but does not check all of PEERLA	4	Assesses pupils, does check PEERLA	6	Assesses pupils, does check PEERLA and reassess as necessary		
Disability	22. CSM Assessment								
	0	Does not check CSM	2	Assesses CSM but not in all extremities and not at correct time for interventions	4	Assesses CSM in all extremities but may not at correct time for interventions	6	Assesses CSM in all extremities and at correct time for interventions	
23. Ongoing Assessment									
0	Does not do an ongoing assessment regarding disability or reacts to a change of status	2	Rechecks some of AVPU, Pupils and CSM but not in good time and does not react to change in status	4	Rechecks AVPU, Pupils and CSM in good time and reacts to status change but may be not in appropriate time	6	Rechecks AVPU, Pupils and CSM in excellent time and reacts to status change immediately		

Exposure & Examine	24. Identifies all injuries & abnormalities							
	0	Does not identify any injuries & abnormalities	2	Identifies some injuries & abnormalities	4	Identifies the majority of injuries & abnormalities	6	Identifies all injuries & abnormalities
	25. Appropriate Clinical Interventions							
	0	Does not provide any appropriate clinical interventions based on assessment	2	Does provide some appropriate clinical interventions based on assessment	4	Does provide the majority and the critical appropriate clinical interventions based on assessment	6	Does provide all appropriate clinical interventions based on assessment
	26. Medical History							
0	Does not obtain AMPLE history	2	Obtains some AMPLE information	4	Obtains full AMPLE information	6	Obtains complete AMPLE information and reacts with appropriate interventions or change of care plan	
27. Vital Signs								
0	Does not obtain vital signs	2	Obtains some vital signs but incomplete and does not react to findings	4	Obtains all vital signs but may not react to findings	6	Obtains all vital signs and reacts to findings	
Medic Actions - Patient #	Injury/Medical Issues ID							
	0	Does not identify the injury / medical issues	2	Identifies some of the injury / medical issues and > 10 minutes	4	Identifies all of the injury / medical issues in <8 minutes	6	Identifies all of the injury / medical issues in <5 minutes
	ID & Communicate Medical / Physical Entrapment							
	0	Does not identify & communicate medical / physical entrapment	2	Identifies & communicate medical / physical entrapment in >8 minutes	4	Identifies & communicate medical / physical entrapment within 5 minutes	6	Identifies & communicate medical / physical entrapment within 3 minutes
Patient Centered Management & Treatment								
0	Does not demonstrate patient centred management & treatment	2	The management & treatment was somewhat patient centred	4	The management & treatment was mostly patient centred	6	The management & treatment was fully patient centred	
Secondary Survey	34. Full patient assessment							
	0	Does not start full patient Assessment	2	Undertakes a patient assessment but it is not complete head to toe and is unstructured	4	Patient assessment completed but, not in a logical sequence	6	Undertakes a full patient assessment in a structured manner that denotes an understanding and relevance to the casualty.
	35. Secondary Issues Identified							
	0	Does not identify any secondary issues	2	Identifies some secondary issues but not sufficiently and/or methodically	4	Identifies the majority of secondary issues well but not all and/or methodically	6	Identifies all of the secondary issues excellently in methodical way
	36. Full History							
	0	Does not reconfirm or obtain a history or AMPLE	2	Reconfirms the AMPLE information obtained in the primary survey	4	Reconfirms the full AMPLE information but may not react with appropriate interventions or change of care plan	6	Reconfirms that complete AMPLE information and reacts with appropriate interventions or change of care plan
	37. Reassessment & Vitals							
0	Does not reassess and/or obtain full set of vital signs	2	Reassess and/or obtains some vital signs but not complete	4	Reassess and/or obtains all vital signs but may not react to any changes	6	Reassess and obtains all vital signs and reacts to any changes	
38. Neurovascular Status								
0	Does not assess or reassesses	2	Reassesses CSM but not in all extremities and not at correct time for interventions	4	Reassesses CSM in all extremities but may not at correct time for interventions	6	Reassesses CSM in all extremities and at correct time for interventions	
39. Treatment & Planning								

