Assessment—STEP by STEP

Start at the Beginning

- You are informed a student is down in the hallway. You are to come to her since they can't seem to wake her up.

Assessment-Step by Step

- As you approach:

Assessment Step by Step

- What have you noticed?
  - Is the scene safe? **(Scene Safety Assesement)**
    - **There are no hazards present**
  - Is the student moving? **(From a Distance or From the Door Assessment)**
    - **She is not moving.**
  - Is this an injury mechanism or is she ill**? (Critical Observations)**
    - **Other students say she was at her locker and suddenly collapsed on the floor.**

Assessment Step by Step

- When you reach her side:
  - Do you see bleeding? **(Visual Assessment)**
    - **No, you see no bleeding**
  - How does she respond **(AVPU Assessment)**
    - **Alert?** No she is not awake
    - **Verbal** stimuli? She does not respond to your voice
    - **Painful?** She does not respond when you tap her shoulder
    - **Unresponsive?** Yes, she does not respond to any stimuli.

Priority Determination

- Is this student
  - SICK – Emergent
  - NOT SICK – Urgent
  - NOT SICK – Non- Urgent

Assessment Step by Step

- This student is SICK and EMERGENT.
  - What is the next step?
    - Have someone go and call 911 right away.

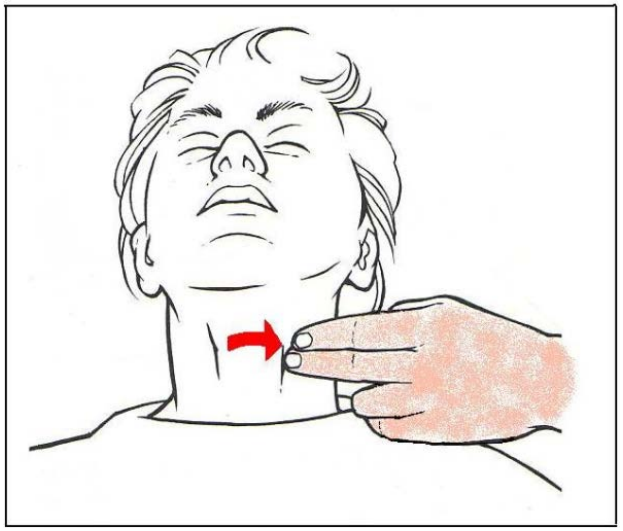
ASSESSMENT – STEP BY STEP

- The person is unconscious and unresponsive; 911 has been contacted, what next?
  - CAB Assessment
    - Circulation –check for a pulse
    - Check the airway
    - Check for breathing

Assessment – CAB step by step

- C= Circulation
  - Locate a pulse

  - Feel for 10 Seconds
  - Children younger than 12 may be difficult to find the carotid pulse.

