

TIPS FOR NAILING AN OEC SCENARIO EVALUATION

1. SCENE SIZE UP

Verbalize as you approach the scene: "I'm approaching the scene. I need to consider **scene safety**. I'm putting my crossed skis uphill to warn others. It looks like I have **one patient**. Looks like the patient took a hard fall and is guarding his right leg. **MOI** would be impact from the fall. I'm taking standard precautions, putting on **gloves** and a **mask**. There are a couple of bystanders next to him. Sir, can you help direct traffic away from the scene? I think I'll probably need additional patrollers and resources."

2. PRIMARY ASSESSMENT-Look for life threats

Verbalize your assessment as you do it. Address the patient directly: (**Introduce** yourself and ask **permission** to treat) "Hi, I'm Kurt with the Ski Patrol, can I help you?" (Form a **general impression**) "It looks like you took a fall and hurt your leg, right?" (Check for and control any **severe bleeding**) "Do you know if you're bleeding anywhere? Does anything feel wet, warm or sticky? Is it okay if I look inside your clothing for any bleeding?" (Asses level of responsiveness-**AVPU**) "Looks like you're fully alert." (Quickly check **ABCDs**) "Patient has an **airway** and is **breathing**. Can I quick check your **pulse**?" (Ask person, place, time & event-**A&Ox4**) "Can you tell me your **name**? Can you tell me **where** you are? Can you tell me **what day** it is? Can you tell me **what happened**?" (Obtain **chief complaint**) "So you have pain in your upper leg, right?" (Make radio call for additional resources) "Ski Patrol, this is Kurt. I'm on Buffalo Jump, halfway down on skiers' left. I have a male patient about age 15 with an injured leg. I'll need 2 or 3 additional patrollers, a toboggan and trauma pack." (If EMS is needed, make radio call to office) "Office this is Kurt with Ski Patrol. I have a male patient about age 15 who will need EMS. Can you call Metro and dispatch an ambulance? Thanks."

3. TAKE A PATIENT HISTORY

Verbalize your history taking while waiting for additional resources to arrive: Take a **SAMPLE** history (Signs & Symptoms) "Can you tell me about your injury? About the pain?" (Allergies) "Are you allergic to anything? Allergic to any medications?" (Medications) "Do you take any medications? Can you tell me what you take that for? Have you used any alcohol or drugs today?" (Past pertinent history) "Have you ever injured your leg before? Have you ever had a broken bone?" (Last oral intake) "Can you tell me the last time you ate or drank anything? What did you eat?" (Events leading to incident) "Was there anything that caused your fall? Were you feeling dizzy or anything? Did you hit a rock or catch an edge?" **Verbalize** your assessment of pain using **OPQRST**: "**When** did your leg start to hurt? As soon as you hit the snow? Does anything make it hurt **worse**, or make it feel **better**? Can you **describe** the pain? Is it sharp, dull, or throbbing? Does the pain **travel** anywhere else on you? Does it hurt in your foot or your back? Can you tell me **how much** it hurts on a scale of 0 to 10, with 0 being no pain and 10 being the worst you've ever had? How **long** has it been hurting? How long ago did you fall?"

4. SECONDARY ASSESSMENT- Do a head-to-toe exam.

Verbalize to your patient every step you take. (Identify any **DCAP-BTLS**) "Can I check to see if you have any other injuries? Can I look at your head and scalp? Does anything hurt or feel tender when I touch you? Can you follow my finger with your eyes? ... (Continue a complete head to toe survey, head, neck, back, chest, abdomen, pelvis, arms and legs) "Can you wiggle your fingers? Can you feel this when I touch your hands? Can you squeeze my fingers? Patient has good cap refill. Can you wiggle your toes? Can you press on my hand with your boot?" (Focus on chief complaint last. Expose skin as necessary) **Verbalize** taking vital signs: "Can I check your pulse? Respirations are 20. This is a Pulse Oximeter. Can I place it on your finger?"

5. REASSES PATIENT THROUGHOUT SCENARIO

Verbalize reassessment: "How are you doing? Anything getting worse? Can I check your vital signs again? I want you to squeeze my fingers again? Is anything feeling weak or numb?"

6. COMPLETE APPROPRIATE TREATMENT

Control Life Threats immediately during primary assessment.

Make a Plan and verbalize it to your helpers and your patient.

Take the Lead by directing other patrollers and helpers.

Stabilize above and below the injury.

Check CMS before and after splinting.

Follow Through with your decisions for lifting and transport.

Review by verbalizing follow-up care in the hut and transfer to the next level of care.

Finish Up by telling your evaluators you are done. Don't drag it out or second guess yourself. You nailed this!