

State of Wisconsin
EMT Basic
TRAUMA ASSESSMENT
Practical Skills Checklist

	Possible Points	Earned Points
SCENE SIZE-UP		
Takes or verbalizes BSI prior to patient contact *	1 *	
Scene size-up <input type="checkbox"/> Scene is safe * <input type="checkbox"/> MOI / NOI <input type="checkbox"/> Number of patients <input type="checkbox"/> Additional help / resources <input type="checkbox"/> C-Spine considerations *	5 *	
INITIAL ASSESSMENT		
Verbalize general impression of patient	1	
Determine level of consciousness	1	
Determine chief complaint	1	
Assess airway and breathing <input type="checkbox"/> Patency <input type="checkbox"/> Assess breathing <input type="checkbox"/> Verbalizes high-flow oxygen *	3 *	
Assess circulation <input type="checkbox"/> Assess for bleeding <input type="checkbox"/> Assess skin condition <input type="checkbox"/> Assess pulse(s) *	3 *	
Identify patient priority / makes transport decision *	1 *	
FOCUSED HISTORY AND PHYSICAL EXAM/RAPID TRAUMA ASSESSMENT		
Selects and conducts appropriate assessment (focused or rapid assessment) <input type="checkbox"/> Head & neck <input type="checkbox"/> Chest <input type="checkbox"/> Abdomen <input type="checkbox"/> Pelvis <input type="checkbox"/> Extremities <input type="checkbox"/> Posterior	6	
Vital Signs <input type="checkbox"/> Pulse <input type="checkbox"/> Blood Pressure <input type="checkbox"/> Respirations <input type="checkbox"/> Skin <input type="checkbox"/> Pupils	5	
Obtains/Attempts to obtain SAMPLE history	1	
DETAILED PHYSICAL EXAM		
Assess head <input type="checkbox"/> Inspects/Palpates	1	
Assess neck <input type="checkbox"/> Inspects/Palpates	1	
Assess chest <input type="checkbox"/> Inspects/Palpates <input type="checkbox"/> Auscultates	2	
Assess abdomen <input type="checkbox"/> Inspects/Palpates	1	
Assess pelvis <input type="checkbox"/> Inspects/Palpates	1	
Assess extremities <input type="checkbox"/> Inspects/Palpates <input type="checkbox"/> R Arm <input type="checkbox"/> L Arm <input type="checkbox"/> R Leg <input type="checkbox"/> L Leg	4	
Assess posterior <input type="checkbox"/> Inspects/Palpates	1	
Identifies/Manages Secondary injury(ies) (voice treat)	1	
ON-GOING ASSESSMENTS		
<input type="checkbox"/> Repeats initial assessment <input type="checkbox"/> Evaluates response to treatments <input type="checkbox"/> Repeats focused assessment <input type="checkbox"/> Repeats vital signs	4	
TOTAL TIME: _____ : _____	Points Possible / Earned	44

*** Critical Criteria (Comment Required)**

- Failure to verbalize or take BSI prior to patient contact _____
- Failure to determine scene safety _____
- Failure to consider c-spine (voice acknowledge) _____
- Failure to verbalize high-flow oxygen _____
- Failure to assess pulses _____
- Failure to identify high priority patient prior to detail physical exam _____
- Did detailed physical examination before assessing the airway, breathing and circulation _____

Comments (required for Critical Criteria): (Continue on back if necessary)

NREMT EXAMINER ONLY	
<input type="checkbox"/> PASS <input type="checkbox"/> FAIL	

RETEST _____

STATION - D

TRAUMA ASSESSMENT

DATE: _____

CANDIDATE'S NUMBER: _____

PRINT CANDIDATE'S NAME: _____

PRINT EVALUATOR'S NAME: _____

EVALUATOR'S SIGNATURE: _____