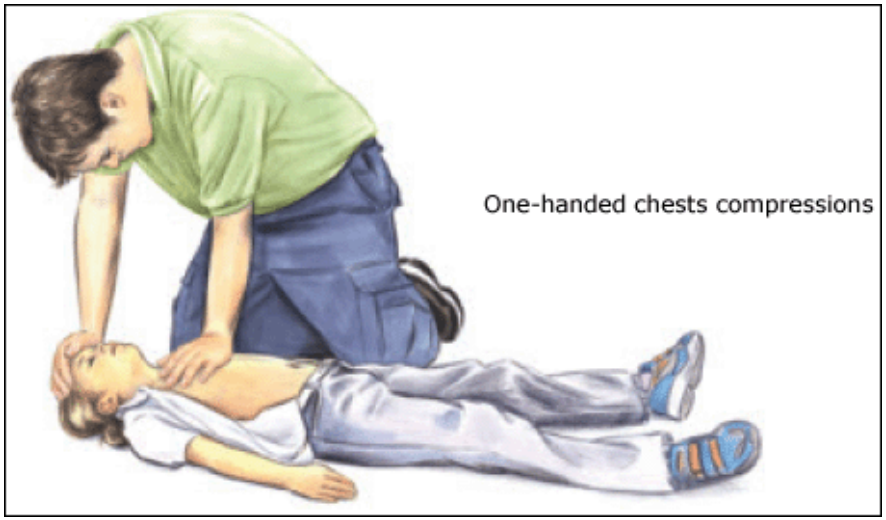


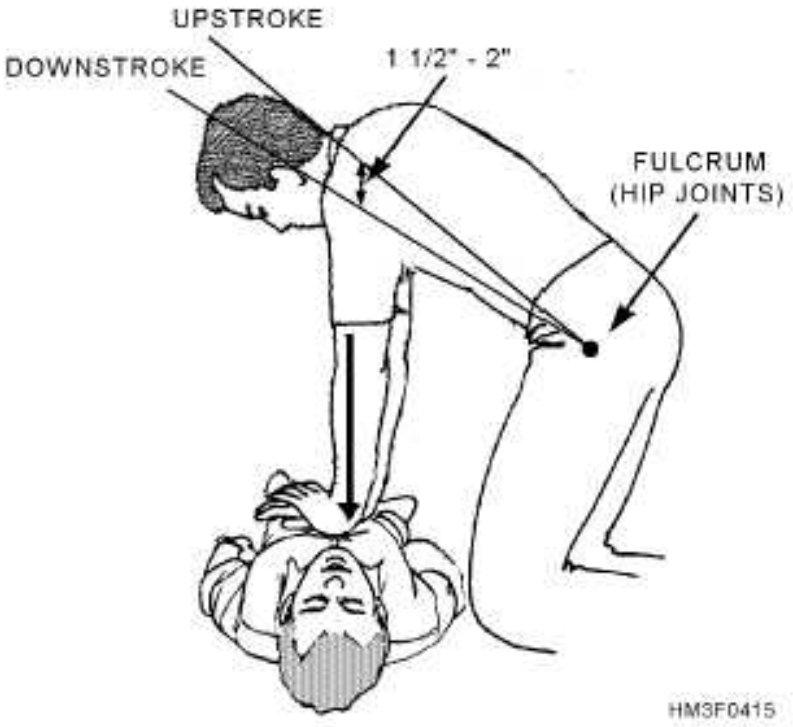
Assessment—CAB

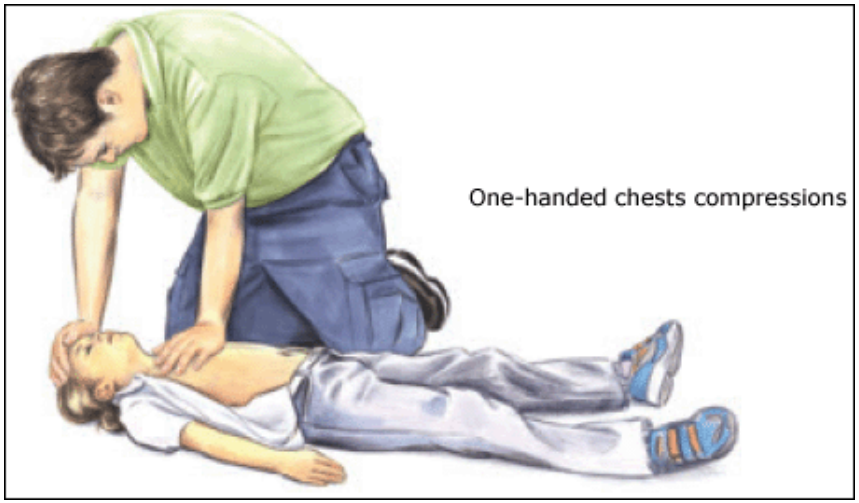
- C= Circulation
  - If there is no pulse
  - Or if the pulse is 30 beats/minute or less
  - Begin chest compressions
  - Call for an AED, if one is available

C=circulation—Chest Compressions

- Chest compressions
  - 100 per minute regardless of age.
  - Hands only. No ventilatory assistance
  - Center of the chest
    - Two hands for adults
    - One hand for children or smaller sized adults




UPSTROKE
DOWNSTROKE
1 1/2" - 2"
FULCRUM
(HIP JOINTS)
HM3F0415


One-handed chests compressions

C= Chest Compressions

- The purpose of this course is not to instruct you in CPR
  - Even if you have not taken a CPR course, doing something is better than doing nothing.
- You will push hard and fast on the chest
  - 1 ½ - 2 inches
- 100 times per minute
  - Do not stop unless you are too tired, are relieved by another rescuer or EMS arrives

