

# WFR - PATIENT ASSESSMENT

## ▶ OPEN A CAN OF CALM & SCENE SIZE-UP

1. I'm Number One (Scene Safety)
2. What Happened to You?
3. None on Me (BSI / Gloves)
4. Any More?
5. How Alive?

## ▶ LIFE THREATS - ABCDE (INITIAL ASSESSMENT)

- Identify Self
- Get Permission to Help
- Airway - look in mouth
- Breathing - two breaths, expose chest injuries
- Circulation - assess pulse - do a blood sweep - control life-threatening injuries
- Decision About Disability - MOI for spine injury? [ASK: What Happened?]
- Expose Injured Areas - (ASK: Where does it hurt the most?)

>> **EXPOSE INJURY & TREAT LIFE THREATENING INJURIES** <<

## ▶ HEAD TO TOE (SECONDARY ASSESSMENT)

- Complete head to toe assessment: look, listen, and feel / CHECK BACK & CSMs!

## ▶ VITAL SIGNS Name \_\_\_\_\_ Age \_\_\_\_\_ Identify as Gender \_\_\_\_\_

TIME			
Levels of Resp. (LOR)			
Heart Rate (HR)			
Respiratory Rate (RR)			
Skin (SCTM)			
Blood Pressure (BP)			
Pupils (P)			
Temperature (T)			

LOR = Awake & Oriented A+Ox4 = Person, Place, Time, Event.

V=Unresponsive Verbal / P=Unresponsive Pain / U=Unresponsive

HR = Rythm: regular/irregular. Quality: strong/weak/bounding

RR = Rythm: regular/irregular. Effort easy/shallow/labored/deep

SCTM = Color/Temp/Moisture: pink/pale/ashen, warm/cool, dry/moist

BP = if no cuff palpate pulse, if detected write, "strong radial pulse"

P = PERRL Equal, round and reactive to light

BSI = Body Substance Isolation  
CSMs = Circulation, Sensation, Motion  
FSA = Focused Spine Assessment  
MOI = Mechanism of Injury  
HPI = History of Present Illness  
S/S = Signs & Symptoms  
Tx = Treatment

**NORMAL ADULT VITAL SIGNS**  
LOR: A+Ox4 | HR: 50-100/regular/strong | RR: 12-20/regular/strong  
SCTM: pink/warm/dry | BP: Less than 120/80 | P: PERRL | T: 98.6F (37C)

## ▶ SAMPLE

Symptoms: Headache? Dizziness? Nausea? Cold? Hot? Stress?

-Onset: How fast did this pain come on?

-Provokes: What makes pain worse / better?

-Quality: What words describe the pain?

-Radiates/Region: Where is the pain? Is it distracting from other areas of pain?

-Severity: (Find their ten for pain) How does this rate on a scale of 1-10?

-Time: How long has this been going on?

Allergies: Allergies to Medications? Foods? Insects? Pollens? Exposure?

Medications: Over the Counter? Prescriptions? Alcohol / Drugs? Herbal? Any ED meds?

Pertinent Medical History: Diabetes? Asthma? Seizures? Heart Issues?

Last Intake/ Output? (quality and quantity) Food? Water? 1 & 2 (color/odor) Vomiting?

Events Leading Up to Incident? (Relevant to Cause of MOI)

## ▶ FOCUSED SPINE ASSESSMENT (FSA)

PERFORM WITH MOI & WITHOUT S/S of SPINE INJURY

LOR A+Ox3 or 4 | SOBER | NOT DISTRACTED | NORMAL CSMs | PALPATE SPINE

IN ALL 4 EXTREMITIES  
& PATIENT DENIES PAIN

If ALL criteria are met, and patient agrees, OK to release spine. Ask patient that if they later have tingling/numbness in extremities or head pain to let you know.

## ▶ MAKE EVAC DECISION

## ▶ MONITOR YOUR PATIENT - KEEP CHECKING VITALS & CSMs

ABOUT:  
The infosheet was created for personal use while completing several NOLS Wilderness Medicine WFR courses. It is offered freely to WFR students & WFRs who might need some additional help after opening that "can of calm." This is not intended to be a substitute for professional training - get WFR certified. Send any suggestions or corrections to mark@letsgoexploring.com.