Patient Centred	0	Does not demonstrate patient centred treatment & planning	2	The treatment & planning was somewhat patient centred	4	The treatment & planning was mostly patient centred	6	The treatment & planning was fully patient centred	
	40. Pain and Oxygen Management								
	0	Does not demonstrate patient centred pain & oxygen management	2	The pain & oxygen management was somewhat patient centred	4	The pain & oxygen management was mostly patient centred	6	The pain & oxygen management was fully patient centred	
	41. Handling, Movement & Packaging								
	0	Does not demonstrate patient centred handling, movement & packaging	2	The handling, movement & packaging was somewhat patient centred	4	The handling, movement & packaging was mostly patient centred	6	The handling, movement & packaging was fully patient centred	
	42. Spinal Motion Restriction Decision & Management								
	0	Does not demonstrate any spinal motion restriction decision & management	2	The spinal motion restriction decision & management was not based on the clinical assessment of the patient	4	The spinal motion restriction decision & management was mostly based on the clinical assessment of the patient	6	The spinal motion restriction decision & management was exclusively based on the clinical assessment of the patient	
43. Packaging Management									
0	Does not demonstrate any rescue and/or extrication management	2	The rescue and/or extrication was somewhat patient centred	4	The rescue and/or extrication was mostly patient centred	6	The rescue and/or extrication was fully patient centred		
Management	44. Pain Recognition & Management								
	0	Does not obtain a pain score or recognise the need for management	2	Obtains a pain score but does not manage the pain	4	Obtains a pain score and does manage the pain well using the resources available to them	6	Obtains a pain score and does manage the pain excellently with all the resources available to them	
	45. Patient Centred & Planned								
	0	Does not have patient centred management or plan	2	Management of patient was somewhat patient centred and planned	4	Management of patient was mostly patient centred and planned	6	Management of patient was fully patient centred and planned	
	46. Priorities & Time Management								
	0	Does not have priorities or time management	2	The management of the priorities and time were not sufficient	4	The management of the priorities and time was good	6	The management of the priorities and time was excellent	
47. Ongoing Patient Comfort & Care									
0	Does not have ongoing patient comfort and care	2	The ongoing patient comfort and care was not sufficient	4	The ongoing patient comfort and care was good	6	The ongoing patient comfort and care was excellent		
Transport Packaging	48. Planning, Supervision & Leadership								
	0	Does not have planning, supervision or leadership during the extrication	2	The planning, supervision and leadership during the extrication was not sufficiently coordinated by the medic	4	The planning, supervision and leadership during the extrication was well coordinated by the medic	6	The planning, supervision and leadership during the extrication was excellently coordinated by the medic	
	49. Injury & Intervention Management								
	0	Does not have any injury & intervention management during the extrication	2	The injury & intervention management was not sufficient during the extrication	4	The injury & intervention management was good during the extrication	6	The injury & intervention management was excellent during the extrication	
	50. Appropriate patient packaging, movement & handling								
0	Does not have appropriate patient packaging & handling	2	The appropriate patient packaging, movement & handling was not sufficient for the patients condition	4	The appropriate patient packaging, movement & handling was good for the patients condition	6	The appropriate patient packaging, movement & handling was excellent for the patients condition		
51. Reassessed post Movement & Packaging									
0	Does not reassess post movement and /or packaging	2	The patient and interventions were not reassessed sufficiently post movement and /or packaging	4	The patient and interventions were reassessed well post movement and /or packaging	6	The patient and interventions were reassessed excellently post movement and packaging		
52. Communications with Patient(s)									

Scene Management	0	Does not communicate with the patient(s)	2	Communication with the patient(s) was not sufficient and did not make the patient feel comforted or informed of what was going on	4	Communication with the patient(s) was good but did not fully make the patient feel comforted or informed of what was going on	6	Communication with the patient(s) was excellent and made the patient feel comforted and informed of what was going on
	53. Communication with Team & Bystander(s)							
Scene Management	0	Does not communicate with the team / bystander(s)	2	Communication with the team / bystander(s) was not sufficient and/or uncoordinated and/or too noisy and/or ineffective	4	Communication with the team / bystander(s) was good but may have been uncoordinated and/or too noisy and/or ineffective at times	6	Communication with the team and bystander(s) was excellent, coordinated, at the correct volume and very effective
	54. Triage							
Scene Management	0	Does not triage the patients	2	The triage of the patients was not sufficient, methodical or coordinated and may have been incorrectly classified	4	The triage of the patients was good, using a methodical procedure and coordination but with slight delays or some errors in classifications	6	The triage of the patients was excellent, using a methodical procedure and coordination and was at the right time and all classifications were correct
	55. Situational Awareness & Use of Bystander(s)							
Scene Management	0	Does not demonstrate any situational awareness, create work space or use of bystander(s)	2	Demonstrates some situational awareness and/or creates some work space / use of bystander(s) but not as much as they could have	4	Demonstrates good situational awareness and/or creates a reasonable amount of work space / uses of bystander(s) but not as much as they could have	6	Demonstrates excellent situational awareness and/or creates the most amount of work space / uses the bystander(s) as effectively as possible
	56. Management of Resources & Equipment							
Scene Management	0	Does not manage resources and equipment	2	Manages the resources and equipment in sufficiently, the resources are under utilised and equipment not used to full potential and/or contaminated	4	Manages the resources and equipment well, the resources and equipment are utilised buy maybe not to the full extent or slight contamination	6	Manages the resources and equipment excellently, the resources and equipment are fully utilised and no contamination
	57. Planning & Progression							
Handover	0	Does not demonstrate any planning & progression	2	Demonstrates insufficient planning & progression	4	Demonstrates good planning & progression	6	Demonstrates excellent planning & progression
	58. Handover							
Handover	0	Does not give a handover of the patient	2	Gives an incomplete handover of the patient and no structure	4	Gives an complete handover of the patient, but is not structured	6	Gives an complete and detailed handover of the patient in an excellent methodical structured fashion

Active spinal motion restriction until clinical assessment is complete

High risk factors - any of the following:

- (1) dangerous mechanism of injury
- (2) fall from a height >2 mts
- (3) axial load to the head or base of the spine – for example; diving, high-speed motor vehicle collision, rollover motor accident, ejection from a motor vehicle, accident involving motorised recreational vehicle, bicycle collision, horse riding accident, pedestrian v vehicle.
- (4) impaired awareness (alcohol/ drug intoxication, confused /uncooperative or ALoC)
- (5) age 65 years or older (6) age 2 years or younger incapable of verbal communication

Any significant distracting injuries

- (1) impaired awareness (alcohol/ drug intoxication, confused /uncooperative or ALoC)
- (2) immediate onset of spinal/ midline back pain
- (3) hand or foot weakness (motor issue)
- (4) altered or absent sensation in the hands or feet (sensory issue)
- (5) priapism
- (6) history of past spinal problems, including previous spinal surgery or conditions that predispose to instability of the spine. (7) Unable to actively rotate their neck 45 degrees to the left or right

Active spinal motion restriction: Using inline techniques with or without spinal injury management devices to reduce spinal column motion.

Passive spinal motion restriction: Requesting the patient to minimise his/her movement without external intervention and permitting the patient to adopt a position of comfort.