C = Chest Compression

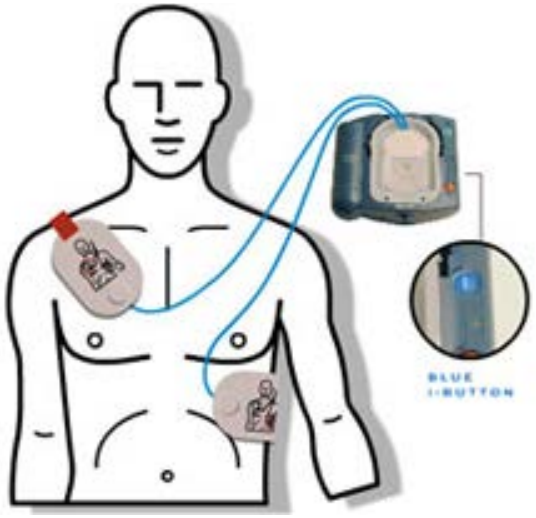
- The American Heart Association recommends chest compression with ventilation for infants and children (age of less than 12 years)
- Hands only CPR for adults (age 12 and older)
- Hands only CPR is continuous chest compressions without pausing to give breaths
- Reassess for a pulse every two minutes
- Only pause for 15 seconds or less.

Using the AED

- There are many, many different looking AEDs
- They all function pretty much the same.
- Turn on the AED and follow the voice prompts

Using the AED

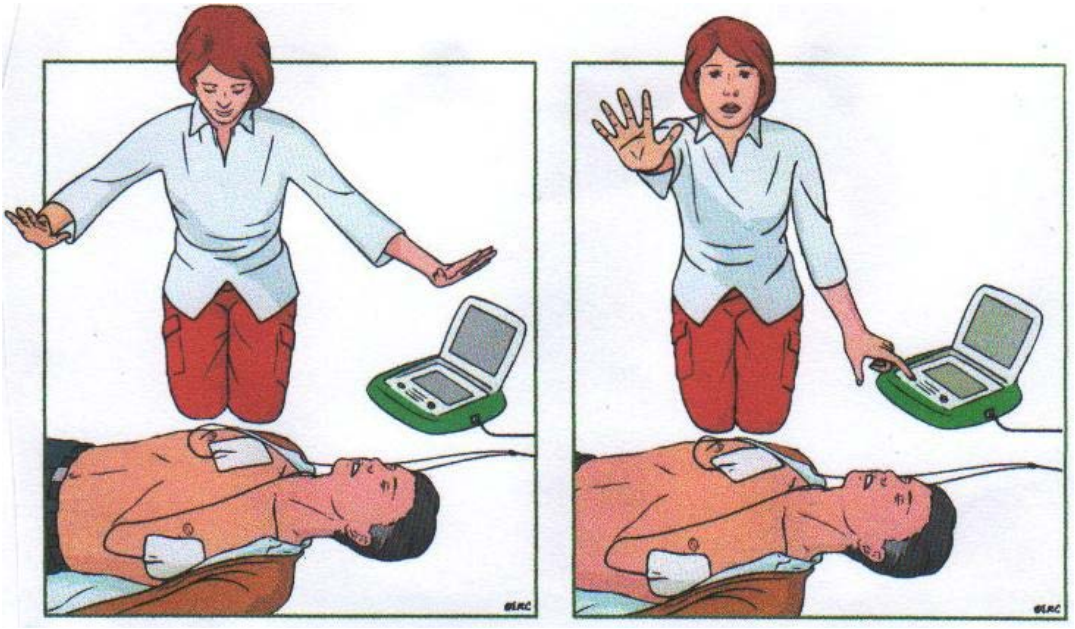
- Place the pads on the patient's chest



- Push the "ANALYZE " button if requested by the voice prompts
- Do not touch the patient while the AED is analyzing

Using the AED

- If the AED advises a shock prepare to push the "SHOCK" button



Be sure to clear everyone away from the patient before pushing the button!!

Using the AED

- Immediately begin chest compressions after the shock has been delivered.

