Chapter 11 - The Primary Assessment

OBJECTIVES

11.1 Define key terms introduced in this chapter. Slides 11–12, 14, 19–21, 28

11.2 Explain the purpose of the primary assessment. Slides 11–13

continued

OBJECTIVES

11.3 Discuss the difference in first steps to assessment if the patient is apparently lifeless (C-A-B approach) or if the patient has signs of life, including a pulse (A-B-C approach). Slides 11–13

continued
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OBJECTIVES

11.4 Given several scenarios, do the following: form a general impression, determine the chief complaint, determine the patient’s mental status, assess the airway, assess breathing, assess circulation, determine the patient’s priority for transport. Slides 18–29

OBJECTIVES

11.5 Recognize findings in the primary assessment that require immediate intervention. Slides 22, 27

OBJECTIVES

11.6 Differentiate the approach to the primary assessment based on the following: mechanism of injury/nature of the illness and level of responsiveness, patient’s age (adult, child, or infant). Slides 34–35
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MULTIMEDIA

- Slide 31 Prehospital Patient Video
- Slide 32 Initial Assessment Procedures Video

CORE CONCEPTS

- Deciding on the approach to the primary assessment
- Manual stabilization of the head and neck
- The general impression
- Assessment of mental status using the AVPU scale
- The ABCs as part of the assessment process
- How to make a priority decision

Topics

- Primary Assessment
- Patient Characteristics and Primary Assessment
Primary Assessment

Approach to the Primary Assessment

- Focus on life threats
- Airway (A), breathing (B), circulation (C)
- May vary depending on
  - Patient's condition
  - On the scene resources
  - Other

Approach to the Primary Assessment

- Order of A-B-C depends on initial impression of patient
- Sequence will vary
  - A-B-C if patient has signs of life
  - C-A-B if patient appears lifeless, no pulse
  - Immediate interventions may be needed
Primary Assessment Steps

- Forming a general impression
- Assessing mental status
- Assessing airway
- Assessing breathing
- Assessing circulation
- Determining patient priority

General Impression

- Assesses environment, patient's chief complaint, and appearance
- Helps determine patient severity
- Helps set priorities for care and transport

General Impression

- "Look Test": feeling from environmental observations as well as first look at patient
General Impression

• Findings that indicate critical patient
  – Altered mental status
  – Anxiety
  – Pale, sweaty skin
  – Obvious trauma to head, chest, abdomen, pelvis
  – Specific positions indicating distress

General Impression

• Patients appearing lifeless
  – Resuscitate by beginning CPR compressions
  – Prepare AED as soon as possible

Forming a General Impression

• Look
  – Patient’s age, sex, and position
• Listen
  – Moaning, snoring, or gurgling respirations
• Smell
  – Fumes, urine, feces, vomitus, or decay
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Chief Complaint

• Patient's description of why EMS was called
• May be specific—"abdominal pain"
• May be vague—"not feeling good"

Assess Mental Status: AVPU

• Alert
  – Document orientation to person, place, and time
• Verbal response
• Painful response
• Unresponsive

Assess ABCs

• Order of primary assessment will vary depending on patient's condition
• Airway
• Breathing
• Circulation
Airway

• If airway is not open or is endangered, take measures to open

Breathing

• Situations calling for breathing assistance
  – Respiratory arrest
  – Not alert, inadequate breathing
  – Some alertness, inadequate breathing
  – Adequate breathing, but signs suggesting respiratory distress or hypoxia

Circulation

• Assess pulse
• Assess skin
• Assess bleeding
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Circulation

• Three results of assessing pulse
  – Within normal limits
  – Unusually slow
  – Unusually fast

• Assessing skin
  – Good circulation: warm, pink, dry skin
  – Shock: pale, clammy (cool and moist) skin

Immediate Intervention

• Treat any life-threatening ABC problem as soon as discovered!
Determining Patient Priority

- Stable
  - Vital signs in normal range
- Potentially unstable
  - Potential for deterioration can indicate potentially unstable category
- Unstable
  - Threat to ABC’s rules out stability

Need for Priority Transport

- Initiate priority transport if a life-threatening problem cannot be controlled or threatens to recur
- Continue assessment and care en route

Think About It

- Why must you continue to re-evaluate the primary assessment?
Patient Characteristics

- Patient characteristics determine the form of assessment
  - Medical or traumatic problem?
  - Altered mental status?
  - Child or adult?

Pediatric Note

- Adjust assessment to social and physiological norms of children

Think About It

- How might normal findings in a primary assessment differ for a child compared with an adult?
Steps of Primary Assessment

- Despite patient characteristics, follow primary assessment steps systematically
  - General impression
  - Mental status
  - ABCs
  - Priority for transport

Chapter Review

- Primary assessment is a systematic approach to quickly find and treat immediate threats to life.
- General impression, although subjective, can provide extremely useful information regarding urgency of a patient's condition.
- Determination of mental status follows the AVPU approach.
Chapter Review

• Evaluating airway, breathing, and circulation quickly but thoroughly will reveal immediate threats to life that must be treated before further assessment.

• Patient’s priority describes how urgent patient’s need to be transported is and how to conduct the rest of the assessment.

Remember

• Determine if a problem is medical or traumatic in nature.

• Determine if a patient is responsive or unresponsive; an adult, child, or infant.

• Rapidly identify the need for immediate airway intervention.

continued

Remember

• Determine if the patient’s condition is stable enough to allow further assessment and treatment at the scene.
Questions to Consider

• What factors will you take into account in forming a general impression of a patient?
• How should you assess a patient's mental status with regard to the AVPU levels of responsiveness?

Questions to Consider

• How should you assess airway, breathing, and circulation during the primary assessment?
• What is meant by the term priority decision?

Critical Thinking

• A middle-aged male is lying on the street after being hit by a car. He appears unresponsive as you approach. You notice that he is bleeding from a laceration on his forearm and making gurgling sounds from his airway.

continued
Critical Thinking

• If you are alone, what factors do you consider in deciding what to do first? Why?

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