- The AED will prompt for a re-assessment every 2 minutes

A= Airway

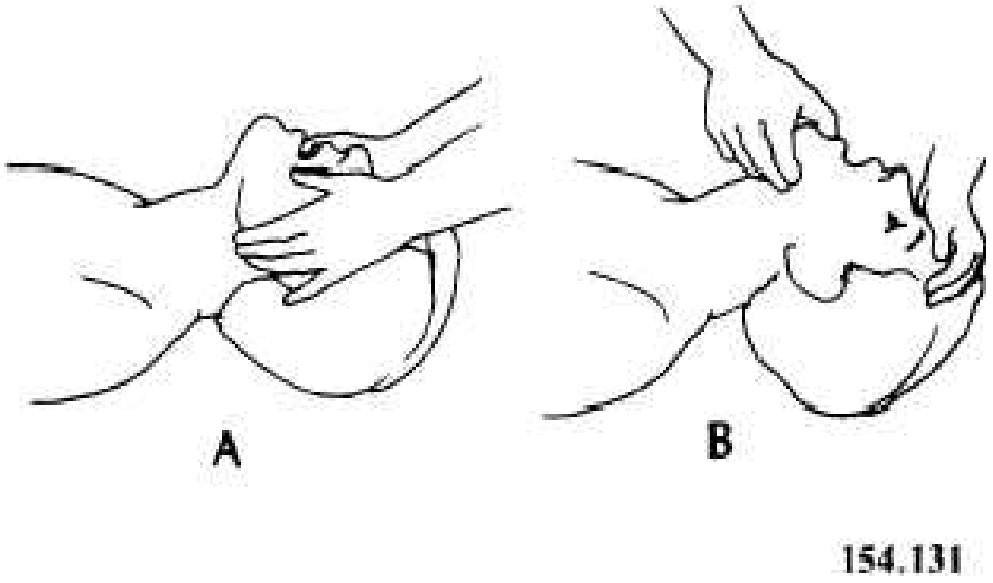
- If there is an adequate pulse (greater than 30 beats per minute) move on to airway
  - You are going to reassess the pulse every 2-3 minutes
- The airway is the passage between the nose and mouth to the lungs. Sometimes it can become blocked.
- The number one cause of obstruction in someone unconscious is the tongue.

A=Airway

- If there is little air moving or if there are noises on inhalation or exhalation, try to open the victims airway to allow for more air movement
- The person may have muscular movements which appear as though they are breathing but they are not moving any air.

A= Airway

- If no trauma is suspected– use head-tilt-chin-lift
- If trauma to the head or neck is suspected or if trauma is unknown, us the jaw-thrust method

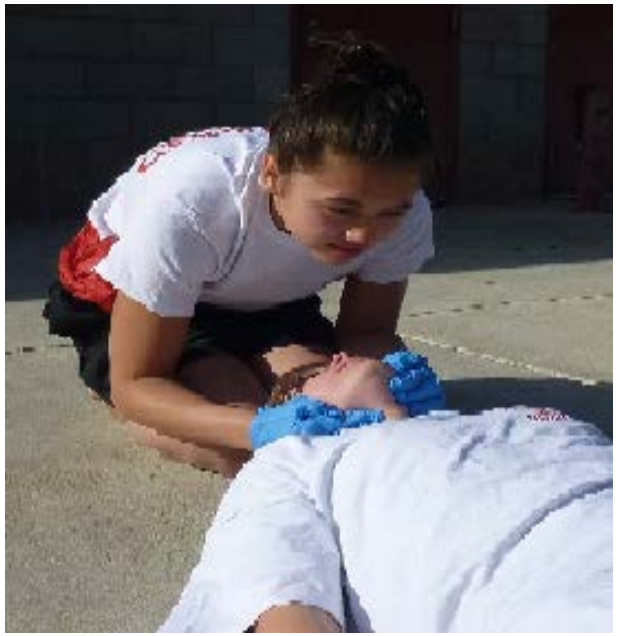


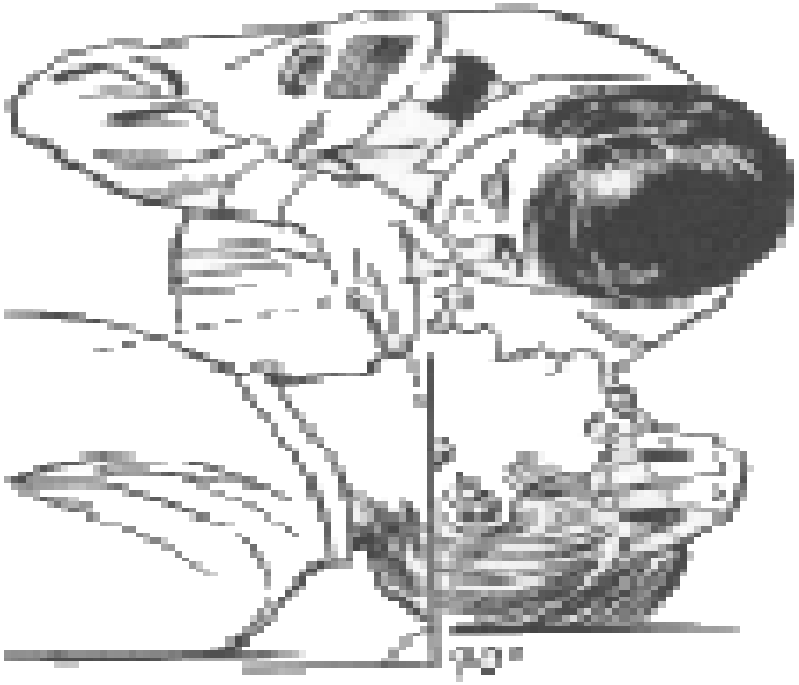
A = Airway

- If there is fluid or material in the student's mouth or airway, clear the airway with a cloth.
  - If there is no suspected trauma, turn the student to one side to help in removing the debris.
  - If there is known or suspected trauma, try to remove as much as possible from the mouth without moving the head and neck.
- Use the student's own shirt if no other cloth is available.

B=Breathing

- Look—watching for the chest to rise and fall
- Listen—for noises in the airway to indicate air is attempting to pass through
- Feel—the for air movement





B = Breathing

- If there is no air movement detected
- If there is little air movement detected
- Attempt to provide rescue breaths
  - Only until chest rise is noted
  - 1 breath every 3-5 seconds
  - Allow for complete exhalation
  - Reassess for a pulse every 2 minutes

B=Breathing

- Giving deeper breaths is not more beneficial
  - Can cause the stomach to become distended which results in regurgitation and potential aspiration
  - In younger students, can injure the lungs
- Breathing faster is not beneficial
  - Not enough time for full exhalation
  - Can reduce the ability to oxygenate the person.

B = Breathing

- If the Student is breathing but remains unresponsive or with decreased responsiveness,
  - If there is no suspected trauma
    - Place the student in the recovery position
    - Either left or right side.

Choking

- If a student or victim is conscious and choking:
  - Look for the classic signs of choking
    - Hands to the neck
    - Anxious look
    - Not able to speak

Choking

- Stand or kneel behind the person
  - Make a fist with one hand and place the thumb against the abdomen between the belly button and the diaphragm.
  - Cover the fist with the other hand and give several upward thrusts with the fist.

As if trying to pop a cork out of a bottle.

Choking

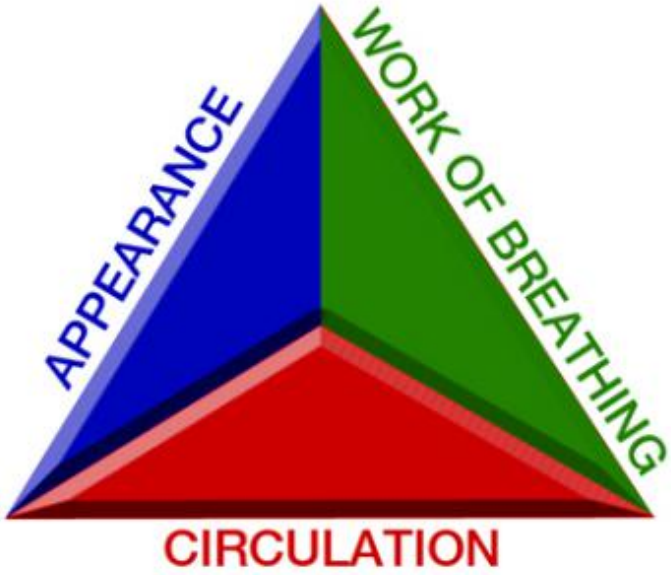
- Continue delivering abdominal thrusts until the obstruction is relieved or the person becomes unresponsive.
- If the person becomes unresponsive, begin CAB assessment and continue giving chest thrusts as if doing chest compressions.

Back to the Scenario

- The student who fell has a pulse, which is found to be rapid at 140.
- Her airway is open and there are no noises.
- She is found to be cool and moist.

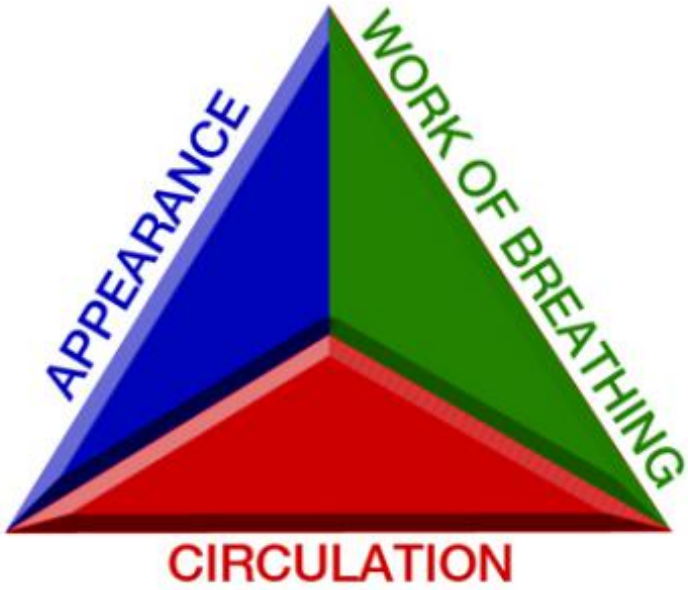
Apply the other Assessment Tools

- Assessment Triangle
  - Appearance/Activity
    - She is not moving
    - She is pale
    - She does not interact appropriately with her environment.



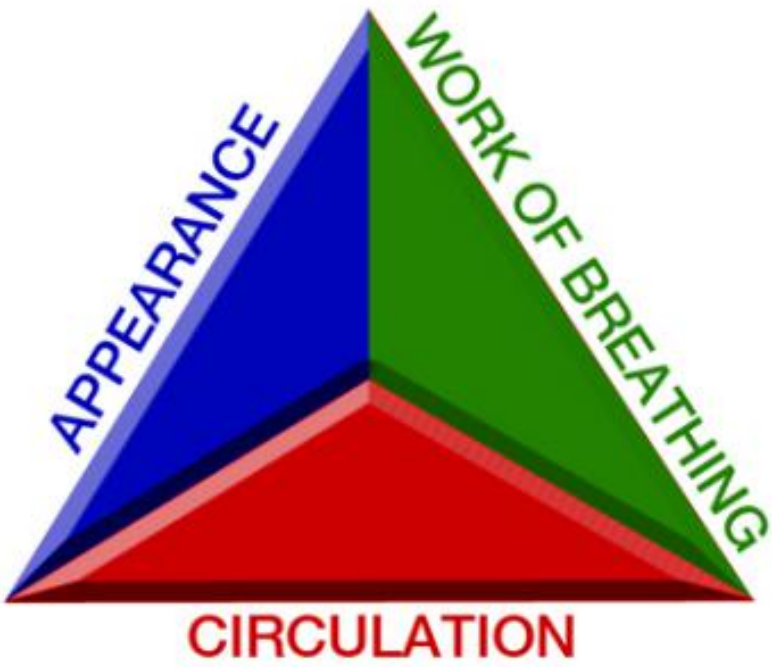
Apply the Assessment Tools

- Work of Breathing
  - She is breathing shallow and rapid
  - There are no noises



Apply the Assessment Tools

- Circulation
  - She has no bleeding
  - She is pale
  - Her pulse is rapid



Applying the Assessment Tools

- The OPQRST Assessment:
  - Onset – Playing on the slide and fell
  - Provocation/Palliation -- Unknown
  - Quality – Unknown
  - Radiation/Referred –Unknown
  - Severity – Unknown
  - Time – About 10-15 minutes ago

ABCDE Assessment

- Airway Breathing and Circulation have been assessed
- D= Disability/Mental Status
  - She is unconscious and unresponsive
- E= Exposure, Environment, Emotional
  - She was exposed to a fall of about 6 feet to a hard surface

Apply the Assessment Tools

- How did the Assessment Tools help in this circumstance?

Conclusion of the Scenario

- You know this student to have been recently diagnosed with Diabetes.
- She has had an insulin pump prescribed and it is in place.
- Her blood glucose is now 34. What is your next step?

A Review

- What is the rate of chest compressions for a student who is 11 years old and in the 4th grade?
- One of the teachers collapses in the hallway in front of you. You reach his side to discover he has no pulse. You call for help and ask for the AED as you begin chest compressions. When the AED arrives, what is your next action?
- The AED is advising that a shock is needed. What do you do first before pressing the "SHOCK" button?

Answers to The Review

- The rate for every student, regardless of age or size is 100 compressions per minute
- Your first action when the AED arrives is to turn it on.
- Always make sure no one is touching the patient before you press the “SHOCK” button

  (I’m clear, you’re clear, we’re all clear!)

ReCap

- So far we have:
  - Checked for scene hazards
  - Determined if the student is conscious or unconscious
  - Determined if the student has a pulse
  - Determined if the student is bleeding
  - Determined if the student has a clear airway
  - Determined if the student is breathing
  - Assessed for signs of shock